

## EVALUATION OF THESES ON GLASS CEILING

## CAM TAVAN KONULU TEZLERİN DEĞERLENDİRİLMESİ

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### ABSTRACT

This study was conducted to examine postgraduate theses related to the glass ceiling syndrome in Turkey. The study focuses on the glass ceiling syndrome, which highlights the invisible barriers that women face, despite claims of equal career opportunities for men and women based on gender roles. The study is descriptive and based on a survey model. Master's theses written between 2007 and 2024 were included in the study. Out of 90 theses, 58 were included in the study based on predetermined criteria. Frequency analysis was applied to the year of publication of the theses, the institute where the study was conducted, the sector in which the sample was taken, the sample size, the analyses used, and the subjects studied in relation to the glass ceiling. These frequency analyses were conducted using the SPSS 25 package program. The first thesis on the topic was written in 2007, with the highest number of theses produced in 2017. It was found that 68.80% of the theses were conducted at the Institute of Social Sciences. The sectoral distribution of the samples in the theses shows that the public sector is prominent, and the sample size is mostly between 101 and 200 people. Organizational commitment is the leading subject studied in relation to the glass ceiling syndrome. The studies mainly used frequency

analysis, Cronbach Alpha, and One-Way ANOVA analyses. It was determined that parametric tests were predominantly used in the theses.

The findings of the study indicate that theses related to the glass ceiling syndrome in Turkey tend to focus on the public sector and organizational commitment, with a frequent use of parametric tests.

**Keywords:** Glass ceiling syndrome, Barriers in work life, Work life

### ÖZET

Bu çalışma, Türkiye'de cam tavan sendromu ile ilgili lisansüstü tezleri incelemek amacıyla yapılmıştır. Çalışma, toplumsal cinsiyet rollerine dayalı olarak kadın ve erkekler için eşit kariyer fırsatları iddialarına rağmen kadınların karşılaştığı görünmez engelleri vurgulayan cam tavan sendromuna odaklanmaktadır. Çalışma betimsel niteliktedir ve tarama modeline dayanmaktadır. Çalışmaya 2007-2024 yılları arasında yazılmış yüksek lisans tezleri dâhil edilmiştir. Belirlenen kriterlere göre 90 tezdten 58'i çalışmaya dâhil edilmiştir. Tezlerin yayınlanma yılına, çalışmanın yapıldığı enstitüye, örneklemin alındığı sektöre, örneklem büyüklüğüne, kullanılan analizlere ve cam

tavanla ilişkili olarak çalışılan konulara frekans analizi uygulanmıştır. Bu frekans analizleri SPSS 25 paket programı kullanılarak gerçekleştirilmiştir. Konuyla ilgili ilk tez 2007 yılında yazılmış olup en fazla tez 2017 yılında üretilmiştir. Tezlerin %68,80'inin Sosyal Bilimler Enstitüsü'nde yapıldığı tespit edilmiştir. Tezlerdeki örneklemelerin sektörel dağılımına bakıldığında kamu sektörünün öne çıktığı ve örneklem büyüklüğünün çoğunlukla 101 ile 200 kişi arasında olduğu görülmektedir. Cam tavan sendromu ile ilgili olarak çalışılan konuların başında örgütsel bağlılık gelmektedir. Çalışmalarda ağırlıklı olarak frekans analizi, Cronbach Alpha ve One-Way ANOVA analizleri kullanılmıştır. Tezlerde ağırlıklı olarak parametrik testlerin kullanıldığı tespit edilmiştir. Çalışmanın bulguları, Türkiye'de cam tavan sendromu ile ilgili tezlerin kamu sektörüne ve örgütsel bağlılığa odaklanma eğiliminde olduğunu ve parametrik testlerin sıklıkla kullanıldığını göstermektedir.

