Enablers and Constraints Women Encounter in Advancing to Senior Managerial Positions: Case of South African Military Health Institutions in the Western Cape

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Abstract: South Africa has made notable progress in narrowing the gender gap in managerial positions since 2004. The percentage of women members of parliament (MP's) has increased from 33% in 2004 to 46% in 2019. However, women appear to remain underrepresented in senior management in one of South Africa's historically male-dominated departments, the Department of Defence (DOD). This study aimed to determine the enablers and constraints that women encounter in advancing to managerial positions in Military Health Institutions in the Western Cape. A mixed method was employed to answer the main research question: "What are the enabling and constraining factors women encounter in advancing to senior managerial positions"? Qualitative data were collected by means of semi-structured interviews, open-ended questionnaires and through SANDF document analysis. Biographic and background information was collected and reported as frequency statistics. The questionnaire was completed by 36 participants. Interviews were conducted with Officers Commanding (OCs), Heads of Department (HODs) of Human Resources and Regimental Sergeant Majors (RSMs) from Military Health Institutions in the Western Cape. The results were analysed according to the Micro-individual, Meso-organisational, and Macro socio-cultural levels of the multi-relational framework. It has been found that women are relatively well represented in Officer in Charge (OIC) and HOD positions, but no women to date had held an OC post. Gender equality policies are in place, and it is expected all organisations and businesses comply, including the SANDF. The SANDF neglects to comply with the legislative prescripts, as compliance ensures gender parity and diversity on all senior managerial levels, thus giving women the opportunity to contribute to the strategic objectives of the country, the DOD, and the SANDF. One limitation of the study is the low response rate, which may be attributed to the participants' busy schedules, as they were compelled to provide essential services during the national COVID-19 pandemic. It is recommended that future studies include one of South Africa's major Military Health Institutes, 2 Military Hospital in Wynberg, Cape Town, and all women officers in all areas of specialisations.

Keywords: Enablers, Constraints, Gender equality, South African Military Health Institutions

1. Introduction

The South African National Defence Force has made great strides post-1994 in improving race and gender composition within its ranks, which may be largely attributed to the Constitution of the Republic of South Africa. However, twenty-seven years later, women are still underrepresented in senior management in the DOD as reflected in the 2019 DOD macrostructure (DOD, 2019). The macrostructure of the DOD (2019) only has three (25%) women compared to nine (75%) men that formed part of the highest executive function of the DOD. On level 2 in the SANDF there has been no woman between 1994 and 2019 (DOD, 2019). This macrostructure begs the question, why are there so few women in managerial positions?

Senior managerial positions in the current study refer to officers serving as Officer Commanding (OC), Head of Department (HOD) and Officer in Charge (OiC) regardless of their rank. It therefore does not make reference to senior officers only, but to the senior position the incumbent holds. No data is available on how diversity is managed in the Military Health Institutions in the Western Cape. However, since joining one of the Military Health Institutions the researcher observed that possible disparities exist across race and gender and associated occupations and positions with only two women in the senior officer group currently to serve as Heads of Department. It begged the question whether this is the norm in other Military Health Institutions, or whether it holds true only of military health institutions in the Western Cape.

The purpose of this study was to determine the enabling and constraining factors that women encounter in advancing to senior managerial positions in South African Military Health Institutions in the Western Cape. The objectives of the study were: a) to determine the factors that women experience as constraints and enablers in advancing to senior managerial positions in Military Health Institutions in the Western Cape; b) to highlight implications of advancement of women to senior managerial positions for reaching the strategic objectives of Military Health Institutions.

2. Theoretical Framework

The current study adopts a feminist approach within a multi-level relational framework in order to address the enablers and constraints women encounter in advancing to managerial positions within health institutions in the Western Cape (Taylor & Wells, 2017). Coe (2019:243) posits that a feminist is a proponent for the liberation of all people from discriminatory practices, dominations, and oppression. Therefore, conducting research through a feminist lens, allows researchers to explore and gain insight into understanding the views and experiences of women faced with within the context of a research study on the micro, meso, and macro levels (Lay & Daley, 2007).

3. Literature

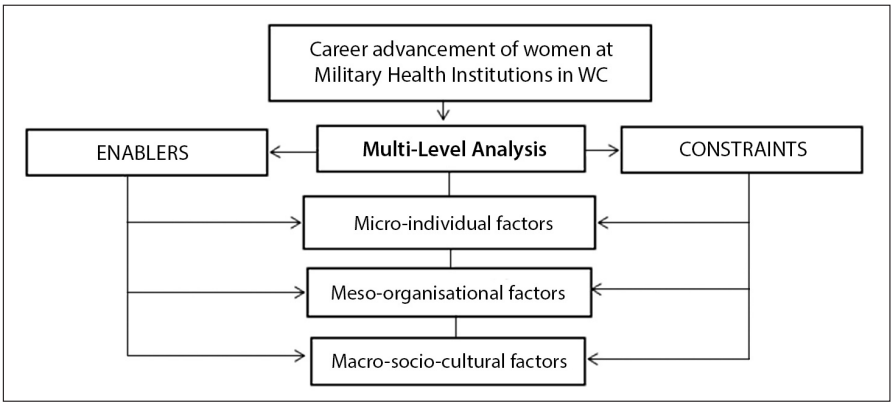
3.1 Diversity Within the South African National Defence Force

