FROM THE PRESIDENT

It is a pleasure for me to send greetings to you this year as SELAM President. I would like to thank Vivian Reznik, Immediate Past President of SELAM, and the rest of the Board members, for all of their hard work during the past year. Moving us forward into new directions and new beginnings has truly been a team effort.

Reflecting on recent events, we had an extremely successful annual spring meeting in Philadelphia this year. The theme for the meeting was “Effective Leadership.” Drawing on expertise both within and outside the organization, the speakers were both informative and entertaining. Topics ranged from “Academic Finance” to “Tools for the Appreciative Leader,” as well as a revisit with our old friend, the Myers-Briggs Type Indicator. Linda Adkison and the rest of the Program Committee did a fantastic job. Everyone enjoyed both the time to reconnect with old friends and classmates as well as make new acquaintances with the 2003-2004 ELAM class. The auction was also highly successful, thanks to Rosemarie Fisher’s “effective leadership skills.” Participants came away with a variety of items that are sure to help them ascend the academic or corporate career ladder. SELAM also has a new scarf design. Simin Dadparvar and the Class of 1999-2000 have been working with Philadelphia University (the former Philadelphia College of Textile and Design) to design a new look for the SELAM scarf. At the spring meeting, members voted on three lovely scarf paintings depicting the SELAM design. Scarves with the winning design will be available for purchase in September, 2004.

In addition, the ELAM Fellows planned a shopping spree fundraiser for SELAM at a local boutique, ML Lawrence and Company. The class purchases raised $3,056 for SELAM. Kudos and much appreciation go to the now 2003-2004 ELUMs!

Again, thanks to all who contributed toward making this year’s meeting a huge success!

What is planned for SELAM in 2004-05?

For the first time, SELAM will co-sponsor a half-day CE course at the 2004 AAMC meeting in Boston, MA. Scheduled for Saturday afternoon, November 6, 2004, the course will be held prior to our annual SELAM-sponsored AAMC reception that evening. Carol Scott, MD, MSEd, FACEP (MD from Rush Medical College; residencies at Duke and Johns Hopkins; MSEd, Johns Hopkins; President, The Medical Education Group; author of Life Lessons from the ER: 25 Stories to Resuscitate Your Personal and Professional Spirit) will speak on “Forget Balance! Discover Your BestStress™ Zone.” She has spoken extensively on this topic. I am sure that you’ll find this session to be highly useful as we continue to balance our lives in today’s busy environment. Mark the date on your calendars now and plan to arrive at the AAMC meeting a day early.

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We will also be presenting the 2004 SELAM Award for Excellence at the AAMC SELAM reception in Boston. The Award for Excellence is presented annually to an individual who best demonstrates excellence in her/his commitment to the advancement and promotion of women in academic health professions. Last year’s award recipients were Dr. Nancy Gary, Dean Emerita of the F Edward Hebert School of Medicine, Uniformed Services University of Health Sciences, and Dr. Sharon Turner, Dean of the University of Kentucky College of Dentistry (ELAM 1997-98).

As you can see, SELAM is continually developing and expanding. Thanks to Alice Speer and the “savvy” Development Committee, we are able to provide you, the membership, with outstanding programs and opportunities for development. Earlier you received a request to complete an online survey asking for your opinions about issues important to SELAM. We appreciate your input. Thanks to all those who responded. We will provide you with the results in the next newsletter once they’ve been tabulated. This will help the Board in making future decisions about SELAM that will be responsive to your needs.

In closing, I look forward to a great year for SELAM as we work together toward expanding membership, identifying development opportunities and providing excellent continuing education programming. Thank you for your continued support.

To quote Peter Drucker: “The best way to predict the future is to create it.”

