

Puppet Leadership in Healthcare

And why it's quietly
eroding the
integrity of the
Australian
healthcare system



The current situation

In many of our health organisations now, the pathway to leadership isn't being paved by bold thinking or authentic vision.

It's being acquired by alignment.
Not alignment with mission or patient safety.

But alignment with the priorities, preferences, and egos of those who hold the strings.

This means that leadership opportunities & promotions are not being given to the most capable, courageous, or visionary.

They're very often given to those who are loyally aligned.

Aligned with the decision makers, and
Aligned with the political expectations.

Who gets chosen?

Many leadership appointments in Australian public & private health organisations seem to increasingly reflect those who will 'comply'.

Not who will challenge.

Not who will actually lead.

But those who will maintain the status quo, speak the right jargon, and most importantly, those who won't ruffle feathers.

This isn't about bad people or malicious intent. It's about systems that reward predictability over principle.

Unfortunately, through this process, we're unwittingly building executive cultures where authentic leadership is quietly punished -and "safe" leadership is promoted.

Why is this a problem?

Leadership without autonomy is not leadership.

It's just performance.

And it creates a chilling effect -it signals to emerging leaders, that to move up the corporate ladder, you must quiet your voice & silence independent thought.

Puppet leadership may stabilise short-term politics.

But it undermines long-term credibility, innovation, and culture.

As BMJ Leader[^] notes, “healthcare managerialism often rewards conformity over courage.”

That's not just unfortunate.
It's dangerous.

[^]Martin, G. P., & Learmonth, M. (2020). Leadership, managerialism and professional autonomy: conflicting or complementary? *BMJ Leader*, 4(2), 59–62.

Uncomfortable Truth

The 2020 BMJ Leader article[^] warns that “managerialism in healthcare risks prioritising conformity over courage.”

Too many talented clinicians, nurses and allied health professionals are often bypassed for senior roles - not because they lack leadership qualities, but because they aren't seen as "compliant" enough. Because:

They speak the truth.

They ask uncomfortable questions.

They put patients before politics.

And that's often risky... to the people who are accountable, the people doing the appointing.

The Evidence

Research from Mintzberg^{^^} and others has long noted that true leadership requires independence of thought, courage to act, & accountability to those we serve.

Yet many health systems too often incentivise the opposite.

When appointments are made based on loyalty over leadership, we don't just lose credibility.

We lose innovation.

We lose trust.

We lose authentic leaders.

It's time to stop applauding compliance as if it's competence.

And start rewarding those who lead with integrity - even if it may be inconvenient.

^{^^}Mintzberg, H. (2004). *Managers Not MBAs: A Hard Look at the Soft Practice of Managing and Management Development*. Berrett-Koehler Publishers.

The Lesson

Complex, high-stakes systems like ours, we need leaders who are independent thinkers —

Who challenge orthodoxy, ask inconvenient questions, and dare to speak truth to power when required.

Not figureheads.

Not proxies.

Not puppets.

But the challenge for us as executives isn't just to avoid being puppets.

It's to also to stop being those who are pulling the strings.



Let's start creating space for real leadership.

Not just the kind we currently appoint.

But the kind that transforms.



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