During a Parliamentary Committee meeting on Defence in 2015, the Chief Director of Transformation Management of the SANDF indicated the SANDF focus was on mentoring, coaching and leadership training that would assist in the increase of women at the decision-making level. The Chief Director advised that diversity programmes should be presented in all units. It is disappointing that of the eight Lieutenant Generals/Vice Admirals, none was a woman; of the 40 Major Generals/Rear Admirals, 7(17.5%) were women and of the 170 Brigadier Generals/Rear Admirals (Junior Grade), only 61(35.8%) were women (defenceWeb, 2019). No woman features on level 2 (DOD, 2019). Only 25% (n=3) of officers on the macrostructure of the DOD level 0 to 2 (DOD, 2019) are women compared to 75% (n=9) being men.

3.2 Enabling and Constraining Factors for Women to Advance to Leadership Positions

The enabling and constraining factors have been analysed using a multi-level approach (Taylor & Wells, 2017) through which the macro socio-cultural, meso-organisational, and micro-individual levels are integrated. Diehl and Dzubinski (2016) argue that studies around the challenges women face are primarily focused on barriers within organisations, thus not considering the wide variety of barriers and their prevalence across all societal levels. Micro-factors include individual agency, motivation, identity and various forms of human capital that influence individual capabilities and opportunities. The meso level involves the organisational processes that mediate employment opportunities according to individual abilities and contextual circumstances. The macro level involves structural conditions, including social values, social stratification, the conception of law, family and work; is the all-encom-

Figure 1: Theoretical Framework



Source: Taylor & Wells (2017)

passing domain within which all other layers exist (Syed & Ozbilgin, 2009:237).

3.3 Women in STEM Careers

The World Economic Forum states that women are underrepresented in STEM-related fields; only 30% of the world's scientists are women; less than a third of women choose to study higher education courses in fields like science and engineering; and women working in STEM fields publish less often and receive less pay (Wood, 2020). Women are overrepresented in STEM fields, such as medical services. They further assert that women's career choice is influenced by gender norms and stereotypes even beyond observed gender differences in interests (Su & Rounds, 2015). It is argued that cultural influence determines the choice of work and the field of education women pursue (Haveman & Beresford, 2012).

STEM-related occupations constitute eight of the top ten scarce skills in South Africa (Moleko, 2018). Moleko (2018) asserts that by addressing stereotypes which perceive STEM-related careers to be the work of men, and by providing TVET with the necessary resources to deliver technical, engineering and artisan skills to women, the growing gender gap in South Africa would be narrowed.

The concentration of women in communal occupations continues as result of gender stereotypes that consider men to be more agentic than women (Heilman, 2012). Society has influenced and assigned specific roles which are perceived as gender-appropriate behaviours to both men and women. Fear of backlash from others also attributes to the lack of interest from women to pursue careers perceived to be exclusively for men (Rudman, Moss-Racusin, Glick & Phelan, 2012). Men and women switching societal gender roles are more likely to receive backlash than those conforming to stereotypes (Rudman *et al*., 2012).

According to Stats SA (2017:34), seven in ten of all women students (70.7%) studied education compared to 29.4% of men students. Despite the fact that there are more women in the labour force, role segregation remains a reality in the labour market. Women are still concentrated in occupations that require communal traits. The statistics released by the South African Nursing Council (2017) indicate the total nursing workforce for women to be 259 495 (90.39%) compared to 27 584 (9.61%) for men.

4. Research Design and Methodology

The mixed-method approach formed the overall design of the study (Creswell, 2014) for the broad purposes of breadth and depth of understanding and corroboration (Johnson, Onwuegbuzie & Turner, 2007). The study is grounded on interpretivism epistemology that argues that truth and knowledge are subjective, culturally and historically situated based on lived experiences and understanding of participants (Ryan, 2018:9). For this study, qualitative data were collected by means of semi-structured interviews with key informants, open-ended questionnaires and SANDF document analysis (Policies, Instructions), and quantitative data was collected through post profiles of personnel, Unit post structures and biographical information of Military Health Institutions. Approval was granted by the SANDF and Stellenbosch University (Ref MIL-2020-14785).

The study was concentrated in the Western Cape and includes two Military Health Units, namely Institute for Maritime Medicine (IMM) situated in Simon's Town, and Area Military Health Unit Western Cape (AMHU WC) situated in Wynberg. IMM and AMHU WC (five Health Centres and six sickbays) are the only two units that provide health services to military members and their dependents in the WC as illustrated in Figures 2 and 3 on the following page.

