GENDER AND LEADERSHIP – DO FEMALE LEADERS PERFORM A DIFFERENT, BETTER OR EVEN A HEALTHIER LEADERSHIP STYLE?

Frank Hager

Dipl.-Wirt.-Ing. (FH), MBA, M.A

Abstract

Organisations are facing new challenges due to the constantly changing world of work. In addition to technical developments and innovations in work and organisational processes, the human factor is increasingly becoming part of competitiveness. Businesses benefit greatly from their employees, their knowledge and skills during this fast-moving time. Healthy employees are a prerequisite for innovation, progress and growth, which must be protected as part of a sustainable corporate strategy. Thus, in scientific discussions, both, workplace health promotion and healthy leadership are considered to be successful components in dealing with volatile, dynamic and complex conditions. The conduct of executives has a significant influence on the well-being of the employees and thus a direct effect on the company's success. Managers can influence social relationships, as well as prevailing work situations – and finally the health status of employees. In occupational science studies, as well as in leadership research, the differences in leadership between men and women are analysed. There are very few studies on healthy leadership, which examine gender differences more closely. This article deals with the question of how gender differences affect leadership behaviour, leadership styles, and ultimately leading employees in a health oriented way.

Keywords: female leadership, health oriented leadership, transformational leadership, leadership styles.

Introduction

By reviewing the literature on the topics "Leadership", "Leadership Behaviour" or "Leadership styles", constants can be found: A "perfect" executive simply does not exist, because leadership is situational and therefore incredibly complex (Walenta & Kirchler 2011:9; Gräser 2013:253; Malik 2007:262). There are different leadership styles (e.g. studies of Lewin et al. 1952, McGregor 1986; Hersey & Blanchard 1969). There are also typical leadership traits that exist gender dependent (Madsen 2017:169; Foegen Karsten 2006:195) and the fact that women in leadership positions are less represented than men (Schnitzer, M. 2015:684; Walenta & Kirchler 2011:107; Badura et al. 2007:85).

Women in leadership positions are said to be more committed to co-operative social relationships in the workplace, to be a team player, and to have multiple approaches to solve problems. In contrast, male executives adhere to the traditional notion of leadership as an exercise of power (Schwarz 2008:247; Tewes 2015:41). Modern leadership today expects from superiors social openness, compassion, empathy, coordination and communication skills, as well as teamwork (Hahnzog 2015: XVI; Ahrens & Ahrens 2014:7–9). Nevertheless, according to the ideas of modern management research, the manager should also keep the role of a playmaker. For the playmaker, life and work are a game comparable to a competition. His goal is to be victorious in competitive activities. He is relaxed, flexible-adjusted, but also driven by success. The playmaker behaves co-operatively and fairly, but is always set for battle situations (Gölzner 2007:59 inspired by Maccoby 1979:313).

If the components of modern management coincide (at least in part) with the characteristics of the female leadership style, then the question arises, as to whether the female leadership style is the solution to all difficulties. Additionally – would not women, in times of burnout and fatigue depressions among employees, be the better "coach" in the sense of health-oriented leadership? Does this highly praised portrayal of femininity and leadership really exist?

The scientific literature, with its empirical studies on female leadership styles, draws an ambivalent picture, because parts of the research identify gender-specific differences. In the 1990s, it was believed that women are the better leaders with a typically female leadership style. More recent studies, on the other hand, argue that there are no differences due to a person's gender. Modern gender research consequently denies the existence of the female style of management. The following remarks will shed more light on this question.

Prejudices and reasons for the low share of women in top positions

The reason given for the low share of women in top positions is, that women are supposedly less likely to be interested in leadership positions and exercise of power due to gender characteristics or behaviour (Hoffmann 2016:100). They are – under these aspects – less suitable for it. Women are also assumed to have a lower average productivity as they have limited availability as a result of family responsibilities, as well as lower objectivity or less assertiveness (Domsch & Regnet 1990:107, Elger 2013:164). These stereotypes are not just prejudices – for example, empirical evidence has shown that women are more risk-averse indeed

(Balaoutas, Kerschbamer & Sutter 2011:131). In top management, a high level of risk-taking is required. Since it is generally assumed that women are more risk-averse than men are, male applicants are preferred in filling top positions (Littmann-Wernli & Schubert 2001:135). Because of this, women experience less support than men (Regnet 1997:251) do.

In a US-study, Powell, Butterfield & Parent concluded that leadership positions are mostly associated with male characteristics. Thus, in 1999, 46% of women were in leadership positions and yet management positions were male stereotyped, not female as it was originally thought. The authors' assumption was that leadership positions were required to have androgynous[1] characteristics. Because nearly half of the women were in leading positions, and since women brought their "femininity", both male and female qualities should be required for those management positions. In addition, the authors of the study argued, that most of the women work in the lower management positions – there are hardly any women in top management, and those who have succeeded have male characteristics (Powell, Butterfield & Parent 2001:188).

Despite formally equivalent qualifications, women are often denied the last career jump to top management (Glass-Ceiling-Effekt) (Gaetane & Brenda 2011:83). Rustemeyer & Thrien blame the low number of women in management for leadership positions on masculine attributes, and, secondly, that women in leadership positions do not have feminine attributes, but either already possessed or acquired male attributes to be compatible with the requirements for a management position. For Germany Rustemeyer and Thrien carried out a similar study and came to the same conclusion, so the attribution of male attributes to leadership positions also applies to German culture (Rustemeyer & Thrien 1989:108–116).

According to Gmür (2004), managerial positions are more strongly influenced by male characteristics than by female. From the author's point of view, the preference for masculinity is independent of the interviewed person and their status. Women in leadership positions, more than men, must meet male stereotypes (Gmür 2004:405). In addition, employment decisions are often influenced by stereotypes. In the course of the "think manager – think male" phenomenon features of a certain prototype often replace (Dodge et al., 1995:253) missing information regarding the suitability for a certain job profile. In other words – if the same or similar professional activity has always been occupied by a man over a long period

---

[1] People who present themselves deliberately as not gendered or appear to other people as not gendered, are called androgynous. Weak secondary sexual characteristics or secondary sexual characteristics of the opposite gender are often the cause of this assessment.

of time, the decision between a male and a female candidate will usually fall for the male, as it corresponds to the proven prototype (Krell 2011:413).