Karen P. West, DMD, MPH
kpwest1@email.uky.edu

SELAM International
2004-2005 Board of Directors

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kpwest1@pop.uky.edu
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vreznik@ucsd.edu
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aspeer@utmb.edu

Members-at-Large
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wendy.brown@med.va.gov
Leilani Doty, PhD (2002-2005)
doty@neurology.ufl.edu
Rosalyn C. Richman, MA (ex officio)
rosalyn.richman@drexel.edu
Angelina L. Trujillo, MD (2004-2007)
atrujill@prodigy.net

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EDITOR’S CORNER

Another exciting, jam-packed issue for you! We have (count ‘em) three SELAM Mentors. A vortex exists at the confluence of the Kansas and Missouri Rivers: women at the helm (p. 8) include three deans of three major universities: Barbara Atkinson, Betty Drees, and Sandra Willise. Makes you want to move there!

Check out SELAM & ELUM News (p. 3) to see what your colleagues are up to. Meet the 45 women who make up the 2004-05 and 10th ELAM Class (p. 17), ending the first decade of the ELAM Program. Steel Magnolias, a learning community of the 2003-04 ELAM Class, summarize their Spring Session (p. 34). Helen Li highlights our Spring CE Meeting (p. 27). Roz Richman and Deidra Lyngard update us on ELAM (p. 33).

Lois Geist reflects on comprehensive evaluations (p. 22), which are part of leadership development and increasingly of postgraduate medical training programs. Judith Katz provides crucial points for job negotiations (p. 22). Natalie Kaslow shares key points from two leadership programs (p. 24). Catherine Otto reflects on leading from within (p. 25), providing examples of non-traditional leadership positions in academic medicine. Patty Simmons introduces us to life as a public servant (p. 26). Bela Sood draws interesting parallels between one’s personal portfolio and the stock market (p. 26). Our columnists focus on visualizing (Bachrach, p. 14), women helping women (Morahan, p. 19), career planning (Greenwood, p. 20), and personal responsibility (Avery, p. 29). And for your reading pleasure, see book reviews (p. 31).

Rather than remodel, I found a new floor plan. In the process of debulking (a pay stub from college work-study?!) and decluttering, I discovered this anonymous scribble, “Life-enhancing choices.” So I ponder what I learned from choosing an assistant who left Purchasing 2 yr. ago, only to return there 1 mo. ago – during a hiring freeze after creating a Summer newsletter that wouldn’t print. (Sigh.) Patience, as a start! Pacing, as I juggled pre-open house chores (hmmm, my weekly housecleaners skip tops of furniture corners) with physician and secretarial duties, my master’s project, and an intensive quality improvement course (homework: interdisciplinary hospital team work on quality improvement). So I share two thoughts with my equally busy readers:

Do the best you can in every task, no matter how unimportant it may seem at the time. No one learns more about a problem than the person at the bottom.

Sandra Day O’Connor
Jurist & 1st female US Supreme Court justice

Out of clutter, find simplicity; from discord, find harmony; in the middle of opportunity, lies opportunity.

Albert Einstein
Kris Lohr

Karen P. West, DMD, MPH
kpwest1@email.uky.edu

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SELAM AND ELUM NEWS

Promotions & New Positions, SELAM Members

Bernstein, Carol A. MD (ELAM 2002-03), has been named the Designated Institutional Official for all of the ACGME Programs at the New York University SOM (67 programs, 1100 residents). “I am a bit swamped, but doing well.”

Cunningham, Kathryn PhD (ELAM 1999-2000), University of Texas Medical Branch SOM, was named Director, Center for Addiction Research (Jan 2004), From Dean Stanley Lemon’s announcement: “I am very pleased to announce the creation of a Center for Addiction Research within the SOM, to be directed by Kathryn A. Cunningham, PhD, Professor and Vice Chair for Research in the Department of Pharmacology & Toxicology, effective 1 January, 2004. Dr. Cunningham’s research focuses on the action of drugs of abuse on the brain. She has been the recipient of numerous grants supporting her research in this area. Dr. Cunningham has substantial expertise in a variety of areas related to the treatment of substance abuse and has served on NIH study sections and published widely in peer-reviewed journals and other publications. Often sought as a lecturer and seminar participant, she has addressed numerous medical groups throughout the country and abroad. She is a member of the American College of Neuropsychopharmacology and has served on the Board of Directors of the College on Problems of Drug Dependence. Dr. Cunningham has been recognized for her contributions to substance abuse research, and is spearheading the use of proteomics technology in determining the physical basis of addiction. She is the recipient of an Independent Scientist Award from the National Institute on Drug Abuse and received the 2001 Distinguished Faculty Research Award at UTMB.”