IMM is commanded by an OC with HODs in charge of the various Departments as illustrated below.

AMHU WC is commanded by an OC but comprises five Health Centres, each of which is managed by an OiC, who is also responsible for the management of the respective Sick Bays as illustrated in Figure 3.

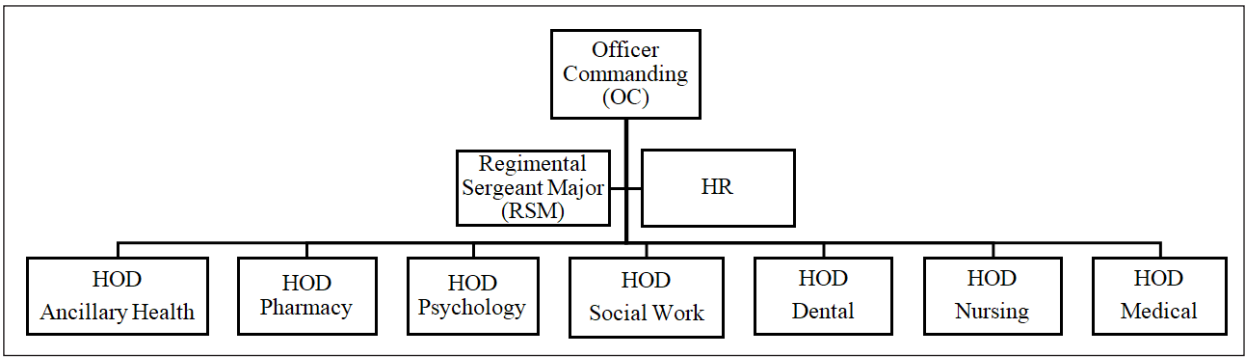
4.1 Interviews

Due to COVID-19, semi-structured in-depth interviews were conducted via telephone with two key informants (OCs, HODs of the Human Resource Department, and RSMs) from each site called KI 1, KI 2, KI 3 and KI 4. Interviews took approximately 30-45 minutes. Consent was obtained to record the interviews. Interviews were transcribed by the researcher.

4.2 Questionnaire

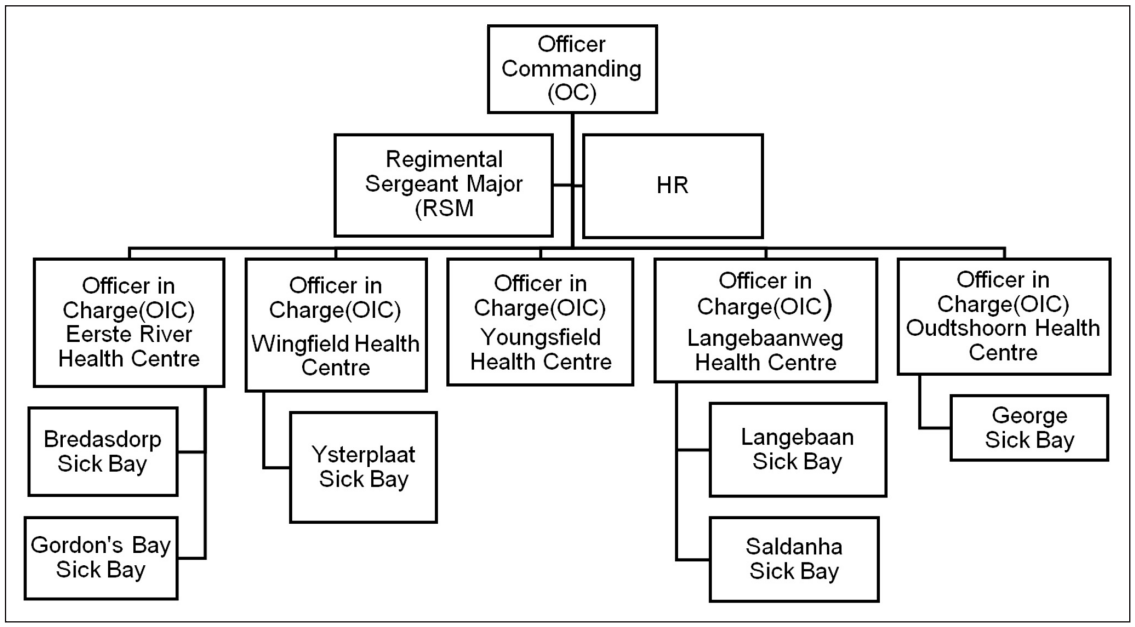
Questionnaires were only administered to senior and junior officer women from "SAMHSI 1" and

Figure 2: Organisational Chart IMM



Source: Authors (2022)

Figure 3: Organisational Chart AMHU WC



Source: Authors (2022)

"SAMHI 2" as they are potential candidates to progress to senior managerial positions. As a result, civilian women and women as non-commissioned officers were excluded from this study. The questionnaire was completed online. Sixty-seven potential survey participants indicated their willingness to take part in the survey, but only 36 completed the questionnaire.