There is also a study by Kaiser et al. (2012) on career breaks by women executives. The reasons the authors have revealed, are the typical male attributes to leadership positions and, above all, the claim of "ever-availably". Ever-availability means that managers are to devote their lives exclusively to the company. In addition to an extremely high number of working hours, managers are also expected not to take a (family-related) career break or work part-time. Furthermore they are expected to be mobile (make business trips and possibly even change their place of residence) in order to be full flexible. Since it is, mainly women who take care of the children and therefore cannot always be available for the company 24 hours a day – this means in most cases the end of a career, or no beginning of a career (Kaiser, et al. 2012:32–39). Male attributes and ever-availability are the main reasons why few women are found in leading top-positions.

Leadership style of female superiors (theory of difference)

The core idea of the theory of difference relates to the differences between man and woman. By gender, individuals are attributed with certain characteristics and derived predictions about their behaviour and abilities (Assig & Beck 1996:156). According to Neuberger 2002, there are specific female strengths, which are not inherent to most of man and vice versa. However, these strengths are too gender specific so that the opposite gender cannot acquire them. Thus, Neuberger postulates that women with their skills are indispensable for the economy (Neuberger 2002:783). Therefore, stereotypes act as "order categories", which should convey safety and orientation (Regnet 1997:245). Men are typically described as dominant, independent, confident and competitive, whereas women are characterised as friendly, sensitive, willing to compromise, sympathetic and caring (Heilmann 2001:658). In their self-descriptions, women are more likely to be empathetic than men, with the hypothetical presumption that women like to deal with their own emotions and the feelings of others (Myers 2008: 167). Höhler (2001) also identifies the female leadership style as feminine and the male as masculine. Moreover, she credits women with better communication skills and the ability to multitask. Men, on the other hand, are more success-oriented, more aggressive, and more self-centred than women are. Only through co-operation, men and women could meet the demands of the modern world. They (women) should not be seen as an alternative (in management), because the competences of both genders are in demand (Höhler 2001:201). Höhler refers in her statements to brain

research and gender stereotypes. Both genders are born with different identities, e.g. female and male identities. These two variants are the result of a relentless optimisation process. A post-natal "remodelling" is in her view nonsensical (Höhler 2001:19).

When considering a typical female leadership style, it must first be noted that for a long time any leadership qualities of women were doubted, because in the 1950s, concepts of authoritarian rule and the classical distribution of roles enjoyed great popularity. Already in 1977, Rosabeth Kanter argued that women perform differently than men. Due to the widespread opinion that "women are weaker", they would have to assert themselves again and again and lead harder than their male counterparts. Women have tried to be more distant, without intimacy, in order not to lose their authority, for they are subject to increased attention (Kanter 1977:202). However, unlike other researchers of that time, Kanter did not value the difference in leadership. This is an image of the female leadership style, which is still experienced today by employees. In the 1980s, companies often expressed a desire to move from authoritarian to co-operative or participatory leadership – an entrepreneurial response to a change in social values (Müller 1997:23). This change called for the skills of communication and conflict management, and thus the skills of women increasingly came into the focus (Wunderer & Dick 1997:49).

The "interview study" by Marilyn Loden (1998) and the "diary study" by Sally Helgesen (1990) had also shown that women, who are today still referred to as the weaker gender, have potential that would correspond to new organisational cultures. The female leadership style, which meets the demands of these new management tasks, is thus defined, in contrast, to an obsolete male leadership style. These characteristics belong to women, simply through their gender or their experienced socialisation (Funken & Schulz-Schaeffer 2008).

Although not all women are equally well equipped with these skills, but men don't have those abilities at all. The female leadership style relies on rational and on emotional data. Women consequently take into account numbers, as well as emotions in decision-making processes – they are thus more able to maintain personal relationships (Loden 1998:70–71). According to Helgesen (1990), women act more co-operatively than men, who are more competitive. Therefore, women embody more networked thinking and try to practice flat hierarchies because the exercise of power is not important to them. Women organise the structure of the organisation into teams and their basic objective is quality. (Helgesen 1990: 38–39). Furthermore, women act more intuitive-rational to solve problems, but men prefer their individual assertiveness. Decisive characteristics of the female leadership style are also the lower control of the workers and the

high empathy, which increases the self-esteem of the employees. Women also better pass on information, because they do not consider it as a power resource (Helgesen 1990:28).

Moreover, women were more likely to apply the concepts of transformational leadership[2] and are thus superior to men (Eagly et al 2003:569–591). Hence, the female management style is characterised by communicative competence, teamwork, responsibility, networked thinking, empathy and trust in the employees.

Do women lead better or worse than men do?

Women as superiors have historically not always received much positive recognition. They were previously regarded as the poorer executives and were faced with prejudices, being pedantic, difficult to satisfy, they did not delegate, they hindered the development of the staff, and they would take everything personally. To lead differently than the male colleagues was equated with "worse leadership". This view has changed over time, because the qualities needed today in management seem to be those of typical female characteristics (Krell 1994:377–392). As clarified in the last section, the female leadership style – from the viewpoint of the theory of difference – embodies the requirements of today's management executives. Women are therefore the resource that executive boards need to solve current problems. "Different leadership" than men today, thus often has the appearance of "better leadership" (Al-Omry 2015:12–14; Stroot 2004:188).

The above-mentioned authors Marilyn Loden and Sally Helgesen, can be seen as advocates of the theory of difference. Their intention to write their books arose from a deficit of appropriate management literature for female executives, because the existing counselling books merely gave advice on how to deal with the male cultures. Helgesen and Loden tried to prevent women from "masculinising" and facilitating their adaptation in modern organisations, and praised the differences between men and women. The discussion about "soft skills" or "soft qualities" has been going on for some years now through the management literature. These terms are understood to be abilities and qualities that are considered to be particularly promising for future management: relationship-orientation, intuition, empathy, a social "feeling" for employees and for future developments. According to

---

[2] The above-average achievements result from a change (transformation) of the attitudes of employees: they trust their leader, they are loyal, show initiative and team spirit and they are intrinsically motivated. This influence on behavior is mainly the result of the leaders' role-model-effect.

prevailing gender stereotypes, especially women should have these "soft" skills. Consequently, it is argued that women are particularly suited to leadership positions (Rastetter 1997:43–55).