D’Onofrio, Gail MD, MS (ELAM 2001-02), Yale SOM, was named Interim Chief, Section of Emergency Medicine, Department of Surgery. (April 2004)

Heard, Jeanne MD, PhD (ELAM 1999-2000), was named the Accreditation Council for Graduate Medical Education’s director of residency review committee activities. The announcement said: “Dr. Heard, an associate dean for graduate medical education and a professor of internal medicine at the University of Arkansas for Medical Sciences COM, joined the ACGME in May. Dr. Heard will direct the ACGME’s 27 residency review committees and monitor and lead development of national accreditation standards for 7,900 ACGME-accredited residency programs. The ACGME is fortunate to have attracted Jeanne Heard. She brings deep and broad experience in medical education, a serious commitment to improvement and sophisticated knowledge about the workings of graduate medical education,” said ACGME Executive Director David C. Leach, MD. “She also has excellent judgment. Our mission will be strengthened by her presence.”

Fitzpatrick, Lorraine MD (ELAM 1995-96), moved from Mayo Medical School in February to become Director, Global Development, for Amgen Inc. She wrote, “A wonderful opportunity came up, and after 15 years of Minnesota winters, this was a great decision. Bought a home that overlooks the Santa Monica mountains. I am 12 miles from Malibu! Come visit!”

Kilpatrick, Sarah MD, PhD (ELAM 1998-99), University of Illinois at Chicago COM, was appointed Head, Department of Obstetrics and Gynecology; Goldstick-Arends Chair; and Director, Division of Maternal Fetal Medicine. She had been interim department head. (Sept 2003)

Lane, Pascale MD (ELAM 2002-03), University of Nebraska COM, was promoted to full Professor of Pediatrics (July 2004).

Newton, Carol PhD (ELAM 2003-04), University of Medicine & Dentistry of New Jersey-Newark SOM, was appointed permanent Chair, Department of Microbiology and Molecular Genetics. She writes: “I’m really happy to tell you that I will be the permanent chair as of June 1. I can’t tell you how much I appreciate the support that so many of you provided. The ELAM year was instrumental in both developing important skills for the task I’m undertaking and my personal understanding that I want the job. Thanks to all!”

Patilla, Maria MD (ELAM 1997-98), was appointed Medical Director, Lung Transplantation Program, and Director, ILD/Advanced Lung Disease Program at Mount Sinai Medical Center. She writes, “I am happily back at Mount Sinai with the anticipation of support and ability to carry out the programs of my interest which are now aligned with the division and institutional goals.”

Pyle, Marsha DDS, MEd (ELAM 2003-04), Case Western Reserve University SOM, was promoted from Associate Dean for Academic Affairs to Associate Dean for Education (Dec 2003).

Shumaker, Sally PhD (ELAM 1997-98), Wake Forest University SOM, was appointed new Associate Dean for Research (May 7, 2004). A press release on the announcement is available at http://www.wfuhsbcm.edu/news/NewsArticle.html?ArticleId=1377. Dean William Applegate’s announcement said, in part: “As Associate Dean for Research, Dr. Shumaker will lead and coordinate our entire Office of Research. Her responsibilities will include oversight of all extramural research grants and contracts, as well as the institutional review board, and collaboration with all department chairs and center directors in assisting faculty members with future grants and contract development. Dr. Shumaker is a nationally and internationally recognized expert in clinical research. Her primary areas of expertise include women’s health, behavioral science, health-related quality of life, and the conducting of multicenter clinical trials. She and her colleagues have recently published internationally important findings on the relationship of postmenopausal hormone supplementation to cognitive aging and dementia, and cardiovascular health in women. Throughout her career, Dr. Shumaker has worked tirelessly to promote the development of younger faculty members and to provide the infrastructure needed to enhance the success of all faculty. She is particularly well known for her national and local contributions toward the promotion of the careers of women in medicine.”