4.3 Documents

The SANDF Transformation policy and Macro-structure of the DOD were retrieved from the DOD intranet portal. The latter documents were used to determine whether, and to what extent women have made progress in advancing to key senior positions in the DOD and SANDF. Unit structures, which only include OCs HODs, OiCs and RSMs as these are the senior managerial positions according to this study and Ancillary Health, Pharmacy, Psychology, Dental, Nursing, and medical departments, were requested and subsequently provided by the respective HR departments. Structures of the various departments were also obtained from various OiCs at the Health centres, and these structures were corroborated with primary structures of Units. The Unit structures and respective profiles of members against posts held are relevant SANDF documents to determine the

ratio of men to women in various departments; their education, skills, experience, and position.

4.4 Data Analysis

Thematic content analysis was applied to analysing and reporting themes from qualitative data (Maguire & Delahunt, 2017). Codes were generated and subsequently categorised into potential themes according to the multi-relational framework (Micro-individual, Meso-organisational and Macro level) (Vaismoradi, Turunen & Bondas, 2013). Quantitative data was analysed by using tables and graphs as well as statistical analysis by means of two-way frequency tables and the Logit and Probit models. Information sourced from the unit structures and post structures were tabulated according to the position, the total men/ women in various positions and within each department.

4.4.1 Trustworthiness

In this study credibility was achieved through triangulation and member checks (Korstjens & Moser, 2017). Transcribed interviews were emailed to participants to confirm authenticity of their responses. The summary of the findings was also emailed to the participants.

5. Results

5.1 Managerial Positions

Gender is equally (50%) distributed in the RSM position; three women (60%) and two men (40%) for OIC, and four men (57.1%) and three women (42.9%) occupy HOD positions.

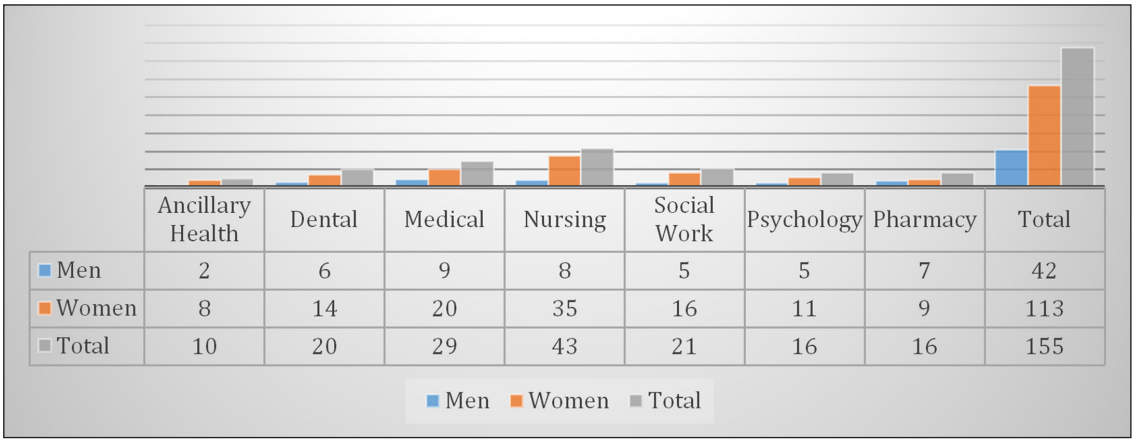
5.2 Gender Composition Per Department of the Military Health Institutions

The total number of women officers in the departments is 113 (72.9%) and 42 (27.1%) for men.

5.3 Findings From the Questionnaires

Table 2 on the next page shows a summary of the biographic and background information.

Figure 4: Departmental Gender Statistics



Source: Authors

Table 1: Gender Representation of Managerial Positions of Officers in SAMHS in the WC

Position	Men	Women	Total	%
OC	2 (100%)	0 (0%)	2	100%
RSM	1 (50%	1 (50%)	2	100%
OIC	2 (40%)	3 (60%)	5	100%
HOD	4 (57%)	3 (43%)	7	100%
Total	9 (56.25%)	7 (43.57)	16	100%

Source: Authors

Table 2: Demographic and Background Details of Survey Participants

	Senior	Junior	Total
Race (n=35)			
Blacks	1	4	5 (14%)
Coloured	4	10	14 (40%)
Indian	0	1	1 (3%)
White	4	11	15 (43%)
Marital Status (n=35)			
Married	5	17	22 (63%)
Single	3	8	11 (31%
In a relationship	1	1	2 (6%)
Children (n=35)			
1 Child	0	7	7 (20%)
2 Children	3	8	11 (31%)
3 Children+	2	1	3 (9%)
None	4	10	14 (40%)
Children's Age (n=27)			
0-5 years	2	7	9 (33%)
6-13 years	1	3	4 (15%)
14-18 years	0	5	5 (19%)
19+ years	3	6	9 (33%)
Experience (n=35)			
Less than 5 years	0	2	2 (6%)
5-9 years	4	8	12 (34%)
10-19	3	8	11 (31%)
20-29	1	6	7 (20%)
30-39	1	2	3 (9%)
Educational Qualification (n=33)			
Diploma	0	3	3 (9%)
Degree	3	15	18 (55%)
Postgraduate degree	4	8	12 (36%)

