Power Reimagined: Advancing Women into Emerging Leadership Positions

Group on Women in Medicine and Science (GWIMS)

December 3, 2019

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Welcome!

Linda Chaudron, MD, MS

GWIMS Chair (2018-2020)
AAMC Group on Women in Medicine and Science

Learning Objectives

- Define emerging positions of power in academic medicine - are they in the Dean's suite or the C-suite?

- Explore the similarities and differences between emerging and traditional leadership roles.

- Discuss the attributes and skill sets necessary to attain these roles.

- Identify systemic barriers to emerging leadership positions for women and how they can be reduced/eliminated.

- Evaluate the roles of mentorship and sponsorship in promoting women into these leadership roles.

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Today's Speakers

Linda Chaudron, MD, MS
Vice President and Senior Associate Dean for Inclusion and Culture, Professor, Psychiatry, Pediatrics, Ob/Gyn Professor of Clinical Nursing, SON, University of Rochester Medical Center

Diana M. Lautenberger, MA
Director, Academic Affairs, AAMC

Archana Chatterjee, MD, PhD
Professor and Chair, Dept. of Pediatrics, Senior Associate Dean for Faculty Development, Univ. of South Dakota Sanford School of Medicine

Toi Blakley Harris, MD
Professor, Psychiatry, Pediatrics, Family and Community Medicine, Associate Provost, Institutional Diversity, Inclusion and Equity & Student and Trainee Services, Baylor College of Medicine

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Leadership Data and Power mapping
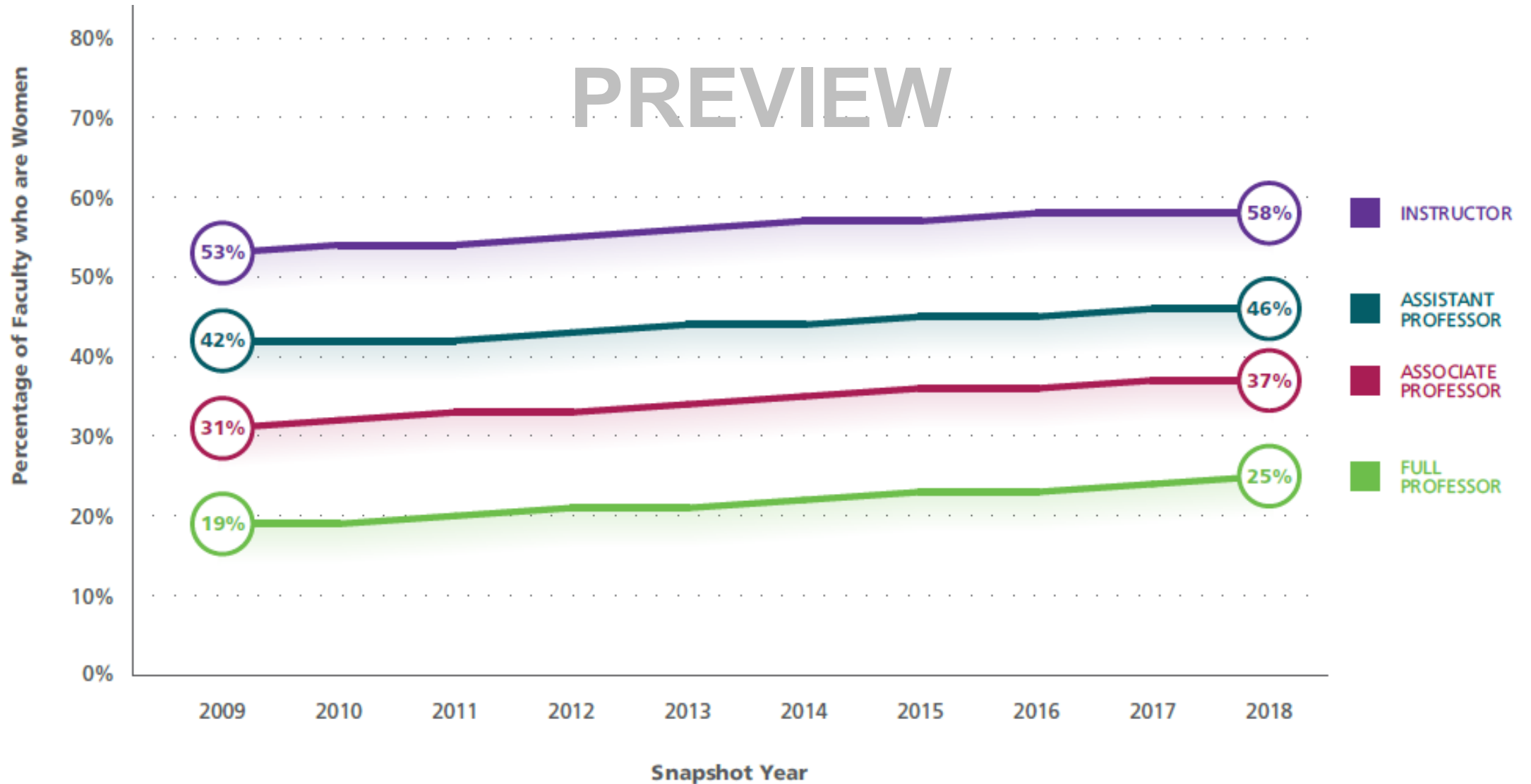
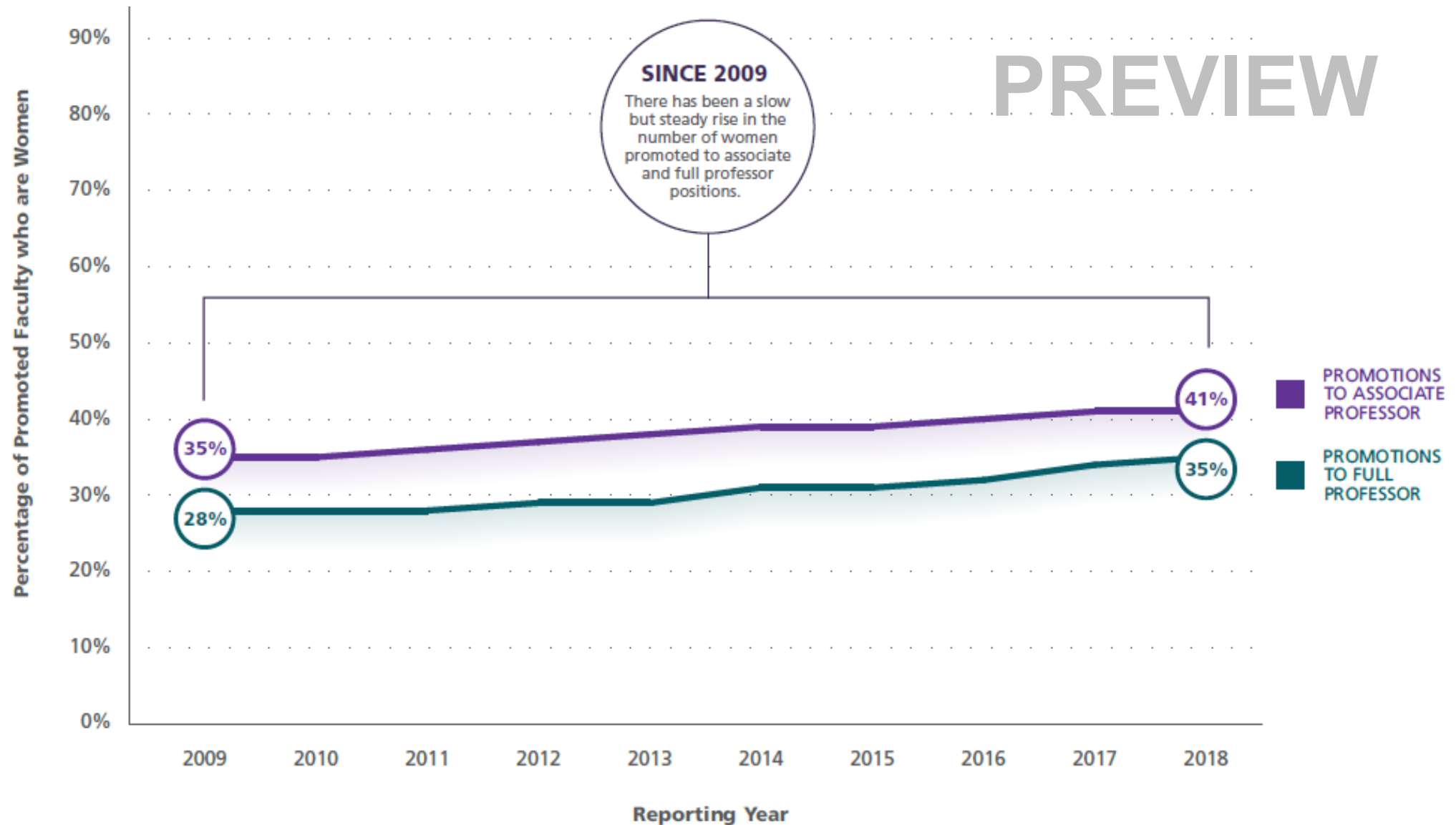**Diana M. Lautenberger, MA**