In 1985, Loden proved this view empirically in interviews with 50 men and 200 women. She concluded that women pursue a different style of leadership than men. Women were more co-operative than their male counterparts were and practiced flatter hierarchies (Loden 1998:72). In 1990, Helgesen conducted her calendar study. The starting point of her study was the analysis by Henry Mintzberg (1973). Mitzberg followed five managers in their daily routine and recorded all activities. The observations suggested that most of the men were more concerned about their goals and showed less interest in the activities, which were necessary for the achievement of the tasks (Helgesen 1991:21; Schmitt 2007:46). Helgesen compared Mintzberg's remarks to find gender-specific differences in day-to-day management (Helgesen 1991:29) and worked out a typical female leadership style as explained in the last section. Regarding motherhood and the ever-availability claim[3], she explicitly stated that motherhood is an excellent school for management. The mother does not give her favour – like the lover – to a single man, but ideally distributes it to all (the employees) equally. The man does not want to feel inferior to the beloved; he can recognise the power of the mother if necessary. In a family, the mother typically plays the role of second authority alongside the father (Rastetter 1997:43–55). This shows clearly the qualities already mentioned (sensitivity, social skills, patience, kindness, insertion in group, empathy, adaptability, discipline) of the female executive, matching the role of the caring, yet organised mother who has her family firmly under control, but not losing loving relationships out of sight.[4]

Eagly et al. (2003) prepared various meta-analyses to obtain a research overview and to prove the existence of the female leadership style. In 2003, they compared 45 studies and concluded that there were small, but significant differences between women and men in leadership. Consequently, women used to be more of a transformational type, and men more likely to be transactional (Eagly 2003:569–591). The behaviour of the male executives thus has no or even a negative impact on the organisational success. Women, on the other hand, practice behaviours that have a positive impact on the effectiveness of management. In addition, the researchers found a connection between the leadership style and existing gender stereotypes. People have certain gender-based expectations, and those expectations are internalised and lived out (Eagly 2001: 781–797).

---

[3] See above.

[4] See above.

According to Krell, the sketched appreciation of femininity is a "gift of the Danaans" for female executives and criticised that the postulated existence of a female leadership style also carries risks. A present from the Danaans proves to be a gift in Greek mythology, which presents extraordinary difficulties for the recipient, and so it is supposed to behave with the postulated existence of the female leadership style. If women are hired because they are supposed to persecute the female leadership style, they would be under pressure to control it as well. However, it is not possible, that not all women lead in the same way and in a similar style, and thus they cannot fulfil expectations, which are placed on them (e.g. every woman would be expected to work empathic and team-oriented). Furthermore, Krell fears that women would be hired to refine the organisation by improving the working atmosphere and taking care of the social (Krell 2004:388, Krell 1994:378, Nerge 1992:79–88).

The question of whether women really have a "better" leadership style was not directly addressed in the mentioned studies above. It was only argued that the leadership style of women differs from male leadership styles because of specific female attributes and that these would be beneficial in many ways in organisations.

Female leadership seen from the equality theory

The basic idea of equality theory is, that women and men are equal – and not only formally equal, but in all aspects of their existence. Thus, followers of this theory also conclude that women and men lead the same way. The theory also refers to any ability, attitude or motivation that people can have. In terms of leadership style, studies confirm equality between men and women.

In their study in Germany and Switzerland, Wunderer & Dick (1997) found "little disparity between disposition and behaviour" (Wunderer & Dick 1997:132). They interviewed male and female executives and their staff on gender and leadership-style. In terms of career orientation, advancement ambitions, network use, or leadership style of managers, no gender differences were found. The statements of the employees who participated in this study confirm that their superiors, whether male or female, have similar behaviours. The assessment of the managerial style of the supervisor was independent of the gender of the employee. As a result, a male executive was rated equal by both, her female and her male employees and vice versa. The most chosen leadership style of both female and male executives, from the point of view of employees, was a "consultative" or "co-operative" style (an employee is informed of intended decisions and can/is allowed to comment these) (Wunderer & Dick 1997:12; 69–70).

Bischoff (1999) carried out several large studies between 1986 and 2004 called "Men and Women in Leadership Positions in Germany". "The great and partly evoked difference in the leadership behaviour of men and women that was propagated in the past could not yet be proven by empirical investigations. Basically, men and women lead co-operatively and behave – if need to be – even authoritarian"[5] (Bischoff 1999:131–132). For other characteristics, however, such as salary, Bischoff found gender differences, but not leadership style related. "Women earn less than men at the same hierarchical level" (Bischoff 1999: 83, 92)[6].

Further studies, such as those by Hyde (2005), also conclude that women and men are equal. Equal opportunities, equal rights and gender equality are therefore, if not given, established by corrective measures of women's empowerment programmes and gender equality policies. Weinert (1990) examined both genders in terms of dominance, social demeanour, self-reliance, accountability, self-control, good impression, conventionality and achievement. There were no significant differences between men and women in any of the characteristics (Weinert 1990).

The above-mentioned studies show, that no gender-specific leadership style exists. Depending on the situation, task and goal, male and female executives choose the style of leadership equally; some leadership styles are more preferred, others less, but both studies by Wunderer & Dick and Bischoff, confirm the theory of equality in its core idea.

Is there a "female" health-oriented leadership style?

Healthy employees make a substantial contribution to a company's success (Bienert and Razavi 2007:62, Kraemer & Lenze 2011:169, Badura & Hehlmann 2003:9). The relationship between management behaviour and employee health has been increasingly the subject of scientific research in recent years. There are a number of literary studies and meta-analyses from the period between 1990 and 2009 that were reviewed Gregersen et al. (2011:3–12 & 2013:28–39). On the one hand, leadership behaviour acts as a resource or as a stressor on the health and well-being of the workforce. On the other hand, there are certain leadership styles that can be either beneficial or harmful to employee's health. With regard to these insights and assuming a typically female leadership style, it may be possible that women's leadership behaviours have a positive impact on the health of employees.

---

[5] Citation translated from German.
[6] Citation translated from German.