Source: Authors

Table 3: Position and Educational Level Two-Way Frequency

Educational Level	Position	
	Junior Officer (n=26)	Senior Officer (n=10)
Matric Certificate	0	0
Certificate/Vocational Diploma	3	0
Degree	15	4
Postgraduate	8	4

Source: Authors

Biographic and background information prompted the researcher to report frequency statistics to encompass statistical analysis. Hence data analysis was conducted through two-way frequency Tables, and the Probit and Logit models.

5.4 Statistical Analysis

The analysis of a two-way frequency table between position and educational qualification shows that it is statistically insignificant with Chi-Square of 5.23 and a probability of 0.155. Junior officers have more Higher Education (HE) qualifications with a total of 15 (75.7%) degrees compared to only 4 (40%) degrees held by senior officers respectively. Eight (30.8%) junior officers are in possession of a postgraduate qualification compared to the 4 (40%) postgraduate qualifications held by senior officers. Three (11.5%) junior officers are in possession of a vocational diploma or certificate.

Table 4 two-way Chi-Square of 2.58 and probability value of 0.763 shows that the frequency table is statistically insignificant. It makes sense that the total of senior officers is less than the total of junior officers. Therefore, not all junior officers will ascend to senior posts. There is only one senior officer and two junior officers with work experience of between 30 and 39 years of service. Six of the junior officers and one senior officer reported 20 to 29 years of service. Junior officers with years of service from 10 to 19 years are eight, senior officers are three. Those with between five and nine years of service are eight junior and four senior officers. Only two junior officers have experience of less than five years of service.

The two-way frequency table of marital status and position was analysed. There were about 35 women officers surveyed, of whom 22 were married. The variable was dropped due to one member not indicating marital status. Table 5 is statistically insignificant in explaining the two-way frequency table with a Pearson Chi-Square of 1.14 and with a probability of 0.564. There are 17 junior officers who are married and five senior officers. There is one junior officer and one senior officer who are in a respective relationship. There are eight junior officers and three senior officers who are single.

5.4.1 Assumptions of the Study

The nonlinear regression applied to the surveyed 36 women officers in Military Health Institutions in the Western Cape. The dependent variable Y

Table 4: Years of Service and Position Two-Way Frequency

Years of Service	Position	
	Junior Officer	Senior Officer
Less than 5yrs	2	0
5-9 years	8	4
10-19 years	8	3
20-29 years	6	1
30-39 years	2	1

Source: Authors

Table 5: Marital Status and Position Two-Way Frequency

Marital Status	Position	
	Junior Officers	Senior Officers
Married	17	5
In a relationship	1	1
Single	8	3

Source: Authors

in the study is the Job position of all surveyed women officers. The value of variable Y equals 1 if the women officer is in a managerial position. The Probit and Logit models have been used to determine dependent variables of values lying in the two extremes of 0 and 1. The variable selected to be used in the dataset is "Years of Service", which means that the criteria for "experience of years of service" was created from 0 to 39 years of service, starting from 0 to 5 years of service, 5 to 9 years of service, 10 to 19 years of service, 20 to 29 years of service, and lastly, 30 to 39 years of service. A midpoint for the interval was created. For example, for years of service between 0 and 5, "2.5 years of service" was used. For years of service between 5 and 9, "7 years of service" was used as the midpoint of the year of service. For years of service 10 and 19, "15 years of service" was used. For the category year of service between 20 and 29 years of service, "25 years of service" was used, and 35 was used in the years of service for the category of 30 to 39.

"Married" is another variable that was used as a constraint because women officers who are married will not necessarily leave their homes as they prioritise family responsibilities above to attending courses in another province. If a respondent selected "married", it is assumed that it meant the person is in fact officially married, and then their variable is equal to 1; if not married, then the person is assumed to be either single, or in a non-formalised relationship, therefore, to be classified as zero.

Educational qualification was classified as equal to 1 if the woman as an officer had a minimum of a first degree. If the individual did not have a first degree, then her entry was classified as equal to zero. That is inclusive of women officers who have a postgraduate degree. The majority of the women officers surveyed have at least a first degree. Out of the 36 women officers surveyed, only 5 were not in possession of a first degree. The personal attribute variable assumes that when women officers agreed that any form of motivation, determination, willpower, endurance and anything agreeing to the importance of personal attribute is an enabler, it will equate to 1; if nothing is reported, it is to zero. The woman officers who reported that military courses were important in getting a managerial position were equated to the number 1; non-responses or blank spaces were classified as zero. All respondents classified as number 1 were agreeing that studying for a formal academic qualification and attending military courses will be beneficial to their getting a managerial position.