Director, Academic Affairs

AAMC

Current state of women in academic medicine leadership
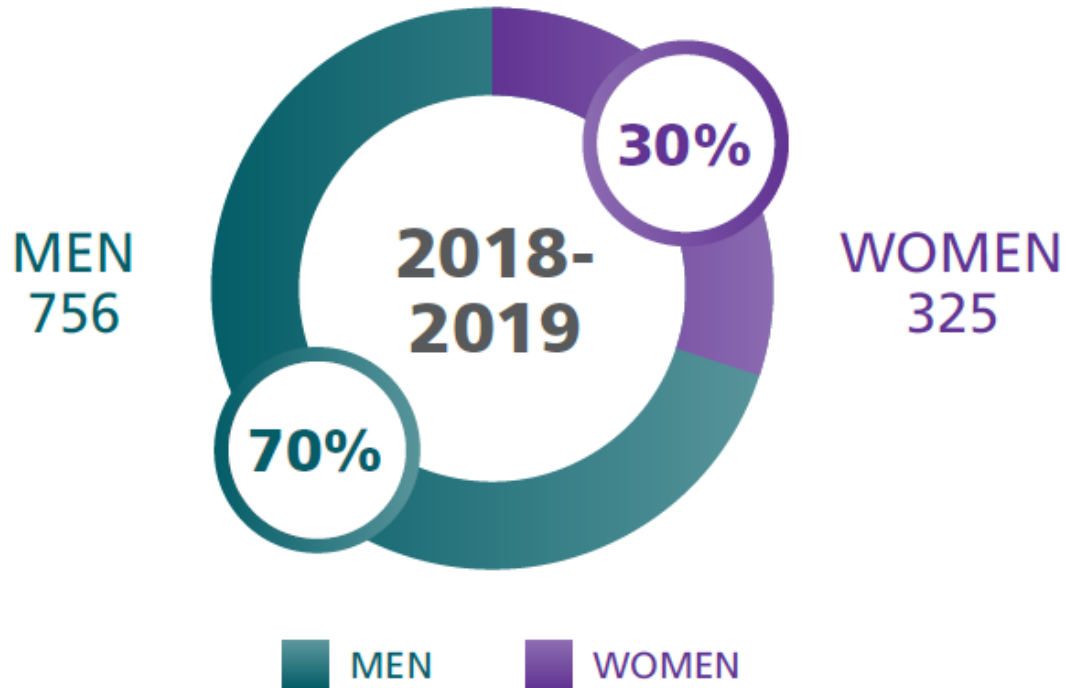
PREVIEW

Faculty Ranks by Gender 2018

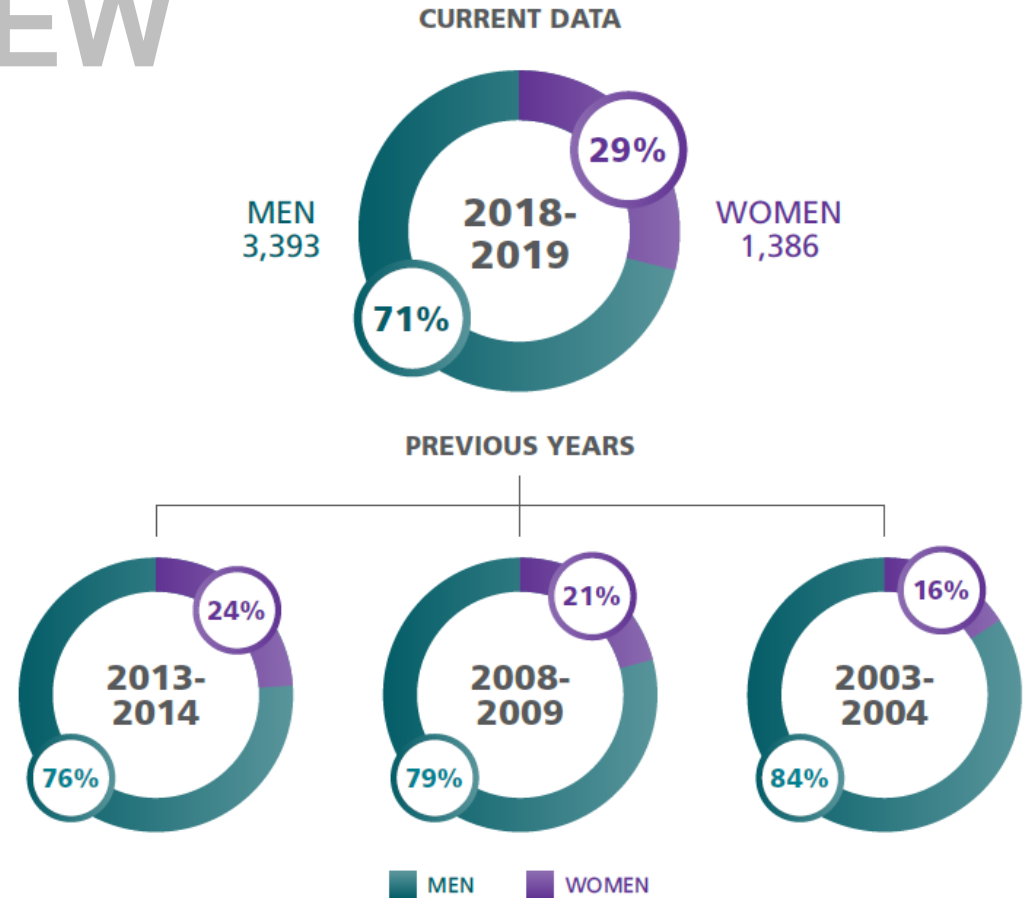AAMC State of Women in Academic Medicine Report, 2019 – to be released Jan 2020

Percentage of Women Promotions

SINCE 2009
There has been a slow but steady rise in the number of women promoted to associate and full professor positions.