Leaders – Stressors or Resistance Resources

Mental well-being is the result of a balance between workload (amount and difficulty) and resources available (structural, social and personal) (Ducki 2000:45, Hüttermann 2015:16, Antonovsky 1979:99, Lazarus 1984:19). In the context of health-promoting employee leadership, these resources are of central importance, as managers have a direct influence on them in the framework of their leadership behaviour. (Cohen-Mansfield 1995:444-466; Leiter & Harvie 1996: 90–101; Moore & Cooper 1996:82–89). The direct support from supervisors is one of the social resources (Tameling 2014:39; Hüttermann 2015:16). It can influence the well-being of employees, both in the form of direct assistance and indirectly, by influencing the basic conditions (Hüttermann 2015:15). An autocratic leadership and self-centred leadership, however, usually causes negative health impairments and triggers stress on the part of the workforce, which manifests itself in higher absenteeism or presenteeism. Gregersen et al. also confirm this (2011:3–12 & 2013:28–39). Social stressors, caused by the behaviour of superiors, have a negative impact on self-esteem and in the worst-case lead to a desire to change of employer.

For executives, it is also possible to provide structure-related resources, e.g. they should grant reasonable room for manoeuvre and enable employees to deal effectively with this autonomy. Workers with high task requirements are thus able to minimise mental stress through effective management of work demands (Hüttermann 2015:15, Siegrist 1996:97, Tintor 2015:60).

According to the Conservation-Of-Resources approach (Hobfoll 1998:143), mental stress due to resource loss, or lack of resource gain, can occur after a resource investment. These may be aspects such as self-protection or the maintenance of self-esteem. Through an appreciative, fair and predictable leadership, executives can empower employees' personal resources while reducing mental stress.

A mindful and health-promoting leadership style does not mean a deliberate manipulation in the sense of "influencing the will of others", in order to achieve specific corporate goals; it is more a matter of "positively guiding" workers. In the context of uncertain or dynamic structures, it is important to motivate, inspire and support employees individually. Especially through an emotional attachment/bonding, it is possible to increase job satisfaction (Hüttermann 2015:18) in order to support as much as possible the preservation, respectively the promotion of employee health.

Health relevance of different leadership concepts

Gregersen et al. (2011:3–12 & 2013:28–39) also devoted their research work to the scientifically established leadership concepts. They showed that transformational leadership, an employee-oriented leadership style, some aspects of transactional leadership, and the Leader Member Exchange Theory (LMX) are positively related to employee health. The goal of transformational leadership is the stimulation of emotions and ratio of the guided. This requires leadership skills that go far beyond the usual problem-solving capabilities. Supervisors act as role models, conveying the meaningfulness of everyday work, promoting creativity and ideas. Transformational leadership is in some ways an ability to achieve goals, less the systematic manipulation of employees. The main focus of this leadership style is the stimulation of self-interests and tasks of employees, in order to foster the results of the organisation. Jenewein et al. (2010:28) name four dimensions of transformational leadership: personal aura, inspiration, mental stimulation, and individual treatment of employees. According to Gregersen et al. (2011:3–12 & 2013:28–39), a transformational leadership style has a positive impact on job satisfaction, which also affects the mental health of workers.

The basic assumption of a transactional leadership style is based on the classic market principle: If the leader receives what he desires, the executive also gives what employees expect from him. Transaction is therefore to be understood as an "exchange" in this management concept. The supervisor intervenes when necessary and can, if the benefits are below his expectations, punish employees, impose sanctions, or support and reward them for good work results (Hammann 2009:112). Nyberg et al. (2005:23) described the performance-based reward as a health-promoting component within this leadership concept. The dimension of active control by the executive, however, has a negative impact on the stress perception of the workforce. A solely transactional leadership style is therefore not recommended.

In the management concept of task-/employee orientation, a positive correlation between employee-oriented leadership and low health complaints, burnout and stress was shown (Gregersen et al., 2011:3–12). Employee orientation expresses the extent to which the supervisor takes account of the employee's personal needs or shows respect, recognition and esteem (Oechsler 2015:297). Burnout-supporting effects were recognised by Gregersen et al. (2011:3–11) in a task-oriented management style, in combination with low employee orientation. Task orientation is characterised by task definition, regulations and suggestions for task completion in order to achieve predominantly corporate goals (Oechsler 2015:297).

The laissez-faire leadership style offers employees the greatest possible freedom in task assignment and can be described as apathetic. This is raising the question of whether this behaviour can even be described as leadership. There is no control by the supervisor. Likewise, this leadership concept relinquishes rules, regulations, and activities that promote the working environment and employees. There is no motivation to perform and a gradual loss of self-initiative occurs as there is no feedback and no clear decisions are made (Hammann 2009:112). According to Gregersen et al. (2011), this style of leadership has a negative impact on employees' health and stress.

The LMX theory sheds light on leadership from the perspective of relationships and aims to develop a partnership between employees and supervisors. This concept is understood as an offer of trusting cooperation and not as the control and transmission of orders of a disciplinary power. Executives have a unique relationship with their employees, which is different in their nature and quality from others (Vollmann et al., 2015:22.4.2). In a systematic comparison of the different leadership concepts, Gregersen et al. (2011:3–12 & 2013:28–39) concluded that LMX is the most statistically relevant in the context of health indicators. According to their views, this could be due to the fact that LMX is not a general management style, but rather an individual relationship building with the respective employees (Gregersen 2014).

So do women lead healthier than men do?

Since in the debate whether women have a different or better leadership style than men, especially the transformational leadership style is considered (Eagly 2003:569–591). Moreover, since it is proven that, the transformational leadership style is beneficial to health; this question could first be answered with "yes". However, if women are generally the healthier leader has been researched very little empirically so far.

Vincent (2012) notes that a gender stereotypical female leadership style is characterised by high levels of social skills, interest in people, caring, empathy, cooperation, and support, which also reflects the characteristics described above. In the further course of her work, Vincent (2012) proceeds from the hypothesis, that a health and development-promoting leadership behaviour is more in line with a female leadership style. Not only has the gender of the leader played a decisive role, but also the gender of the employees. The research has shown that women treat each other friendlier, more communicative and caring than men have. Likewise, the results of this analysis show that female employees of a female executive tend more attesting a transformational leadership style than male colleagues a male

superior. Furthermore, Vincent (2012) assumes that women evaluate the leadership style of both, a female and a male executive, healthier than men do. In addition, the relationships between the health of the workforce and leader were examined gender-specific. There are, among other studies, in which both, male and female employees with a female superior, have a better mental health. All assumptions were reviewed in the study. Although the effect was relatively small, Vincent (2012) confirmed in their analysis, that female leaders are rated to lead more healthier and more supportive than men are. What remains open is the question of whether there are real differences in leadership behaviour or whether the results are due to perceptual distortions or stereotypes (Vincent 2012:61–89).