5.4.2 Logit Model

The assumptions listed by Christensen (1990) of the probability function is:

$$P_i = E(Y = 1 \mid X_i) = \frac{1}{1 + e^{-(\beta_0 + \beta' X_i)}}$$

The equation was modified for the purpose of the study:

$$P_i = E(JobPosition = 1 \mid X_i)$$

$$= \frac{1}{1 + e^{-(\beta_0 + \beta_1 Qual + \beta_2 Married + \beta_3 YrsOfService + \beta_3 PerAtt + + \beta_4 MilitCourse)}}$$

Where i is the $(i)th$ woman employee.

5.4.3 Probit Model

To estimate the unknown parameters of the Probit model, the cumulative distribution function of the standard normal distribution after substitution for the purpose of this study was used:

$$F(\beta_0 + \beta_1 Qual + \beta_2 Married + \beta_3 YrsOfService + \beta_4 PerAtt + \beta_5 MilitCourse)$$

$$\beta_0 + \beta_1 Qual + \beta_2 Married + \beta_3 YrsOfService + \beta_4 PerAtt + \beta_5 MilitCourse$$

$$= \frac{1}{\sqrt{2\pi}} \int_{-\infty} e^{\frac{-z^2}{2} dz}$$

On both the Logit and Probit models *Qual* represents educational qualification, *YrsOfService* = Years of Service *PerAtt* = Personal Attribute, and form the cumulative distribution function of the standard normal distribution after substitution for the purpose. *Militcourse* represents military course taken by the woman employees.

5.4.4 Estimation Results

Below is a discussion of the estimated parameters of the nonlinear regression models. The Logit and Probit models are estimated, and the results concluded. The dataset shows that 62% of the participants are in managerial positions. Woman officers reported that educational qualifications contributed 97% to job position, personal attribute contributed 34%, and military course were the lowest contributor at 30%. The average years of service for respondents was 15 years. Based on information provided by the 35 participants on questionnaires, 13 (36.1%) women were not in any form of managerial position; 22 (61.1%) were in fact in a managerial position. One (2.8%) officer did not provide any information.

The Logit model shows that the constant coefficient will less likely decrease, and more likely to decrease for the Probit model. Results show "Years of service" for the Logit model is more likely to decrease, and less likely to decrease for the Probit model. Results for both the Logit and Probit model show "Educational qualification" will more likely increase. Marital status shows a less likely increase for the Probit model and less likely for the Logit model. Woman officers consider military courses as a constraining factor. Based on the Probit and Logit models, results show that for both the Probit and the Logit model it will less likely increase. "Personal Attribute" is more likely to increase for both the Probit and Logit models.

The marginal effects interpretation concludes that "Years spend in the service of Military Health Institutions in the Western Cape" is less likely to decrease by 10% of the jobs position for the Logit model, and less likely decrease by 1% for the Probit model. Educational qualification shows that for the Probit model, the marginal effects will more likely increase by 36.6%, while the Logit model marginal effects will more likely increase by 37.5%. Marital status will more likely increase by 6.0% for the Probit model of marginal effects at means, while the Logit model will more likely increase by 6.6%, for that are in managerial position. "Military course" will less likely decrease by 0.02% for the Probit and less likely increase by 3% for the Logit model.

Table 8 with classification for "Job position" shows the results correctly predicted at 66.67% for both the Probit and Logit models respectively. The rest of the percentage falls under misclassification.

Table 6: Probit and Logit Results for Job Position

Job Position	Model Results	
	Probit	Logit
Constant Coefficient	-0.388	-0.614
Years of Service	-0.029	-0.042
Educational Qualification	0.966	1.582
Marital Status	0.003	0.280
Military Course	0.178	0.014
Personal Attributes	0.309	0.490

Source: Authors

Table 7: Probit and Logit Marginal Effects Results for Job Position

Job Position	Marginal Effects at Means	
	Probit	Logit
Years of Service	-0.010	-0.110
Educational Qualification	0.366	0.375
Marital Status	0.060	0.066
Military Course	-0.0002	0.003
Personal Attributes	0.107	0.1163

Source: Authors

Table 8: Classification for Job Position

Job Position	Model Results	
	Probit	Logit
Correctly Classified	66.67%	66.67%

Source: Authors

6. Discussion of Findings

In total, 537 codes were generated, which were then clustered into fifteen into six themes, but are interdependent and interrelated. The results and summary of findings are presented and discussed within the multi-level relational framework.