PREVIEW

Percentage of Promoted Faculty who are Women

35% ... 41% — PROMOTIONS TO ASSOCIATE PROFESSOR

28% ... 35% — PROMOTIONS TO FULL PROFESSOR

Reporting Year

AAMC State of Women in Academic Medicine Report, 2019 – to be released Jan 2020

Center and Institute Directors

Division and Section Chiefs

PREVIEW

CURRENT DATA

MEN 3,393 — 2018-2019 — 29% WOMEN 1,386 — 71%

PREVIOUS YEARS

2013-2014 — 24% — 76%

2008-2009 — 21% — 79%

2003-2004 — 16% — 84%

MEN 756 — 2018-2019 — 30% — WOMEN 325 — 70%

MEN   WOMEN

MEN   WOMEN

AAMC State of Women in Academic Medicine Report, 2019 – to be released Jan 2020

Department Chairs

AAMC State of Women in Academic Medicine Report, 2019 – to be released Jan 2020

Decanal Roles

PREVIEW

SENIOR ASSOCIATE/ VICE DEAN
WOMEN: 265
MEN: 516

34%
66%

ASSOCIATE DEAN
WOMEN: 331
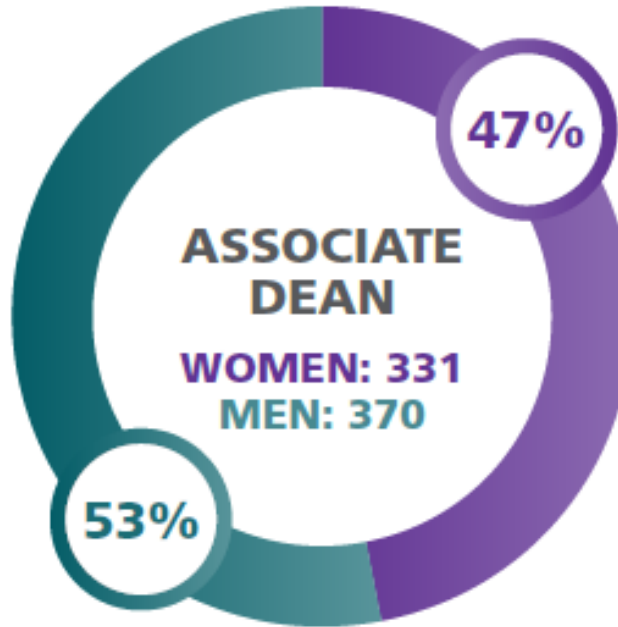MEN: 370

47%
53%

ASSISTANT DEAN
WOMEN: 248
MEN: 228

52%
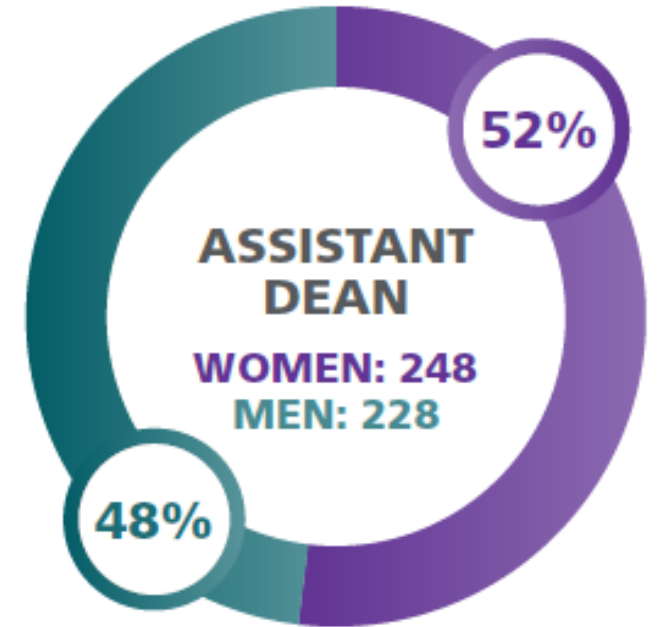48%

WOMEN PREVIOUS YEARS

2003-04: 24%
2008-09: 36%
2013-14: 33%

WOMEN PREVIOUS YEARS

2003-04: 30%
2008-09: 35%
2013-14: 39%

WOMEN PREVIOUS YEARS