**Anahtar Kelimeler:** Cam tavan sendromu, İş yaşamındaki engeller, İş yaşamı.

## INTRODUCTION

The concept of the glass ceiling was first introduced by Carol Hymowitz and Timothy Schellhardt in The Wall Street Journal in 1986. This article discussed the invisible barriers that prevent women from advancing in their careers within the American workforce (Afza & Nevaz, 2008; Cotter et al., 2001; Anafarta, Sarvan & Yapıcı, 2008). Despite laws and international documents in developed countries that aim to provide equal opportunities to all workers, regardless of gender, women still face invisible and indescribable barriers. Although glass ceiling syndrome is most commonly observed in women, it is not limited to them. It can also affect individuals from different ethnic backgrounds and even men in certain career trajectories (Utma, 2019; Buscatto & Marry, 2009; Wirth, 2001). Glass ceiling syndrome highlights that although women can enter management hierarchies through the front door, at some point, they hit an invisible barrier preventing further advancement (Baxter & Wright, 2000; Ferber, 1998). Women who encounter these barriers may lose their motivation, reduce their work effort, and ultimately give up on their career goals because

they believe they will never be able to achieve them (Söyük, 2020; Ailes & Kraushar, 2000).

As shown in Figure 1, when evaluated at a basic level, the main barriers of the glass ceiling are as follows (Öztürk, 2011):



**Figure 1.** Barriers of the Glass Ceiling

Firstly, when we consider individual factors, multiple role assumption refers to women's multiple roles in marriage. Women have more roles than men 'being a good wife', 'being a good mother' to their children, 'being a good employee' at work are roles that are difficult to achieve. While women try to overcome all of these roles, they often have to leave their careers behind or quit their jobs. When we look at the personal preferences and perceptions of women, it is seen that they often put obstacles on their own and that they cannot decide exactly what they want while progressing up the career ladder are among the glass ceiling obstacles (Öztürk, 2011; Janus, 2008; Lemon, 2003; Wrigley, 2002).

When we examine the barriers arising from organisational factors, the culture of the organisation is very important. If the values related to women and men in the organisation have a male-dominated culture, this situation causes glass ceiling syndrome. Moreover, while the policies that emerge depending on this organisational culture provide opportunities for women to move up the career ladder, some policies create obstacles. Another similar problem is that men benefit from mentoring relationships more than women, where the lack of female leaders who can be mentors emerges as a glass ceiling syndrome. In addition to formal groups, there are also informal communication groups in organisations. The problem of women entering these male-dominated communication networks is also considered within the glass ceiling syndrome (Öztürk & Bilkay, 2016; Erçen, 2008). Finally, when we evaluate on the basis of social factors, it is seen that women are more disadvantaged than men in occupational discrimination based on gender. In addition, when we look at the stereotypical prejudices associated with gender, both women and men create glass

ceiling obstacles for women to reach high positions (İnel, 2013; Lockwood, 2004; Cohen & Huffman, 2003).

When we examine the barriers stemming from individual, organizational, and societal factors related to the glass ceiling syndrome, we can observe various outcomes. On an individual level, these barriers often result in decreased motivation, reduced organizational commitment, diminished trust in the organization, and lead to phenomena like organizational cynicism and silence. At the organizational level, the consequences include increased costs, higher employee turnover, increased absenteeism, and a reduction in both quality and productivity (İpçioğlu & Şen, 2018; Johns, 2013).

Management involves the processes of planning, organizing, motivating, coordinating, and controlling. Facing discrimination or ignoring essential actions at any management level is a managerial failure. The efficient and effective use of resources—both human and material—is key to an organization's success. When discrimination occurs, it becomes impossible to maintain these critical functions in a fair and just environment. Gender discrimination, particularly, hinders the development of effective management practices, which in turn leads to the erosion of trust and gradual weakening of the organization's influence, eventually threatening its existence (Karakılıç, 2019; Chisholm-Burns et al., 2017).