6.1 Micro-Individual Level

6.1.1 Personal Attributes and Agency

It has been found that agency, education, and military courses are regarded enablers, as participants spoke of: "Being eager to learn and advance in my career that led me to doing Officers Formative almost immediately after joining" (SO5, 2020). They pointed out that they studied at own cost, and not only wait to study at state expense. Nine (25%) survey participants and two (50%) interviewees affirmed that lack of agency constrained their career advancement, reporting "I'm actually still not course qualified for ... post, but the fact remains that was self-imposed, I didn't nominate myself for the required courses, because I was not really interested in doing the courses as I felt that it was a waste of time" (KI 2, 2020). Some pointed out the impact of having done the military courses saying "I have not done Senior Staff Course that would be the biggest hurdle for me being promoted is not having Senior Staff Course. I however have declined the course on more than one occasion because of social reasons" (KI 4, 2020). It should be noted, however, that eagerness to learn does not necessarily translate into promotion, because 30% of participants with postgraduate qualifications are still junior officers. Findings from this study support the findings by Hora (2014) who asserts that individual factors such as lack of education, lack of adequate skill, lack of confidence and willingness of women themselves, and lack of years of service, affect women participation in leadership and public institutions.

A study by Tlaiss (2013) affirms that personality characteristics, agency and persistence and desire for advancement are all factors that contribute to career advancement. Betron, Bourgeault, Manzoor, Paulino, Steege, Thompson and Wuliji (2019) dismissed factors such as lack of interest, difference in career commitment, or years of education as reasons for the absence of gender equality in healthcare leadership. Instead the existence of engrained gender bias, lack of opportunity to advance to leadership positions, and a glass ceiling within health-care and other sectors constrain females from advancing to leadership positions.

6.1.2 The Role of Continuous Professional Development

It was evident that both military and academic qualifications were considered as enablers, as participants spoke of "Obtaining battle handling and Primary Health care" (SO 1, 2020) and "Officers Formative military course advanced my Defence Force career" (SO 2, 2020); "Completing Officers Formative course allowed me to be promoted at the unit I am currently" (SO 6, 2020). The DOD Transformation policy makes provision for equal opportunities and exposure to training for all DOD officials regardless of age, gender, disability, culture. However, qualifications did not guarantee promotion, because of limited managerial positions available in military units.

These views are consistent with the findings of a study conducted by Vong, Ros, Morgan and Theobold (2019) wherein healthcare workers identified capacity and qualifications as enablers. The views of participants seemed contrary as 40% of senior officers held first degrees as well as postgraduate degrees, while 57% of junior officers held first degrees, and 30.8% held postgraduate degrees. However, 27 years into democracy, the SANDF through its Transformation Policy acknowledged that potential barriers in managing diversity could adversely affect the image and working relationships, confidence and work performance and pointed out unfair distribution of developmental and promotional opportunities as one of the potential barriers (DOD, 2014). Yet, one participant in this study reported "Access to promotional courses are [sic] zero" (SO 4, 2020). Conversely, it appears that even though the DOD provides individuals opportunities to attend courses, family commitments appeared as a constraint saying "I have not done Senior Staff Course that would be the biggest hurdle for me being promoted is not having Senior Staff Course. I however have declined the course on more than one occasion because of social reasons" (KI 4, 2020).

They prioritised family responsibilities over promotional courses "I'm actually still not course qualified for ... post, but the fact remains that was self-imposed, I didn't nominate myself for the required courses, because I was not really interested in doing the courses I felt that it was a waste of time" (KI 2, 2020).

6.1.3 Deployment

Deployment, and willingness to participate in organized military exercises and operations were considered as enablers saying "Being open to deployment and attending courses" (JO 21, 2020); "...willingness to do courses, partake in exercises and operations, and I think most importantly, willingness to be a Staff Officer..." (KI 4, 2020). Participants had conflicting views on deployments saying "None. I have deployed five times, from Burundi two times to DRC three times. Last deployment was in 2015/16. No recognition except a medal 10 years after my first deployment. No career advancement or rather payment for post occupied" (JO 5, 2020). Mlambo-Ngcuka and Zewde (2020) point out a blunt implementation gap concerning women's participation in peace processes that exists at the highest levels, although existing evidence suggests that gender perspectives drive the sustainability of peace and security processes, saying women constitute only 4% of signatories of peace agreements, 2.4% of chief mediators, 3.7% of witnesses or observers to peace negotiations, and 9% of negotiation team members. Increasing women's participation in deployments would probably result in complying with legislative prescripts by "getting the numbers right", not necessarily for advancement to higher positions as set out in the AU Gender Policy (2009).

6.1.4 Family and Domestic Responsibilities

It was clear that family responsibilities are viewed as constraints, participants saying "As much as a good father brings to the table in terms of family structure there are just some responsibilities a mother has to take on for her children, especially in the early years. Most woman I have spoken to who deployed or did promotional courses that were mothers, regret the effect it had on their children as they were separated for many months. Many are just not willing to make these sacrifices" (JO 4, 2020); "As a mom it's my choice to put my relationship with my kids first and to rather not progress in rank. It's a choice I happily make, but I am sure many struggle with" (JO 20, 2020).