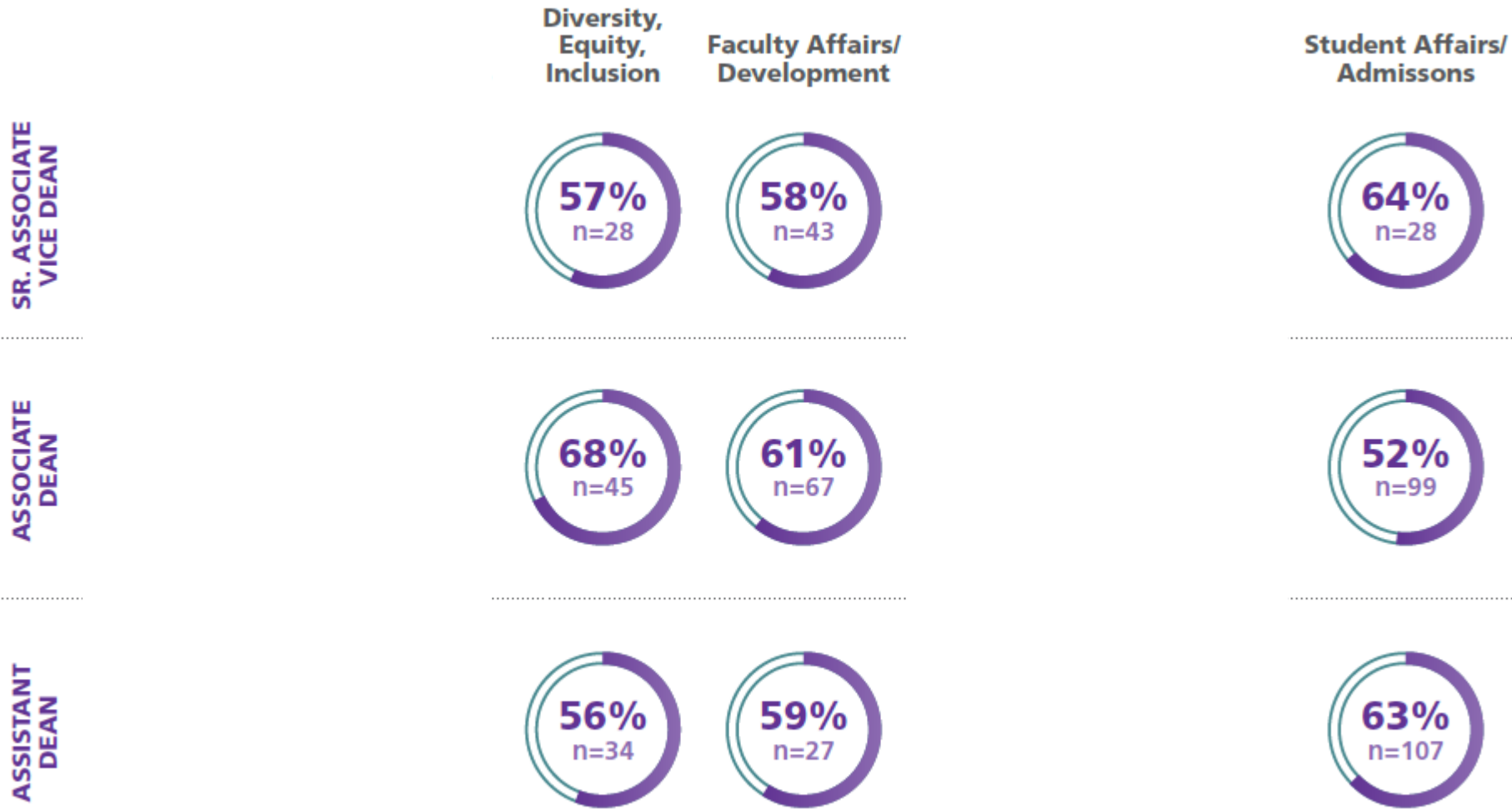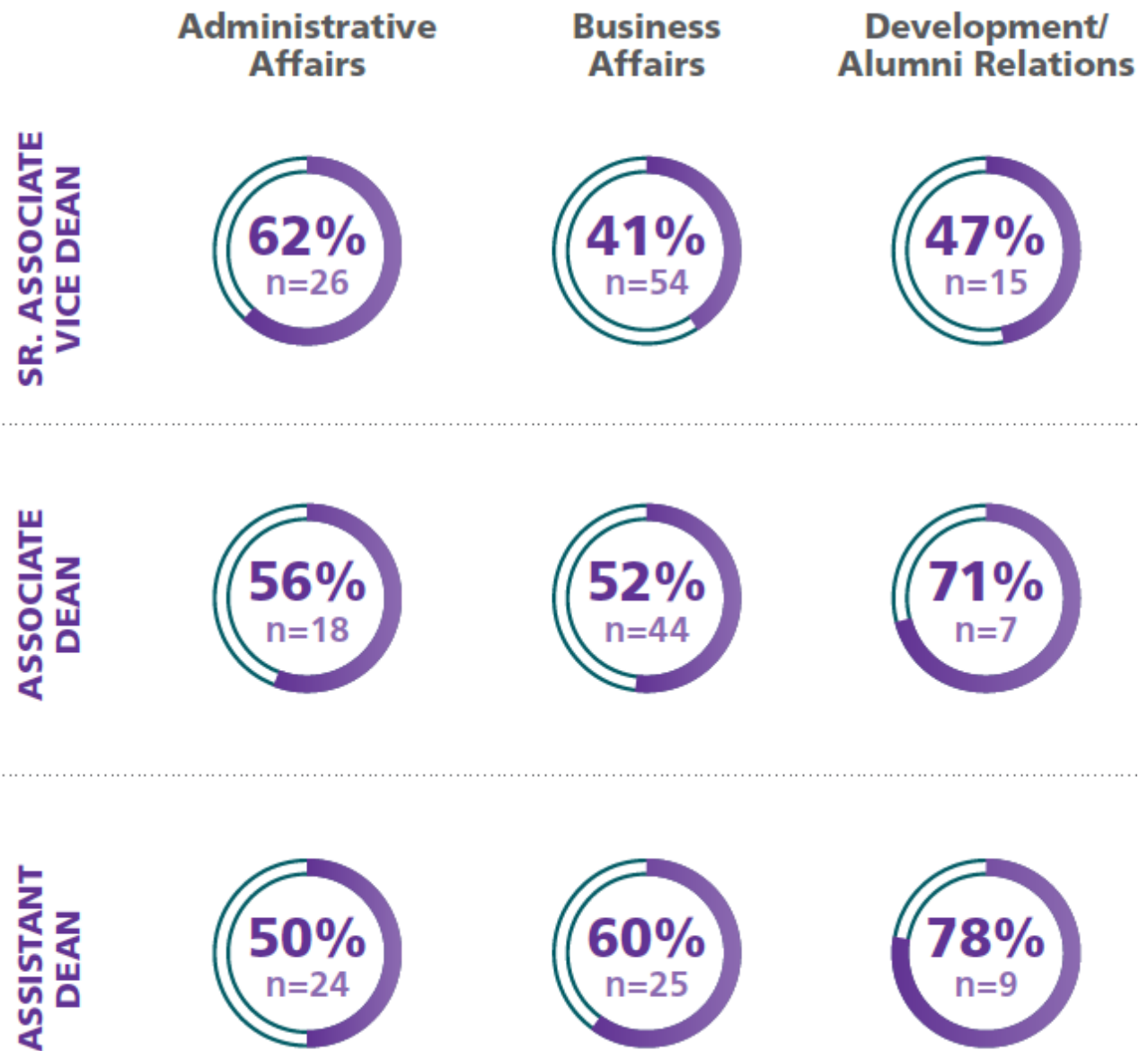2003-04: 47%
2008-09: 48%
2013-14: 46%

MEN   WOMEN

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Decanal Faculty Roles by Office

	Diversity, Equity, Inclusion	Faculty Affairs/ Development	Student Affairs/ Admissons
SR. ASSOCIATE VICE DEAN	57% n=28	58% n=43	64% n=28
ASSOCIATE DEAN	68% n=45	61% n=67	52% n=99
ASSISTANT DEAN	56% n=34	59% n=27	63% n=107

PREVIEW

AAMC State of Women in Academic Medicine Report, 2019 – to be released Jan 2020

Decanal Staff Roles by Office

	Administrative Affairs	Business Affairs	Development/ Alumni Relations
SR. ASSOCIATE VICE DEAN	62% n=26	41% n=54	47% n=15
ASSOCIATE DEAN	56% n=18	52% n=44	71% n=7
ASSISTANT DEAN	50% n=24	60% n=25	78% n=9

PREVIEW

Examples of Types of Power

- Positional
- Influential
- Decision-making
- Financial
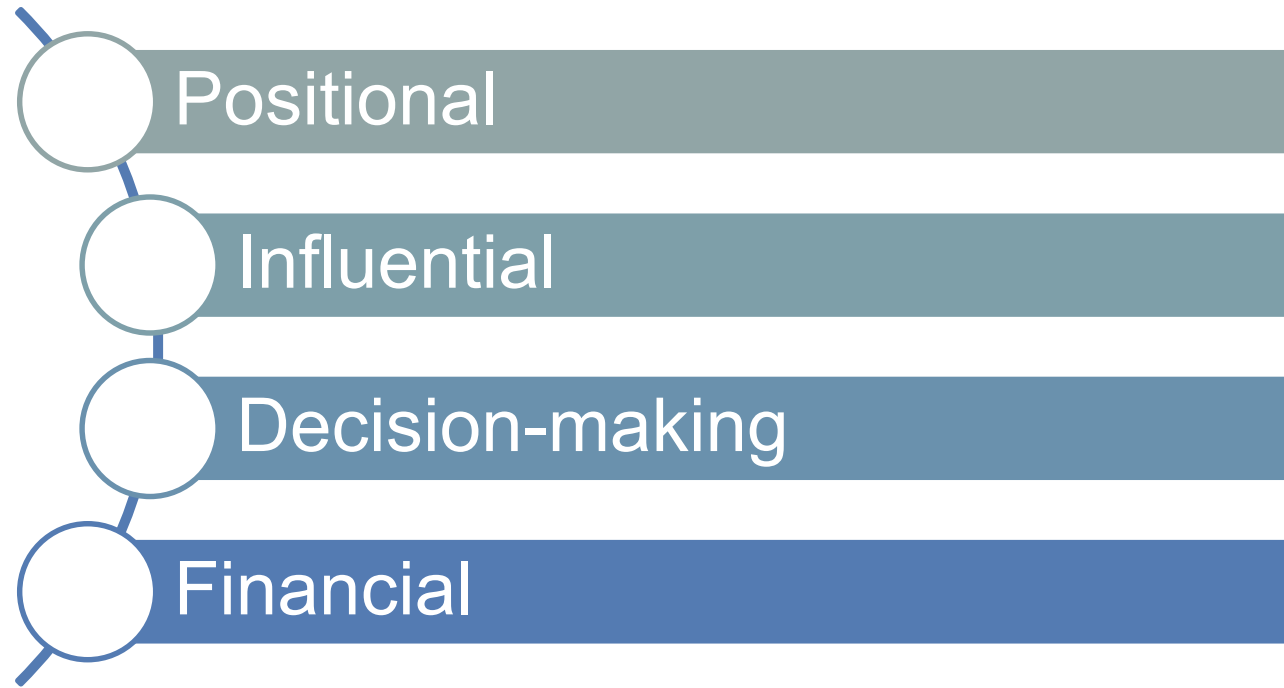
Questions to ask about leaders at your institution:

- Who holds which kinds of power?
- When considering the top 5 leaders in your organization – what types of power do they hold (all of the above?)
- How do you align yourself with different types of power, or set yourself up to gain them?

