

The appropriate and sustainable management of health care organizations is a timely and relevant topic. It achieves a growing popularity in light of the deep processes of institutional and structural changes which are affecting the health care context in the last few years. Therefore, it is crucial to push forward our knowledge about the management tools and approaches which allow to enhance the effectiveness of health care organizations, whose dimension – as required by recent legislative reforms – is continuously growing.

Clinical leadership – that is to say the leadership which is enacted within health care organizations by providers of health services – is a momentous topic in the field of health care management and organization. This thesis aims at illuminating a “dark side” of clinical leadership: the role of gender differences in triggering diverging approaches to clinical leadership. For this purpose, a qualitative analysis was performed, which involved a medium-sized health care organization operating in Italy. A mixed approach was used, which joined a high level, “managerial” interpretation with a more depth, psychological interpretation of clinical leaders’ behaviors and approaches.

Attention has been paid to the organizational implications of the specific leadership styles implemented by two key informants, who were identified as the primary sources of information for the purpose of this study. In line with the main aim of this study, a man and a woman were involved in this research. The psychological determinants of leaders’ approaches and behaviors were carefully investigated, in an attempt to point out gender-based differences. The two leaders belonged to the same health care organizations and had the same organizational role; they supervised two organizational units which were comparable in terms of health competencies and clinical practices.

This thesis is organized as follows. Firstly, the “leadership” concept is presented, sticking to the prevailing theoretical frameworks which assist in underpinning this construct. Gender-based theories were elicited, in order to pave the way for the study development. Then, the strategic leadership mind-set is presented, focusing on the psychological and cognitive dimensions inspiring leaders’ practices.

The second chapter proposes a literature review of the “clinical leadership” concept, identifying the management implications that it is able to generate on the proper functioning of health care organizations; once again, a particular emphasis is put on gender differences in the exercise of clinical leadership.

The third chapter shows the research strategy and design. A single case study approach was taken. It was implemented through the “shadowing” method. The two leaders who were engaged in this analysis were carefully observed by the author during their every-day working activity; moreover, multiple semi-structured interviews were administered, in order to deepen the research findings.

The result of this study point out that the styles of clinical leadership may be either transformational or transactional. Even though the approach taken does not allow generalization, the exercise of leadership is deeply affected by gender-based biases. On the one hand, female leaders are more inclined to embrace a transformational clinical leadership style; on the other hand, male leaders are more likely to use a transactional style. It is worth noting that differences in clinical leadership have relevant implications on the

management of individual units within health care organizations; also, they affect the relationship between leaders, followers and supervisors. Lastly, yet importantly, such differences influence the patient-provider relationship, with drawbacks on the providers' ability to fully detect and meet the needs of their patients.

Keywords: Health Management; Clinical leadership; Gender differences; Shadowing