Surprising was the finding, that male managers lead their male employees significantly healthier and more development promoting than their female employees. The reason could be the following: since women are demonstrably more empathic than men are, female executives are better able to empathise with male and female employees. Men may only manage this with their male employees – this could result in a lower extend of the health and development-promoting leadership style focused towards female employees. Another reason could be based on implicit leadership theories[7] of the employees. Such theories assume that workers have some idea of an ideal leader – this influences the personal assessment of leadership behaviour. A health and development-promoting leadership style may be an ideal, especially for female employees, so they may have higher expectations of the leader or be more critical in their evaluation. Due to the high proportion of men in management positions, however, "men's societies" could also come into effect. Through communion and membership, a specific solidarity, loyalty and co-operation, as well as a demarcation towards non-members arise. Members have special opportunities and resources that non-members do not have. The superior can also see health and development-promoting leadership as a positive influence on the resources of the employees in order to sustainably promote the health and potential development of the employees. Seeing the concept of the "men's societies" in this context, it could be explained why male executives lead their male employees significantly healthier and development promoting than their female subordinates (Vincent 2012:61–89).

With regard to the mental well-being of the workforce, this analysis focused less on the gender of the leader than on the perception of leadership behaviour. Female employees with a female supervisor showed better health status than male colleagues with a female executive. Conversely, male employees with a male executive showed better mental

---

[7] More information on this see Schyns et al. 2014:155–166.

health than female employees with a male executive. From the results of the study, it can be deduced that in future research of leadership and health stronger gender-specific effects and the interaction of different leadership behaviours should be analysed. In doing so, it is important to consider the gender of the leader as well as the gender of the employees in order to reveal gender-typical effects (Vincent 2012:61–89).

Discussion and Summary

This article tries to answer the question whether a female leadership style differs fundamentally from the male. An attempt is made to define the female leadership style, to better understand it, and finally to confront the aforementioned prejudices. The article also discusses what makes a health-oriented leadership and what conditions have to be met for a healthy leadership style to develop. The final question is whether women have a healthier leadership style than their male counterparts.

In the previous sections, it can be noted that the empirical validations for the statements "women lead better" and "women lead differently" vary strongly and are contradictory. In spite of the diversity of these assumptions, there are also similarities: Firstly, the common formulation points to the fact that in both statements men's leadership is set as a standard. Secondly, both statements assume that men lead "masculine" and women "feminine". In contrast, representatives of the androgyny concept assume that women can also be "masculine", men also "feminine" and both "androgynous" (in the sense of "masculine" and "feminine").[8]

In addition, there are sources that prejudice female executives, for being "petty" or showing "unobjective behaviour" (Preuss 1987:387)[9], in more recent studies for being "too emotional" and "unpredictable" (Bischoff 2005:267). These prejudices relate only to a minority of the interviewees. Kanter (1977:202) emphasises that the picture drawn in connection with the statement "women lead worse" is one of people with relatively little power. Kanter provided another explanation of the prejudice that "women perform worse" in 1977, when describing the situation of the few women by the term "tokenism" based on the case study in a 300-person multinational organisation. According to Kanter (1977) minorities (tokens) – for example women in male-dominated organisations – are not perceived individually (up to a proportion of 15 percent), but as representatives of their group.

Due to this constellation, the majority of male executives overemphasise the differences between their behaviour and that of their female colleague.

---

[8] More information on this see Krell 1999; 2003.

[9] See 4.

Due to their increased "visibility", female executives are under particular pressure to show exceptional performance.[10] In the eyes of the majority, if female superiors should fail, it is not the person who fails, but the entire group. At the same time, it is said that the token status of female leaders is associated with significant stress and reinforces a stereotypical perception of their behaviour. These explanations on the token status and its effects also apply to the statement "women perform better". Negative attributions such as "too emotional" also testify to how interwoven feelings and gender discourses and how ambiguous the evaluations associated with them are.[11]

Even more obscure and contradictory is the gender discussion on the question of whether women "lead differently". As discussed, in some cases no gender differences can be identified at all. A look at the US since the 1970s, investigations confirmed this.[12] Nevertheless, even in recent studies from the European area, the majority of interviewees stated that they do not perceive differences between women and men in terms of leadership behaviour and quality (Snaebjornsson & Edvardsson 2013; Autenrieth et al. 1993:141, 190; Wunderer/Dick 1997:241–266; Bischoff 2005:257, 278; Hadler 1995).

Nevertheless, it is argued that women in general perform better. The statements that there are "typical female" leadership qualities and "natural abilities of female managers" (Loden 1988:69, Helgesen 1991:39, 205, 215), are associated with an appreciation of "femininity". This statement can be classified as very questionable. For example, Helgesens (1991) views are based on the observation of four female executives for one working day each. The results are compared to those of Mintzberg (1973), who observed five male executives. Apart from the narrow empirical basis, this approach raises the question to what extent the differences found are due to the gender or time difference – Helgesen addresses this herself (Helgesen 1991:31). Loden (1988) has a much broader empirical basis in her research, but the description of the approach raises the suspicion that an interest-based selection of interviewees has taken place to confirm Loden's hypothesis that there exists a "masculine" and "feminine" model of leadership. The questioning of women initially does not lead to the desired result. In the first week of testing, some of the interviewed women insisted on their view that the differences they identified did not exist. Only after the analysis, Loden met female managers who shared many of their opinions and experiences. In other words, it seems the sample of female interviewees has been expanded to achieve the desired result. Due

---

[10] In detail see Laws 1975.

[11] In detail see Krell & Weiskopf 2006:73; Sieben & Krell 2007: 235–255.

[12] A summary is provided by Friedel-Howe (1990) and Powell (1996).

to these serious methodological shortcomings, the results of the studies are extremely questionable.