Leadership and Power

Linda Chaudron, MD, MS

GWIMS Chair
Vice President and Senior Associate Dean for Inclusion and Culture,
Professor, Psychiatry, Pediatrics, Ob/Gyn
Professor of Clinical Nursing
University of Rochester Medical Center

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Moving Women from "Leadership" to "Power"

- Explore the question: Does Leadership = Power ?

- Are the levers of power are shifting away from traditional medical school academics to clinical/health system roles?

- Are we preparing women for the broad range of roles or preparing them for the narrow academic paths?

POWER ≠ LEADERSHIP

Traditional and Emerging Roles

"Power" Roles:

- President
- Provost
- Chancellor/Vice Chancellor
- Dean
- Department Chair
- Vice Dean for Research
- Chief Operating Officer
- Chief Executive Officer
- Chief Financial Officer
- Chief Medical Officer
- Chief Information/Technology Officer
- CEO of Practice Plans

Other Roles/Opportunities:

- Chief Quality Officer
- Chief Technology Officer
- Chief Diversity & Inclusion Officer
- Center Directors
- Service Line Directors
- Finance/Funds Flow
- Translational Research/ Biotech
- Population Health
- Precision Medicine
- Health Equity Disparities
- Hospital Administrative Tracks

Traditional vs. Emerging Leadership (Power) Roles
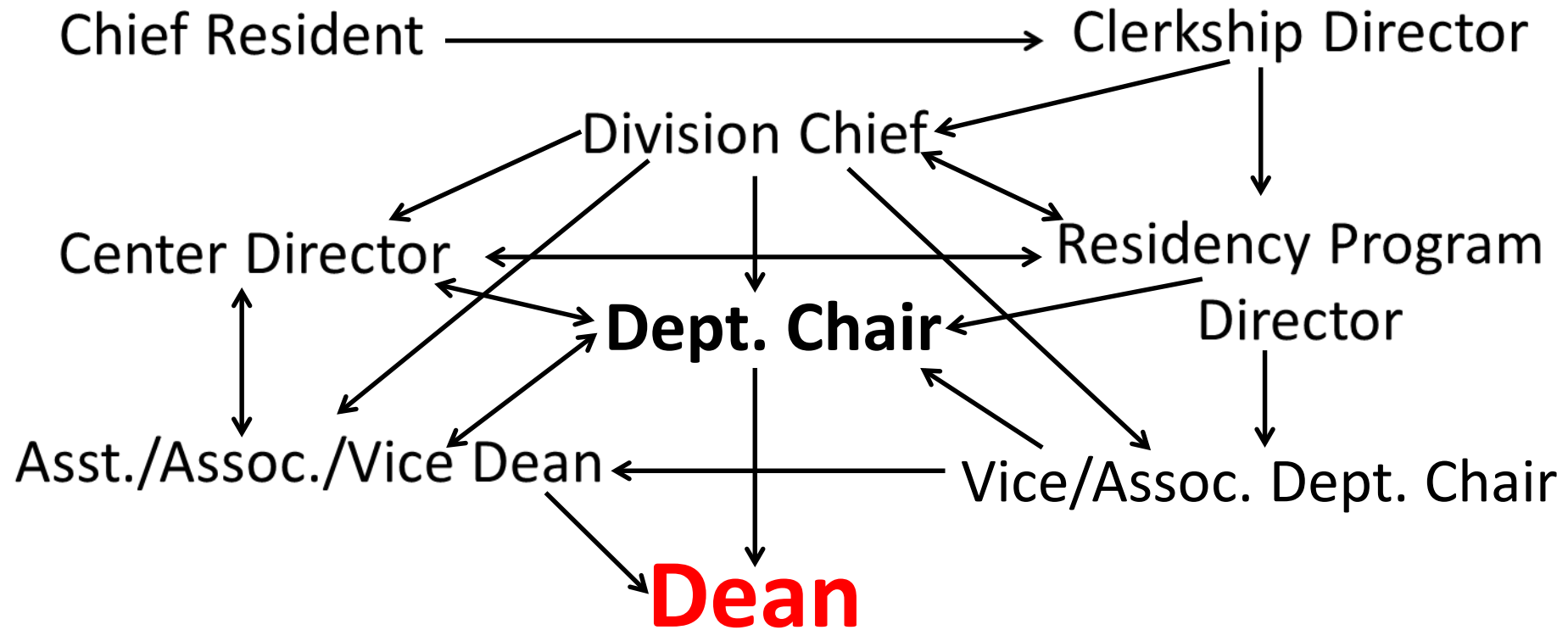
Archana Chatterjee, MD, PhD

GWIMS Past Chair
Professor and Chair, Dept. of Pediatrics
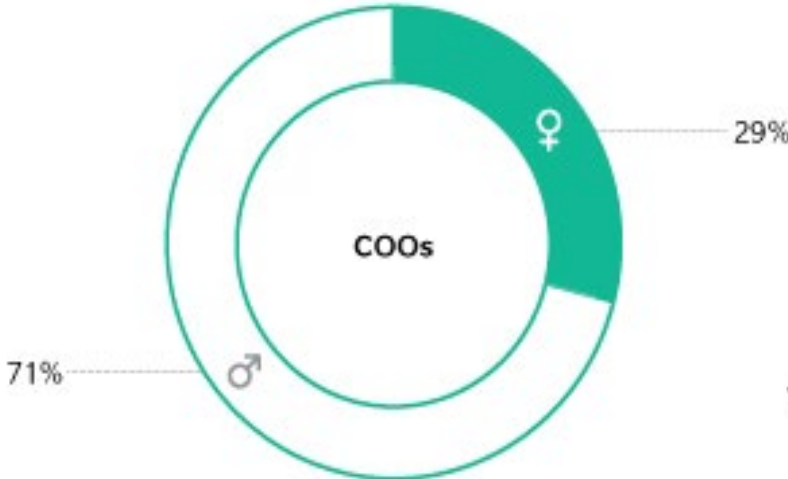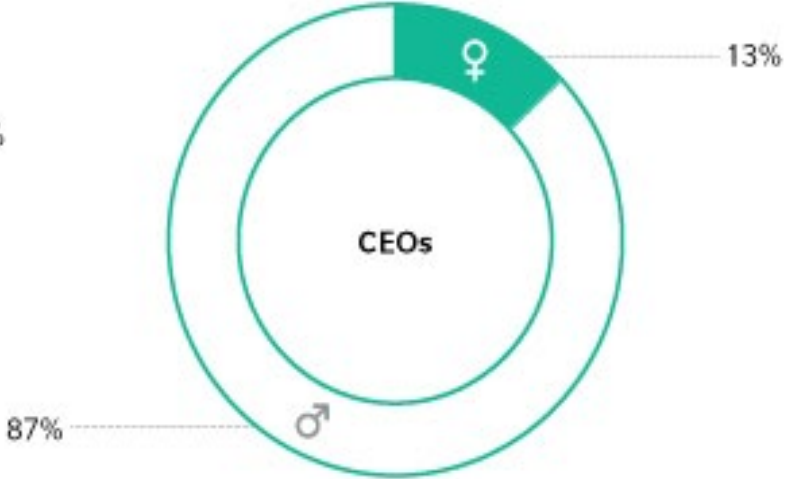Senior Associate Dean for Faculty Development
Univ. of South Dakota Sanford School of Medicine

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Traditional Pathways to Leadership in Academic Medicine

Among healthcare insurers and providers, how do women fare in the industry?