Women are especially prevalent in the healthcare sector, making it crucial to support female healthcare professionals and maintain high levels of motivation among them. The career barriers faced by these women present significant challenges, particularly for skilled and determined employees. Although breaking through the glass ceiling requires societal and organizational effort, female healthcare workers must develop self-confidence and strive to achieve their goals. Addressing this issue goes beyond simply providing support and training; women in leadership roles within the medical field play a crucial part in policymaking and implementing quotas that help weaken the glass ceiling (Kurtaran Aydın & Yeşildağ, 2024; Segovia-Saiz et al., 2020).

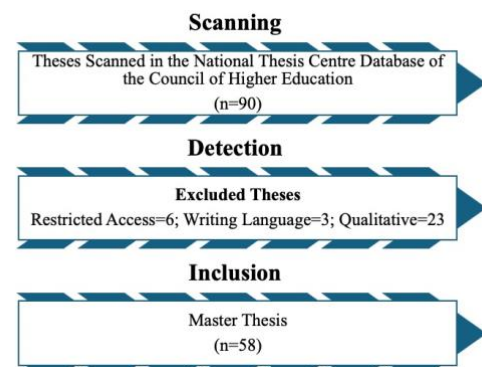
Today, while more women are participating in the workforce, the number of women in management positions remains low. The "glass ceiling" phenomenon is a significant barrier that prevents women from reaching top management levels, regardless of their success or qualifications

(Korkmaz, 2014; Galbreath, 2011). Therefore, studies on this subject should be considered carefully, and administrative planning should be undertaken to overcome these barriers. Only by doing so can we claim to have truly effective management practices.

## MATERIALS and METHODS

This study was conducted to examine postgraduate theses related to the glass ceiling syndrome in Turkey and is descriptive in nature, employing a survey model. This type of research involves defining variables relevant to the study and presenting their usage frequency through percentages and numerical values.

The purpose of this study is to guide future research on glass ceiling syndrome by analyzing the theses completed in Turkey between 2007 and October 2024. To achieve this, theses related to "Glass Ceiling Syndrome" were identified. Using the keywords "glass ceiling" and "glass ceiling syndrome," a search was conducted in the National Thesis Center database under the Higher Education Council (YÖK) up to the year 2024. As a result, 90 postgraduate theses were found. However, some of these theses were excluded from the study due to access restrictions, language issues, or because they were qualitative studies. In total, 58 master's theses meeting the inclusion criteria were analyzed. Figure 2 illustrates the inclusion and selection process in detail.



**Figure 2.** Thesis Inclusion and Selection Phase

Based on the search results, the following inclusion and exclusion criteria were established by the authors to ensure the study's relevance to its objective:

**Inclusion Criteria:**

- The research must focus on the glass ceiling syndrome.
- The full text of the thesis must be accessible.

- The thesis must be written in Turkish.
- The research must employ a quantitative methodology.

#### Exclusion Criteria:

- The full text of the thesis is not accessible to the public.
- The research does not relate to the glass ceiling syndrome.
- The thesis is not written in Turkish.
- The research employs a qualitative methodology.

The 58 theses included in the study were analyzed based on their year of publication, the institute where the research was conducted, the sector from which the sample was drawn, sample size, statistical analyses used, and the topics studied alongside the glass ceiling syndrome. Data were analyzed using the SPSS 25 package, and frequency distributions were examined. Percentages and numerical values were used to present the data.

A limitation of this study is that the sample consists only of theses from the National Thesis Center (YÖK). Furthermore, theses that are inaccessible due to access restrictions were not included in the analysis. Since all the master's theses included in this study were publicly accessible through the Higher Education Council's National Thesis Center, ethical board approval was not required.

## FINDINGS

When we examine Table 1, it shows that the theses included in this study were conducted between 2007 and 2024. Moreover, 17.20% of the theses were completed in 2017, making it the most active year for research on this topic. This was followed by 2018 and 2019.

In Table 2, the distribution of the theses by their respective institutes is shown. It reveals that 68.80% of the theses were conducted in social sciences institutes, followed by institutes of postgraduate education, health sciences, and education sciences.