The statements about the different female attributes or characteristics by Höhler (2001) are in Krells (2002) viewed as simply wrong, because such an attribute-oriented view leads to a fixation on gender stereotypes, which does not fulfil the diversity within the group of women and men (Krell 2002:113). Höhler's (and in this context also those of other authors) representations are therefore to be viewed critically, even if they seem attractive and understandable.

Since the statements, "women lead better" and "women lead differently" appear to be contradictory and due to the very few research in the field of health-oriented, leadership among female supervisors, only very limited statements can be made if women lead healthier than men. Only assuming a female relationship-oriented leadership, as well as the typical feminine characteristics seen from the viewpoint of the theory of difference, it seems there is evidence that women are also the healthier leaders. In order to understand this complex interplay even better, personal, task-related and organisational context factors have to be included in future analyses. Salutogenic leadership is characterised by health-promoting aspects, by esteem and recognition, as well as by the role-model-effect of the executive. In particular, mindfulness is given high priority in the work context. One main focus is on the holistic nature of leadership behaviour. All of these leadership qualities are reflected in the transformational leadership style and LMX.

REFERENCES

Ahrens, C. & Ahrens, L. (2014). *Leadership-Intelligenz – Zehn Gebote für souveräne und sozial kompetente Führung.* Springer Gabler, Wiesbaden.

Al Omary, F. S. (2015). *Mit Selbstinszenierung und kultivierter Eigen-PR an die Spitze.* In: Buchenau, P. 2015, Chefsache Frauen – Männer machen Frauen erfolgreich. Springer, Wies-baden, pp. 1–19.

Antonovsky, A. (1979). *Health, Stress and Coping: New Perspectives on Mental and Physical Well- Being.* Jossey-Bass, San Francisco.

Autenrieth, C. & Chemnitzer, K./Domsch, M. E. (1993). *Personalauswahl und -entwicklung von weiblichen Führungskräften.* Campus, Frankfurt/M.

Assig, D., Beck, A. (1996). *Frauen revolutionieren die Arbeitswelt.* Vahlen, München.

Badura, B. & Hehlmann, T. (2003). *Betriebliche Gesundheitspolitik – Der Weg zur gesunden Organisation.* Springer, Wiesbaden.

Badura, B., Schröder, H., Vetter, C. (2007). *Fehlzeiten-Report 2007: Arbeit, Geschlecht und Gesundheit.* Springer, Wiesbaden.

Balafoutas, L., Kerschbamer, R. & Sutter, M. (2011). Distributional preferences and competitive behaviour. In: *Journal of Economic Behaviour & Organization,* 83, Elsevier, Amsterdam, pp. 125– 135.

Bienert, M. L. & Razavi, B. (2007). Betriebliche Gesundheitsförderung: Entwicklung, Vorgehens- weise und Erfolgsfaktoren. In: Hellmann, W. (Ed.): *Gesunde Mitarbeiter als Erfolgsfaktor – Ein Weg zu mehr Qualität im Krankenhaus*. Economica, Heidelberg, pp. 49–115.

Bischoff, S. (1999). *Männer und Frauen in Führungspositionen der Wirtschaft und Deutschland – Neuer Blick auf alten Streit.* Wirtschaftsverlag Bachem, Köln.

Cohen-Mansfield, J. (1995). *Stress in nursing home staff: A review and a theoretical model. The Journal of Applied Gerontology.* Sage Publications, Thousand Oaks, 14, pp. 444–466.

Dodge, K. A., Gilroy, F. D. & Fenzel, L. M. (1995). Requisite management characteristics revisited:

Two decades later. *Journal of Social Behavior & Personality,* 10(6), NCBI, Rockville Pike, pp. 253–264.

Domsch, M. & Regnet, E. (1990). Personalentwicklung für weibliche Fach- und Führungskräfte. In: Domsch, M. & Regnet, E. (Ed.): *Weibliche Fach- und Führungs- kräfte – Wege zur Chancen- gleichheit,* Schäffer, Stuttgart, pp. 101–123.

Ducki, A. (2000). *Diagnose gesundheitsförderlicher Arbeit. Eine Gesamtstrategie zur be- trieblichen Gesundheitsanalyse (Mensch - Technik - Organisation).* vdf, Zürich.

Elger, C. E. (2013). *Neuroleadership: Erkenntnisse der Hirnforschung für die Führung von Mitar- beitern.* Haufe, Freiburg/Breisgau.

Eagly A. H., Johannesen-Schmidt, M. C., & van Engen, M. L. (2003). *Transformational, Transactional, and Laissez-faire Leadership Styles: A Meta-Analysis comparing Women and Men. Psychological Bulletin*, 129(4). APA, Washington, pp. 569–591.

Eagly, A. H., & Johannesen-Schmidt, M. C. (2001). The Leadership Styles of Women and Men. *Journal of Social Issues*, 57, Wiley, Hoboken, pp. 781–797.

Foegen Karsten, M. (2006). *Gender, Race, and Ethnicity in the Workplace – Issues and Challenges for Today's Organizations.* Praeger, Santa Barbara.

Funken, C. & Schulz-Schaeffer, I. (2008). *Digitalisierung der Arbeitswelt – Zur Neuordnung formaler und informeller Prozesse in Unternehmen.* Springer VS, Wiesbaden.

Gaetane J.-M. & Brenda L.-J. (2011). *Women of Color in Higher Education: Turbulent Past, Promi-sing Future.* Emerald Group Pub., Bingley.

Gmür, M. (2004). Was ist ein "idealer Manager" und was ist eine "ideale Managerin"? Geschelchtsrollenstereotypen und ihre Bedeutung für die Eignungsbeurteilung von Männern und Frauen in Führungspositionen. In: *Zeitschrift für Personalforschung,* 18(4). Hampp, Augsburg, pp. 396–417.

Gotwald, V. W. (2016). Führen für Hochleistung und Gesundheit. In: Hänsel, M.; Kaz, K.: *CSR und gesunde Führung: Werteorientierte Unternehmensführung und organisationale* Resilienzsteigerung. Springer, Wiesbaden.

Gölzner, H. (2009). *Erfolg trotz Führung. Das Systemisch-integrative Führungsmodell: Ein Ansatz zur Erhöhung der Arbeitsleistung in Unternehmen.* Deutscher Universitätsverlag, Wiesbaden.