It takes women on average

3-5 years longer

to reach CEO

(depending of type of organization)

SENIOR LEADERSHIP POSITIONS
- ♀ 33%
- ♂ 67%

CEOs
- ♀ 13%
- ♂ 87%

COOs
- ♀ 29%
- ♂ 71%

CFOs/CHIEF ACTUARY
- ♀ 23%
- ♂ 77%

Traditional Leadership Competencies

1. **Social intelligence** - understanding of social situations and dynamics, and ability to operate effectively in a variety of social situations

2. **Interpersonal Skills** - the more relationship-oriented aspects of social effectiveness.

3. **Emotional intelligence** - ability to **communicate** at the emotional level, understand emotions and emotional situations, and be in tune with our own emotions

4. **Prudence** - "Wisdom" - being able to see others' perspectives; being open to and considering others' points of view

5. **Courage** -"Fortitude" - take calculated risks and the courage to: (a) stand up for what you believe; (b) do the right thing

Powell JL. Pathways to Leadership, Wiley & Sons, Inc., 1995

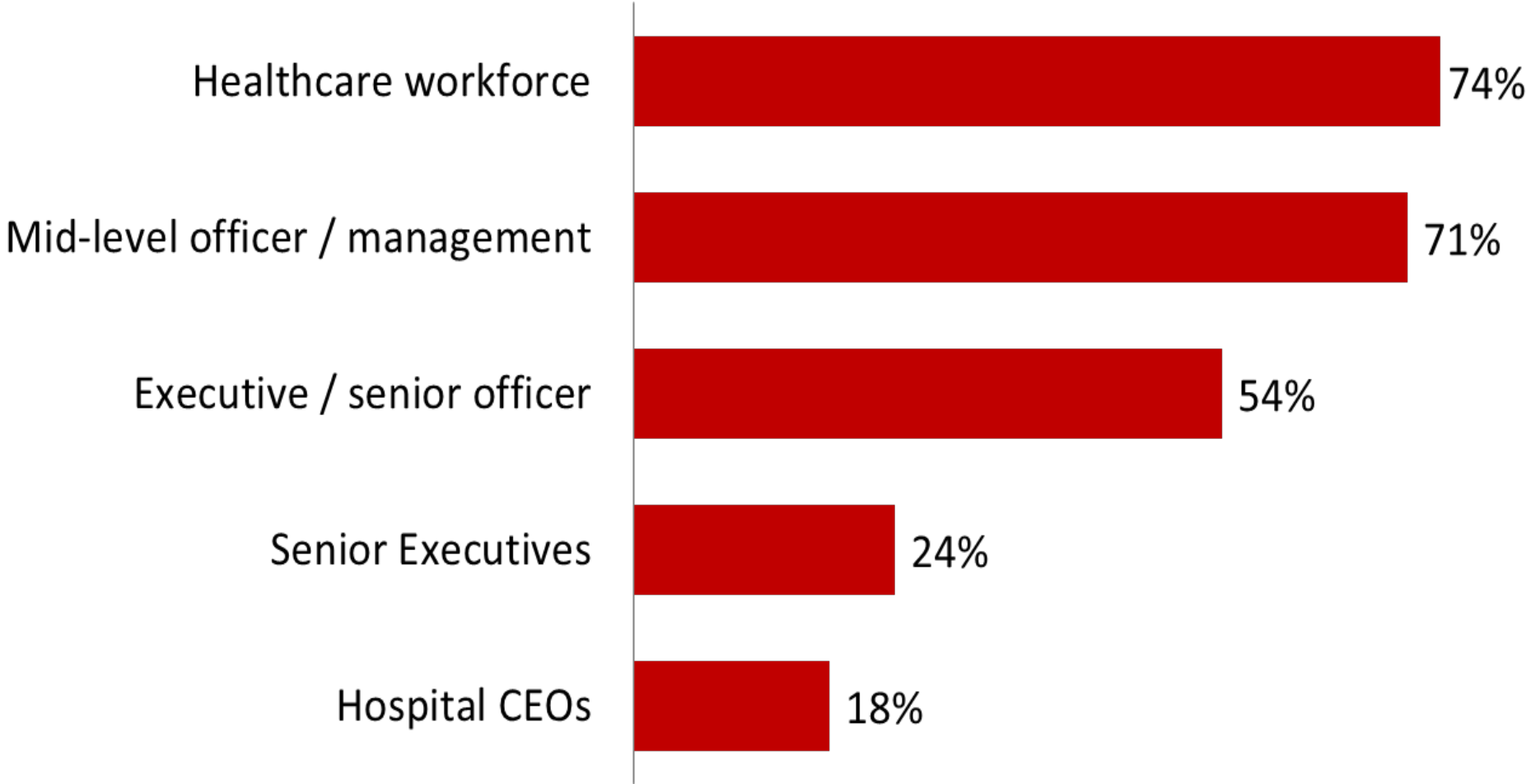# Traditional Leadership Competencies (cont.)

6. **<u>Conflict Management</u>** - helping colleagues to avoid or resolve interpersonal conflicts

7. **<u>Decision Making</u>** - a good leader understands when to make a decision, when to consult subordinates/ peers, and when it's time to step back and let others decide

8. **<u>Political Skills</u>** - know how the game is played, manage political behavior so that it does not lead to group/organizational dysfunction

9. **<u>Influence Skills</u>** - master social influence, ability to wield power effectively and fairly

10. **<u>Area Expertise/Competence</u>** – builds credibility - knowledge of all aspects of the job is not as important as it used to be

Powell JL. Pathways to Leadership, Wiley & Sons, Inc., 1995

"Top Ten" Issues Facing Hospitals

1. Financial challenges
2. Healthcare reform
3. Governmental mandates
4. Patient safety and quality
5. Care for the uninsured
6. Patient satisfaction
7. Physician-hospital relations
8. Population health management
9. Technology
10. Personnel shortages

Women Under-represented at Top Levels

Category	Percentage
Healthcare workforce	74%
Mid-level officer / management	71%
Executive / senior officer	54%
Senior Executives	24%
Hospital CEOs	18%