Conservative social norms and androcentric career pathways pose a challenge for women to find a balance between the pressures and demands from maternity leave, child-rearing, caregiving, domestic responsibilities and leadership (Bismarck, Thomas, Loh, Phelps & Dickinson, 2015:7) as confirmed by one participant: "The time it takes for a woman versus a man to become a manager is many more years, due to childbearing and their roles as primary caregivers... she fulfils many roles" (JO 8, 2020) of being a mother, wife and career woman (Chinyamurindi, 2016).

Hora (2014) too found that 80.28% of women participants consider domestic responsibilities as a constraint. This was evident from the responses from current participants who reported: "Since having children I haven't been as ambitious about advancing, because I need more time with my kids" (JO 20, 2020); "Once a member has a family, many chose to stagnate their career and opt to forego promotional courses and responsibilities in order to attend to their family needs" (JO 4, 2020).

Although marriage is perceived as a constraint, available data does not seem to support this as marriage is not statistically significant. Discriminatory cultural values, gendered social roles and expectations are constraints to the career advancement of women (Tlaiss, 2013). Women are expected by their families and themselves to keep their role of care-giver unchanged, irrespective of their work obligations, whereas men perform activities associated strength and force (Eagly & Wood, 2012).

6.2 Meso-Organisational Level

According to Gouws (2019), the establishment of various structures in coalition with feminist activists and academics were seen as intentional means of enforcing gender equality. Participants reported: "There are also political reasons, quotas based on race and gender put in place that may put some members at a disadvantage" (JO 4, 2020); some reporting "Socio-cultural and organizational conflicts, and gender discrimination" (JO 9, 2020); claiming that "Some people advance to management positions before any experience either based on connections". It has been found that women are fairly distributed amongst managerial positions, with more women than men employed across the departments. It can be said Military Health Institutions in the Western Cape are compliant in terms of legislative prescripts. However, gender diversity in terms of higher managerial positions, such as OC of Unit positions is skewed, as no woman occupies any OC position.

Patriarchy has been identified as a barrier. Dunn (1999) asserts that the integration of women in the military has been interpreted by men as intention to dilute male culture (Van Creveld, 2000). As a result,

women have to prove their masculinity by adopting masculine personality (Sasson-Levy, 2003), yet when women display masculine traits, they face backlash, as they spoke of "military continuing to be a strong patriarchal environment. It at times seems as if females are not acknowledged for their own strengths, but unconsciously required to show more 'male' characteristics to be accepted in the environment, e.g. an assertive female manager is seen as a 'bitch', whilst a male manager is seen as a 'good leader' for the same characteristic" (SO6, 2020). This perception is confirmed by Egnell (2013) who sees the inclusion of women in the military as a reduction of military performance and fighting strength, because it is assumed that women do not have fighting skills. One participant reported affirmatively: "Overall the environment is military and needs more males than females" (SO 8, 2020).

Patriarchy can be attributed to socio-cultural factors, such as that the military is designed for men (Heinecken, 2016). The concentration of women officers in the respective departments of Military Health Institutions in the Western Cape can be attributed to social roles assigned to men as being innately agentic, while women are still concentrated in the occupational roles that require communal qualities (Bryce, 2017).

6.3 Macro Level

It was evident that posts and post structures hinders women to progress to managerial positions, as 13 participants say "Overall ... post structure in Western Cape has only x 2 Lt Col posts, meaning very few" (SO 1, 2020); "There is limited posts available to be occupied by junior officers in my context" (JO 12, 2020)., some claiming "The selection of a candidate best suited for the position is not always based on merit" (JO 11, 2020). However, when an opportunity for promotion is available, some members decline due to family commitments. In many instances in the military, it is expected of members to relocate when promoted. Although there is a limited number of senior managerial posts, and although some women decline posts for reasons given, it does not explain why there are more men than women occupying senior managerial positions.

7. Conclusion and Recommendations

Continuous professional development, specifically improving professional qualifications and attendance of military courses have been cited as enablers. However, due to the limited number of posts, not all members eligible for promotion, can be promoted. In this study, there are only two OCs posts, two RSM posts and twelve OIC/HOD posts, which could explain why women who are eligible could not ascend to management positions. From the results of this study, it is evident that factors on the three levels of the multi-relational framework are interdependent as enablers and constraints for women to advance to senior managerial positions.

There exists opportunity to expand the study to military health institutions in all other provinces to explore the enablers and constraints women encounter in advancing to senior managerial positions, ultimately, gaining a holistic view of the experiences and perceptions of all women at the different institutions across all provinces. This will be determined by means of comparing which enablers and constraints are shared across all provinces, and which are geographically unique to a specific province. The implications in compliance with legislative prescripts will ensure gender parity and recognition of diversity on all senior managerial levels, thus giving women the opportunity to contribute the strategic management of the country, the DOD, the SANDF, its affiliated institutions, inter alia MHIs nationally. Furthermore, it will lead to inclusive decision-making through women and men collaborating in the creation of an environment accommodative of all citizens, which will dispel the myths that certain positions are the exclusive domain of a particular gender.

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