Table 3 shows the sectoral distribution of the sample used in the theses. It can be seen that 20.64% of the theses involved mixed sectors, while 17.20% of the sample came from the public sector.

**Table 1:** Distribution of Theses on Glass Ceiling Syndrome by Year

Year	Number of	%
2007	1	1,72
2010	1	1,72
2011	1	1,72
2012	4	6,88
2013	3	5,16
2014	1	1,72
2016	5	8,60
2017	10	17,20
2018	8	13,76
2019	8	13,76
2020	2	3,44
2021	5	8,60
2022	3	5,16
2023	4	6,88
2024	2	3,44

**Table 2:** Distribution of Theses on Glass Ceiling Syndrome by Institute

Institute	Number of	%
Education	3	5,16
Postgraduate	12	20,64
Health Sciences	3	5,16
Social Sciences	40	68,80

**Table 3:** Distribution of Theses on Glass Ceiling Syndrome by Sector

Sector	Number of	%
Academia	5	8,60
Banking	5	8,60
Education	4	6,88
Food	1	1,72
Avitation	1	1,72
Public Sector	10	17,20
Mixed*	12	20,64
Logistics	2	3,44
Private	1	1,72
Healthcare	6	10,32
Sports	1	1,72
Trade	4	6,88
Tourism	6	10,32

Table 4 presents the gender distribution of the samples in the theses. It shows that 53.56% of the theses included both male and female participants, while 46.44% of the studies were conducted only with female participants.

**Table 4:** Distribution of Theses on Glass Ceiling Syndrome by Gender

Participants'	Number of	%
Female	27	46,44
Both Female and	31	53,56

Table 5 shows the sample numbers of the theses included in the study by grouping them. The total number of participants in the theses is 14,832. It is seen that studies were conducted with an average of 255 participants per thesis. 36.12% of the studies were completed with a sample of 101-200 participants. Only 10.32% of the theses were conducted with a sample of 401 and above.

**Table 5:** Distribution of Theses on Glass Ceiling Syndrome by Sample Size

Sample Size	Number of	%
Up to 100	7	12,04
101-200	21	36,12
201-300	14	24,08
301-400	10	17,20
401 and above	6	10,32

**Table 6:** Distribution of Theses by Topics Studied with Glass Ceiling Syndrome

Topic	Number of	%
Job Motivation	2	7,14
Job Satisfaction	3	10,71
Organizational	2	7,14
Organizational	8	28,56
Organizational	2	7,14
Burnout	2	7,14
Organizational	1	3,57
Organizational	1	3,57
Psychological	1	3,57
Psychological	1	3,57
Role Ambiguity	1	3,57
Managerial	1	3,57
Intention to	1	3,57
Gender	1	3,57
Learned	1	3,57

Table 6 shows the subjects of the theses included in the study that were studied together with the glass ceiling syndrome. While 30 of the 58 theses included in the study were only related to the glass ceiling syndrome, the following topics were also studied with the glass ceiling syndrome in the remaining 28 theses. When we look at the topics studied together, the following topics come to the fore; organisational commitment, job motivation,

job satisfaction, organisational justice, organisational cynicism and burnout.

Table 7 shows the statistical analyses used in the theses included in the study. The most frequently used of these analyses is frequency analysis with 17,40%. This is followed by Cronbach's Alpha reliability analysis with 15,30%. When we look at the difference tests used in the analyses, respectively; Independent Sample T Test, which is one of the parametric tests, constitutes 11.40% of all tests, while One-Way ANOVA analysis constitutes 11.10%. This shows that most of the analyses used in theses are performed according to parametric analyses.