Gregersen S., Kuhnert S., Zimber, A. & Nienhaus, A. (2011b). Führungsverhalten und Gesundheit – Zum Stand der Forschung. In: *Das Gesundheitswesen,* Thieme, Stuttgart, 73, pp. 3–12.

Gregersen, S., Vincent-Höper, S. & Nienhaus, A. (2013). *Führung und Gesundheit – Welchen Einfluss haben Führungskräfte auf die Gesundheit der Mitarbeiter?* Österreichisches Forum Arbeitsmedzin, 01/13, pp. 28–39.

Gregersen, S., Vincent-Höper, S. & Nienhaus, A. (2014). *Gesundheitsrelevantes Führungsverhalten – Ein systematischer Vergleich verschiedener Führungskonzepte.* URL: https://www.bgw-onli-ne.de/DE/Arbeitssicherheit-Gesundheitsschutz/Grundlagen-Forschung/GPR/Medientypen/Downlo-ads/FFAS-2014_Fuehrung-Gesundheit_Download.pdf?blob=publicationFile Berufsgenossenschaft für Gesundheitsdienst – BGW, Hamburg. Downloaded on: 30.01.2018.

Gräser, P. (2013). *Führen lernen – Der Weg zur Führungskompetenz und zur persönlichen Karriere-Strategie.* Springer, Wiesbaden.

Hadler, A. (1995). *Frauen & Führungspositionen – Prognosen bis zum Jahr 2000. Eine empirische Untersuchung betrieblicher Voraussetzungen und Entwicklungen in Großunternehmen.* Peter Lang GmbH, Europäischer Verlag der Wissenschaft, Frankfurt/M.

Hahnzog, S. (2014). *Betriebliche Gesundheitsförderung – Das Praxishandbuch für den Mittelstand.* Springer Gabler, Wiesbaden.

Heilmann, M. E. (2001). Description and Prescription: How Gender Stereotypes Prevent Women's Ascent Up the Organizational Ladder. *Journal of Social Issues,* 57(4), Wiley, Hoboken, pp. 657– 674.

Hammann, E. M. (2009). *Dezentrale Leadership. Voraussetzungen, Möglichkeiten und Grenzen von unternehmerischem Führungsverhalten in Tochtergesellschaften diversifizierter Unternehmen.* Springer, Wiesbaden.

Helgesen, S. (1990). *The Female Advantage. Women's ways of Leadership.* Doubleday, New York.

Helgesen, S. (1991). *Frauen führen anders. Vorteile eines neuen Führungsstils.* Campus, Frank-furt/M.

Hersey, P. & Blanchard, K. H. (1969). Life cycle theory of leadership. *Training and Development Journal,* 23(2), NCBI, Rockville Pike, pp. 26–34.

Hobfoll, S. E. (1998). *Stress culture and community.* Plenum Press, New York.

Hoffmann, W. (2016). *Stimmen der Macht – Bekenntnisse und Erkenntnisse aus Unternehmen.* Vdf Hochschulverlag, Zürich.

Höhler, G. (2001). *Wölfin unter Wölfen – Warum Männer ohne Frauen Fehler machen.* Econ, Düs-seldorf.

Hüttermann, H. (2015). Executive Health in der aktuellen wissenschaftlichen Diskussion. In: Becker, P. 2015. *Executive Health – Gesundheit als Führungsaufgabe. Arbeitsfreude und Unternehmenserfolg fördern.* Springer, Wiesbaden, pp. 13–29.

Jenewein, W., Heuschele, F. & Rehli, F. (2010). Was ist zeitgemäße Mitarbeiterführung? Zwischen transaktionaler und transformationaler Führung. In: *Personalführung 6/2010*, Deutsche Gesell- schaft für Personalführung e.V., Frankfurt/M., pp. 28–30.

Kanter, R. (1977). *Men and Women of the Corporation.* Basic Books, New York.

Kaiser, S., Hochfeld, K., Gertje, E. & Schraudner, M. (2012). *Unternehmenskulturen verändern – Karrierebrüche vermeiden.* Fraunhofer Verlag, Berlin.

Kraemer, R., Lenze, M. (2011). Entwicklung einer Führungskräfte-Toolbox-Gesundheitskom-petenz, In: Badura, *Bernhard et al.: Fehlzeitenreport 2011: Führung und Gesundheit.* Springer, Berlin, Heidelberg.

Krell, G. (2002). Diversity Management, Optionen für (mehr) Frauen in Führungs-positionen? In: Bensel, N. & Peters, S. (Ed.): *Frauen und Männer im Management – Diversity in Diskurs und Praxis.* Springer, Wiesbaden, pp. 105–129.

Krell, G. (2004). Vorteile eines neuen weiblichen Führungsstils: Ideologiekritik und Diskursanalyse. In: Krell, G. (Ed.), *Chancengleichheit durch Personalpolitik, Gleichstellung von Frauen und Män-nern in Unternehmen und Verwaltung, Rechtliche Regelungen – Problemanalysen – Lösungen.* Springer, Wiesbaden, pp. 377–392.

Krell, G. (2011). Geschlechterungleichheiten in Führungspositionen. In: Krell, G.; Ortlieb, R. & Sieben, B. (Ed.): *Chancengleichheit durch Personalpolitik Gleichstellung von Frauen und Männern in Unternehmen und Verwaltungen. Rechtliche Regelungen - Problemanalysen - Lösungen.* Springer, Wiesbaden.

Krell, G. & Weiskopf, R. (2006). *Die Anordnung der Leidenschaften.* Passagen, Wien.

Krell, G. & Sieben, B. (2007). Diversity Management und Personalforschung. In: Krell, G.; Ried-müller, B., Sieben, B. & Vinz, D. (Ed.): *Diversity Studies: Grundlagen und disziplinäre Ansätze.* Campus, Frankfurt/M., pp. 235–255.

Lazarus, R. S. & Folkman, S. (1984). *Stress, Appraisal, and Coping.* Springer, New York.

Leiter, M. P. & Harvie, P. L. (1996). Burnout among mental health workers: A review and a research agenda. *International Journal of Social Psychiatry*, Sage Publications, Thousand Oaks, 42, 90–101.