Fewer Women Aspire to be CEOs,
More Women Aspire to Stay Within Healthcare

A Comparison of the Career Attainments of Men and Women Healthcare Executives. American College of Healthcare Executives
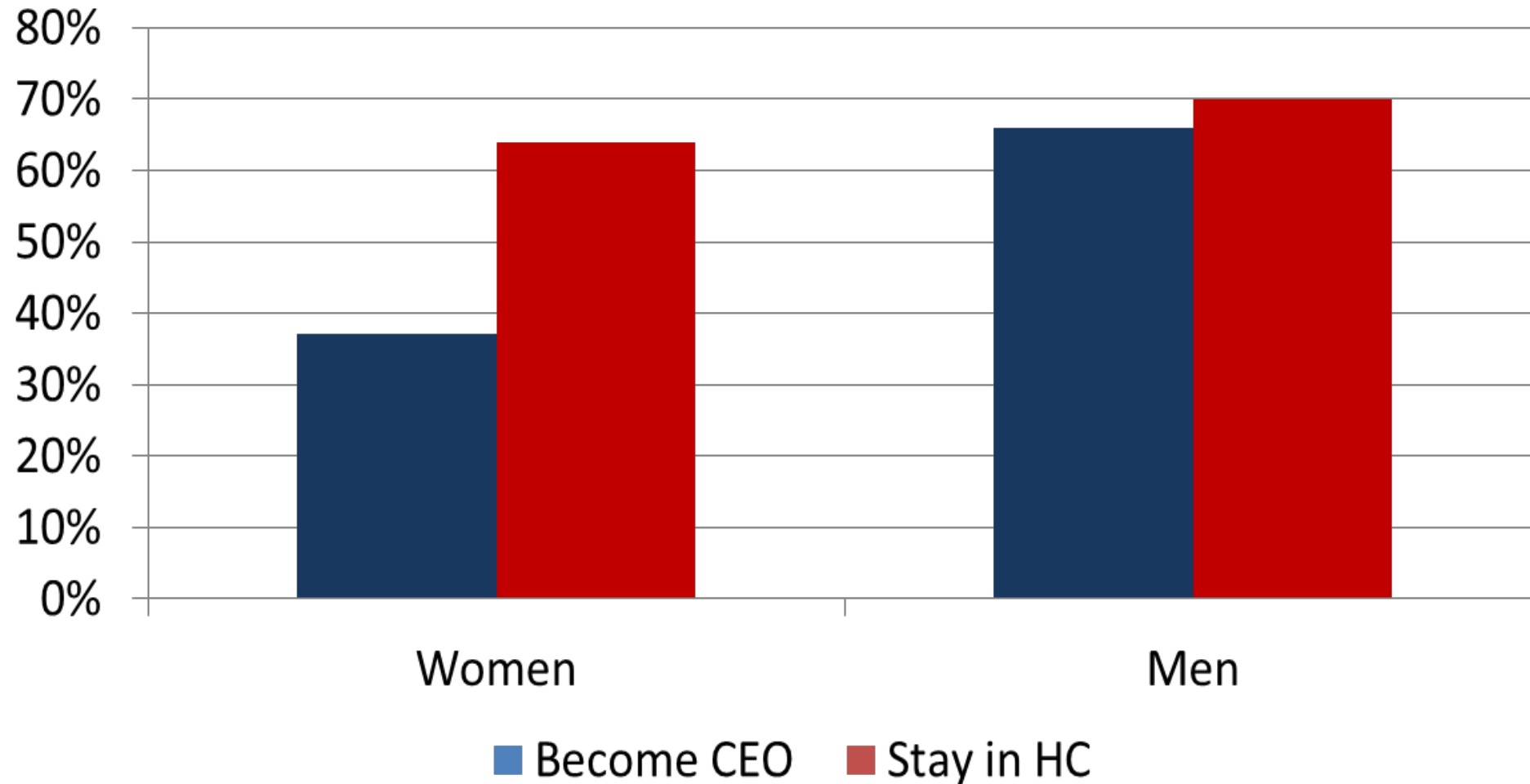
Healthcare Leadership and Gender Study

- Identify specific factors and trends that differ by gender and impact process of recruiting, developing, retaining and advancing healthcare talent

- Study conducted by Diversified Research in partnership with the Women's Leadership Center at Kennesaw State University Coles College of Business, GA
  - 282 quantitative responses to online survey
  - 157 women, 125 men in leadership levels from Director to CEO
  - 58% secular non-profits, 21% religious non-profits, 9% government, 7% for-profits, 5% other
  - 38% > 10,000 employees; 22% between 5,000 and 9,999 employees; 32% between 1,000 and 4,999 employees; 8% fewer than 999 employees
  - 52% urban, 36% suburban, 12% rural

Questions Addressed

- What factors explain gender differences in career outcomes of healthcare leaders?

- How do career and life interests of healthcare leaders differ for men and women? Do these variables explain gender differences in salary, managerial level and career satisfaction?

- What do male and female healthcare leaders perceive as either positively or negatively impacting their career success?

Women and Men in Leadership Positions have Divergent Educational and Work Backgrounds

Among CEOs in the survey:

- 53% of women CEOs have nursing backgrounds.

- 43% of men CEOs come from general administration.

Educational Background: All Leaders	
Men	**Women**
MBA (25.4%)	MBA (19.1%)
MD (25.5%)	MHA (14.6%)
MHA (12.7%)	MSN (12.7%)
Bachelors (5.6%)	Bachelors (10.8%)

Functional Background: All Leaders	
Men	**Women**
Medicine (35.7%)	Nursing (43.9%)
Finance (16.7%)	Medicine (9.6%)
Administration (14.3%)	Finance, HR, Admin (6.4% each)

Traditional vs. New Leadership Skills

Traditional Leadership Skills:

- Clinical
- Pedagogical
- Research
- Communication
- Promotion and tenure
- Leadership training
- Mentoring
- Networking
- Teamwork

New Skills Needed:

- Strategic planning
- Financial training
- Business acumen
- Insurance/third-party payer
- Government mandates
- Quality and Safety
- Patient Satisfaction
- Legal/regulatory/HR
- Technological
- Coalition building
- Negotiation/conflict management
- Promoting wellness
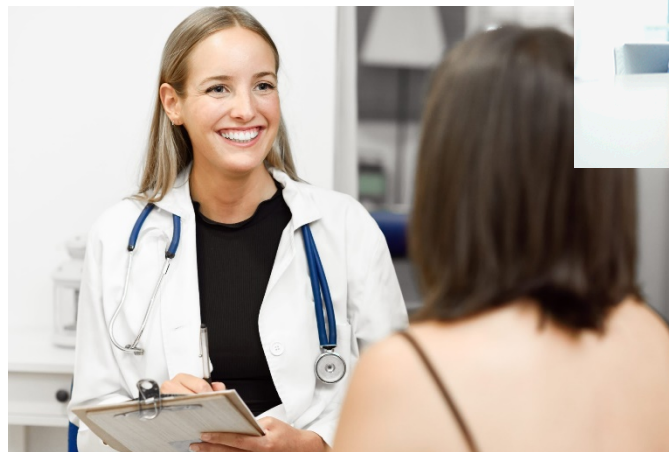
SECTION TITLE