**Table 7:** Distribution of Statistical Analyses Used in Theses on Glass Ceiling Syndrome

Statistical	Number of	%
Cronbach's	51	15,30
Frequency	58	17,40
Validity	20	6,00
Independent	38	11,40
Chi-Square Test	4	1,20
Correlation	35	10,50
Kruskal-Wallis	15	4,50
Mann-Whitney	16	4,80
Normality Test	8	2,40
One-Way	37	11,10
Post Hoc Test	25	7,50
Regression	18	5,40

## DISCUSSION

As women have started to take more roles in business life, interest in the glass ceiling syndrome has increased. Many researches have been conducted on glass ceiling syndrome. While examining these researches, we focused on the theses on this subject. Thanks to these theses, we had the opportunity to look at the event from a broad perspective. It is important to know which audience the glass ceiling syndrome is studied with the most, in which sectors research on this subject is carried out and with which subjects it is addressed. When the quantitative studies were analysed, it was mostly studied on both women and men. This is of great importance in terms of raising awareness of this issue by men. The fact that the issue is not only a situation that concerns women plays an important role in men being aware of this situation and creating an equal management system. When we examine the

sectoral distribution of the studies, we see that the sectors where women are concentrated are mostly mixed, public, health and tourism. We think that by increasing the number of researches to be conducted in these and other sectors, awareness will gradually increase and merit will gain importance. In addition to these, in a situation that we are curious about as much as the glass ceiling syndrome, it is the most studied subject. Although it has been studied together with many subjects, it has been studied with the subject of organisational commitment the most. This situation reveals the importance of the extent to which the organisational commitment of someone experiencing glass ceiling syndrome is affected. By studying to what extent the organisational commitment of someone who thinks that they will not experience glass ceiling syndrome will be affected, it emphasises the importance of the issue to sector managers. Although this issue was addressed most frequently in 2017 and at least one thesis on the subject continued to be made every year afterwards, today, there is still not enough awareness and this issue has not been resolved. In this period when management and innovation are intertwined, the glass ceiling syndrome is still one of the biggest failures in the field of management and this issue should now be resolved and revealed through studies.

## RESULTS

When the theses on glass ceiling syndrome are examined, the topics covered are as follows; work motivation, job satisfaction, organisational justice, organisational commitment, organisational trust, organisational silence, organisational cynicism, psychological well-being, psychological contract, role ambiguity and managerial syndromes. In this context, 28 of the 58 theses were made with the above-mentioned topics, while the remaining 30 theses were studied only on glass ceiling syndrome. When the sample of the theses is analysed, it is seen that 27 of the theses were conducted only with women and the remaining 31 were conducted with both male and female participants. This shows that the opinions of men are mostly included in the studies on glass ceiling syndrome. In addition, it was determined that approximately 60% of the studies were conducted with samples of 101-300 people. It was observed that only 27% of the studies were

conducted with samples of 301 and above. When we look at the sector in which the samples are taken, it is seen that the (mixed) sector, which is from many different sectors, is predominant, but it is predominant in public samples. In addition, samples from academia, health and tourism sectors also come to the fore.

When the distribution of the statistical methods used in the analyses of the data obtained in the theses was examined, it was seen that frequency analysis was applied in all studies, but Cronbach's Alpha, One-Way ANOVA and Independent Sample T Test were also used intensively. This shows that parametric analysis methods were used in the analyses of most of the theses. According to the institutes where the theses were made, it was determined that the majority of the theses, 68%, were made in the institute of social sciences, although a small number of theses were also made in the institutes of educational sciences and health sciences. Since glass ceiling syndrome is a situation that may occur in the society in general, similar studies should be emphasised in other institutes.

Looking at the years in which the studies were conducted, although 26 studies were conducted between 2017-2019, the number of theses on the subject started to decrease after 2020. This reveals the necessity of raising awareness in order for the subject to come to the fore again in the coming years.

When the studies conducted are examined, the number of people experiencing glass ceiling syndrome is undeniably high. This has very important consequences both for the organisation (absenteeism, employee turnover, cost increase, etc.) and for the individual (motivation, organisational cynicism, organisational silence, etc.). For this reason, by increasing the number of studies to be conducted on the subject and expanding the sample numbers to better represent the universe, awareness of the existing problem should be increased and appropriate solutions should be developed.

## Conflict of interest

The authors disclosed no conflict of interest during the preparation or publication of this manuscript.

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