Lewin, K. (1952). Group decision and social change. In: Swanson, E.; Newcomb, T.; Hartley, E. (Ed.): *Reading in Social Psychology*. Rinehart & Winston, New York, pp. 2–23.

Littmann-Wernli, S. & Schubert, R. (2001). *Frauen in Führungspositionen - Ist die "gläserne Decke" diskriminierend?* Arbeit, 10 (2), De Gruyter, Berlin, pp. 135–148.

Loden, M. (1998). *Als Frau im Unternehmen führen*. Knaur, München.

Maccoby, M. (1979). *Die neuen Chefs.* Rohwolt, Reinbek.

Madsen, S. R. (2017). *Handbook of Research on Gender and Leadership*. Edward Elgar Publishing, Cheltenham Glos.

Malik, F. (2007). *Management: Das A und O des Handwerks*. Campus, Frankfurt/M.

McGregor, D. (1986). *Der Mensch im Unternehmen*. McGraw-Hill, Hamburg.

Moore, K. A. & Cooper, C. L. (1996). Stress in mental health professionals: A theoretical overwiew. *International Journal of Social Psychiatry,* 42, Sage Publications, Thousand Oaks, pp. 82–89.

Müller, A. P. (1997). *Reden ist Chefsache: Linguistische Studien zu sprachlichen Formen sozialer "Kontrolle" in innerbetrieblichen Arbeitsbesprechungen.* Narr Francke Attempto, Tübingen.

Myers, D. G. (2008). *Social Psychology.* McGraw-Hill, New York.

Nerge, S. (1992). Weiblicher Führungsstil und die doppelte Vergesellschaftung von Frauen. In: Institut Frau und Gesellschaft (Ed.), *Frauenforschung,* 10(3), pp. 79–88.

Neuberger, O. (2002). *Führen und führen lassen – Ansätze, Ergebnisse und Kritik der Führungsfor-schung.* Lucius & Lucius, Stuttgart.

Nyberg, A., Bernin, P., Theorell, T. (2005). *The impact of leadership on the health of subordinates.* National Institute For Working Life And Authors, Stockholm.

Oechsler, W. A. (2015). *Personal und Arbeit – Einführung in das Personalmanagement*. De Gruyter, Berlin.

Powell, G., Butterfield, A. D. & Parent, J. D. (2001). Gender and Managerial Stereotypes: Have the Times Changed? In: *Journal of Management*, 28, Sage Publications, Newcastle upon Tyne, pp. 177–193.

Preuss, E. (1987). *Die Frau als Manager*, Haupt, Bern/Stuttgart.

Rastetter, D. (1997). *Frauen – die besseren Führungskräfte? "Soft skills" als neue Anforderungen im Management.* In: *Journal für Psychologie,* 5(2), pp. 43–55.

Regnet, E. (1997). Frau im Beruf- Stereotype und Aufstiegsbarrieren. In: Wunderer, R., Dick, P (Ed.): *Frauen im Management.* Luchterhand, Neuwied, pp. 241–266.

Rustemeyer, R. & Thrien, S. (1989). Die Managerin – der Manager: Wie weiblich dürfen sie sein, wie männlich müssen sie sein? *Zeitschrift für Arbeits- und Organisationspsychologie*, Hofgrefe, Stuttgart, 33, pp. 108–116.

Schmitt, K. (2007). *Mitarbeiterfuehrung durch Managerinnen: Vor- und Nachteile eines weiblichen Führungsstils.* BoD, Norderstedt.

Schnitzer, M. (2015). Nur weil andere etwas noch nicht gemacht haben, bedeutet das nicht, dass es nicht geht In: Welpe, I. M., Brosi, P., Ritzenhöfer, L., Schwarzmüller, T. (Ed.): *Auswahl von Männern und Frauen als Führungskräfte Perspektiven aus Wirtschaft, Wissenschaft, Medien und Politik.* Springer Gabler, Wiesbaden, pp. 681–690.

Schwarz, G. (2008). Die *"Heilige Ordnung" der Männer Hierarchie, Gruppendynamik und die neue Rolle der Frauen.* Wiesbaden: VS Verlag für Sozialwissenschaften.

Siegrist, J. (1996). *Soziale Krisen und Gesundheit, Eine Theorie der Gesundheitsförderung am Beispiel von Herz-Kreislauf-Risiken im Erwerbsleben*. Hogrefe, Göttingen.

Snaebjornsson, I. M., Edvardsson, I. R. (2013). Gender, Nationality and Leadership style: A Literature Review, 8(1). *International Journal of Business and Management,* Toronto: IJC, pp. 89–103.

Stroot, T. (2004). *Praktiken der Sexisierung in Führungspositionen - Geschlechterkonstrukte in der Schulleitung.* Springer, Wiesbaden.

Schyns, B., Kiefer, T. & Staudigl, L. (2014). Implizite Führungstheorien. In: Felfe, J., *Trends der psychologischen Führungsforschung - Neue Konzepte, Methoden und Erkenntnisse.* Stuttgart: Ho-grefe, pp. 155–166.

Tameling, R. (2014). *Stress und Stressbewältigung: Die Stresstheorien von Richard S. Lazarus und A. Antonovsky.* Diplomica, Hamburg.

Tewes, R. (2015). *Führungskompetenz ist lernbar – Praxiswissen für Führungskräfte in Gesund-heitsfachberufen.* Springer, Wiesbaden.

Tintor, M. (2015). *Betriebliches Gesundheitsmanagement in Restrukturierungsprozessen.* Spring-er, Wiesbaden.

Vincent, S. (2012). Gesundheits- und entwicklungsförderliches Führungsverhalten: gendertypische Differenzen. *Gruppendynamik und Organisationsberatung*, 43(1), Springer VS, Wiesbaden, pp. 61– 89.

Walenta, C. & Kirchler, E. (2011). *Führung*. Facultas, Wien.

Weinert, A. 1990. Geschlechtsspezifische Unterschiede im Führungs- und Leistungs-verhalten. In: Domseh, M., Regnet, E. (Ed.): *Weibliche Fach- und Führungskräfte*. Schaeffer, Stuttgart, pp. 35–58.

Wunderer, R. & Dick, P. (1997). *Frauen im Management – Kompetenzen, Führungsstile, Fördermo-delle.* Luchterhand, Neuwied.