Toi Blakley Harris, MD

GWIMS Chair-elect
Professor, Psychiatry, Pediatrics, Family and Community Medicine, Associate Provost, Institutional Diversity, Inclusion and Equity & Student and Trainee Services, Baylor College of Medicine
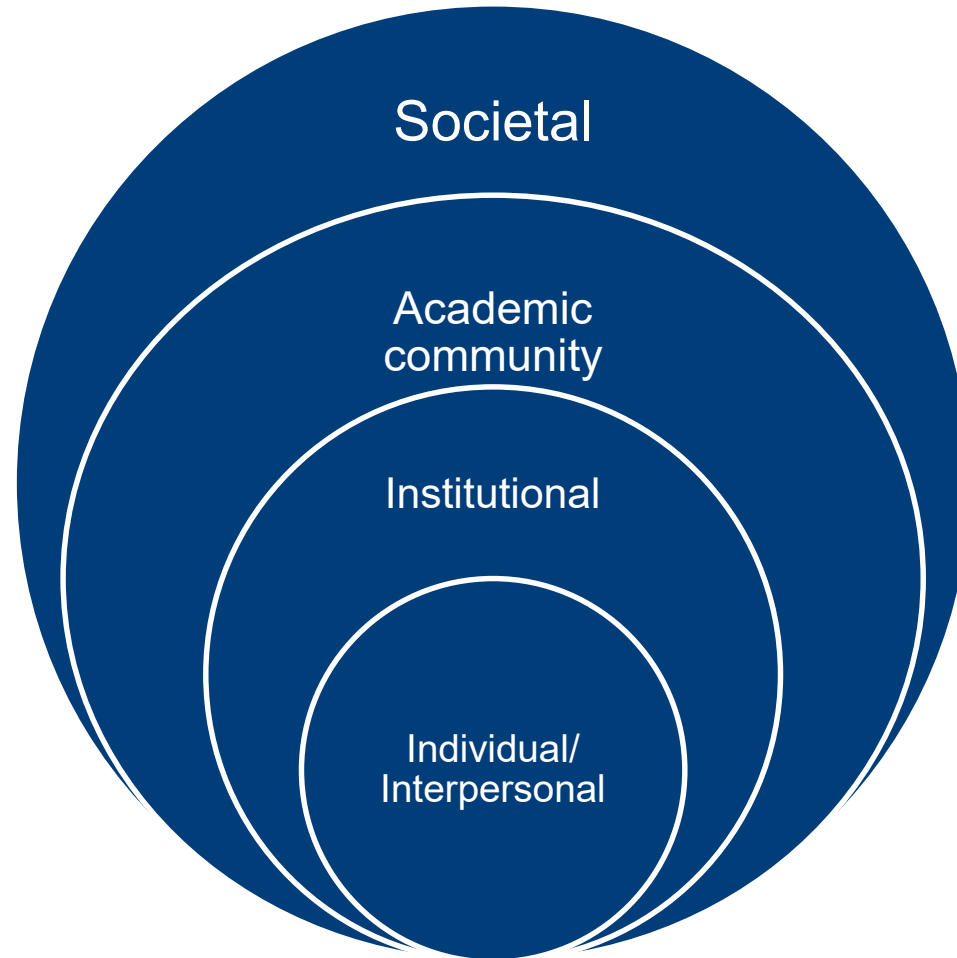
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Challenges and Strategies

Questions to Consider:

1. What are the barriers getting these skills?

2. What are the barriers to getting these positions?

The Social/Ecological Model for Women's Leadership and Advancement

Society

- Challenges:
  - Gender stereotypes
    - Communal
    - Agentic
  - Intersectionality

- Strategies:

- Education and training

- Discrimination and anti-bias policies (e.g. Title VII, Title IX, ADA)

Societal

Academic Community

- Challenges:
  - Authorship and editorial boards
  - Invited speakers
  - Awards
  - Grant funding

- Strategies:
  - Policies and position statements
  - National professional development programs
  - Inclusion and engagement
 - Research funding procedures, support and training

Academic Community

Institutions

- Challenges:
  - Limited institutional programming for recruiting, retaining or promoting women
  - Workplace discrimination
  - Work-family conflict
- Strategies:
  - Track, monitor and report (advancement, equity, climate)
  - Engage stakeholders to promote safety
  - Train search and promotions committee members
  - Reassign duties to compensate for the 'diversity tax'
  - Offer and sponsor women to attend professional development programs
  - Provide mentorship and sponsorship opportunities
  - Create opportunities for career flexibility and caregiver support (family leave policies, child and elder care)

Institutional
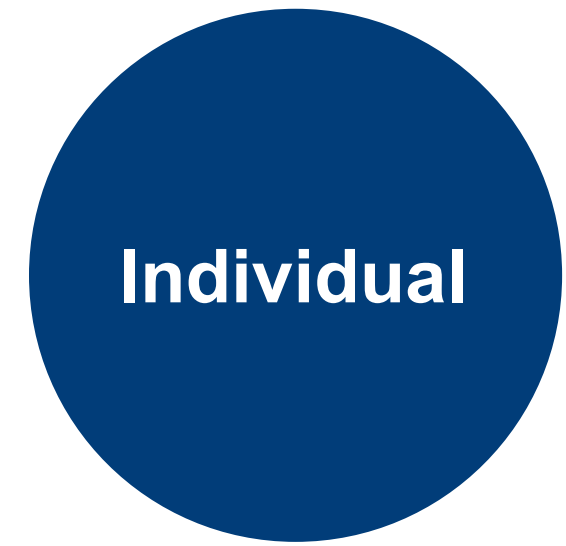
Individual/Interpersonal : Challenges

Individual

- Limited awareness of role and skill set evolution
- Access to education, training, mentorship and sponsorship
- Work-family conflict
- Stereotype threat
- Personal Well-being

Individual/Interpersonal: Strategies

- Partner

- Family members

- Friends

- Senior executives at other organizations

- Executive coaches

- Senior executives at current organization

- Professional recruiters

- Business consultants

What are immediate actions you can take?

- Identify mentors and sponsors

- Expand your networks

- Learn where the power resides in your organization – is your organization going in this direction?

- Look at your data

- Partner with other institutional colleagues/schools to expand your professional skills (Schools of Business, Law, etc.)

More From GWIMS

- GWIMS Toolkit is a series of presentations designed to provide practical guidance on a variety of topics relevant to women faculty in academic medicine. www.aamc.org/gwims

Members of GWIMS can:

- Receive the GWIMS Newsletter

- Use the GWIMS bi-directional listserv to pose questions to the group gwims@lists.aamc.org

- Follow us on social media @AAMCProfDev

- Send questions and comments to gwims@aamc.org

Join us! GWIMS is meeting with GREAT in 2020

2020 AAMC Joint Professional Development Conference:
Group on Graduate Research, Education, and Training (GREAT)
and the Group on Women in Medicine and Science (GWIMS)

Sept. 10-12, 2020
Swissotel Chicago
Chicago, Illinois

Learn
Serve
Lead

Save the date!

"Inclusion across Transitions"

- **Transitions**
- **Resiliency**
- **Culture and Climate**
- **Other Emerging Topics**

Session Proposal Deadline:
January 6th

References

AAMC State of Women in Academic Medicine Report, 2019 – to be released Jan 2020

Top Issues Confronting CEOs: 2013. American College of Healthcare Executives

A Comparison of the Career Attainments of Men and Women Healthcare Executives. American College of Healthcare Executives

Few women reach healthcare leadership roles https://www.modernhealthcare.com/operations/few-women-reach-healthcare-leadership-roles

Healthcare's Gender Diversity Shortage https://www.kornferry.com/institute/healthcare-women-leadership

Women Leaders in Healthcare Conference, Chicago August 13-14, 2020 https://www.women-leaders.modernhealthcare.com/

Health care needs more female leadership https://www.bizjournals.com/seattle/news/2019/04/04/opinion-health-care-female-leadership-wsha-jaffe.html

Women in Healthcare Leadership 2019 https://www.oliverwyman.com/our-expertise/insights/2019/jan/women-in-healthcare-leadership.html

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Helitzer, D.L., Newbill, S.L., Cadinali, G., Morahan, P.S., Chang, S., Magrane, D., Changing the Culture of Academic Medicine: Critical Mass or Critical Actors?, J. Women's Health (2017):26(5)