Townesley, Mary, PhD (ELAM 1999-2000), University of South Alabama, was appointed Assistant Dean and Director for the Office of Faculty Affairs (July 1, 2004). She writes, “I will set up this office (an entirely new venture for the school) and develop a mentoring program, among other things. I’ll continue to direct the graduate program for the College and maintain my research program. I’ll be busy, certainly, but I’m excited about this new role. My regards to Roz, Page and all with the ELAM Program. This training most certainly helped me move to this administrative position! Thanks.”

Travis, Elizabeth PhD (ELAM 1999-2000), University of Texas MD Anderson Cancer Center, was appointed Associate Vice President for Academic Affairs. She describes the position as “a 30% position, and the portfolio is mostly education, trainee and faculty, as well as the annual research symposium.” (April 2004)

Trujillo, Angelina MD (ELAM 1995-96), has moved from Bristol-Myers Squibb (NJ) to Oregon as of June. She writes: “I plan to stay very much involved – it was part of my “negotiations” that my professional activities would be continued and the response was very supportive. I would certainly appreciate the contact information for ELUMs at OHSU – I may need their input!”

Weatherstone, Kathleen MD (ELAM 1999-2000), has a new position as of July 1: Medical Director, Newborn Intensive Care Unit, Overland Park Regional Medical Center, KS. She writes: “I will also provide service at two Level II nurseries. I am building my own group, Sunflower Neonatology Associates, and am currently recruiting. We are in the process of designing a new 42-bed NICU and this has been educational and exciting.”

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ELUMs

Chertoff, Jocelyn MD (ELAM 2003-04), Dartmouth Medical School, was appointed Vice-Chair, Department of Diagnostic Radiology, Dartmouth-Hitchcock Medical Center. (Jan 2004)

Eggli, Kathleen MD (ELAM 2003-04), Pennsylvania State University COM, was named permanent Chair, Department of Radiology. (Jan 2004)

Hutchison, Florence MD (ELAM 1999-2000), Medical University of South Carolina COM, sent an update: “I have been Chief of Staff (aka Medical Director) at the Charleston VA Medical Center for about 4 years now. I was appointed as Associate Dean by our new dean at MUSC in recognition of my efforts to improve the partnership between VA and MUSC. I am also the Chair of the group that plans and coordinates care for all veterans in SC, GA, and AL. It is an interesting challenge.”

Otto, Ann PhD (ELAM 2003-04), Northeastern Ohio Universities COM, has a new title, Associate Vice President, Faculty and Staff Resources, and expanded role. President and Dean Lois Margaret Nora, MD, JD (ELAM 1996-97), announced: “Effective May 1, the Office of Human Resources has moved from the Division of Administration and Finance and is reporting to the Division of Academic Affairs. This move will support the creation of a new Office of Faculty and Staff Resources and Institutional Effectiveness which will be led by Ann Otto, PhD, and will report to Mark Penn, MD. This new office will officially begin on July 1, 2004. Along with Student Affairs, the new office will be devoted to working with all members of the NEOUCOM community – faculty, staff and students. The Office of Faculty and Staff Resources and Institutional Effectiveness will include the Offices of Human Resources, Faculty Affairs and Development, and Institutional Effectiveness. This new structure will allow us to meet LCME requirements, better address issues of faculty affairs and development, and optimize the work of the Quality of Work Life Task Force in the most cost-effective and staff-effective manner.”

Seremetis, Stephanie MD (ELAM 1995-96), has been promoted to Senior Medical Director and Medical/Science Team Leader of NovoSeven-Critical Bleeding [Trauma and Surgery] of Novo Nordisk. She moved to Copenhagen and as of August 1, all International Medical Officers within Biopharmaceuticals (outside of endocrinology) will report to Stephanie. She joined Novo Nordisk in October 2001. The announcement said: “Stephanie’s promotion is in recognition of her outstanding skill sets and competencies, as well as the critical role of the North America market for the future of NovoSeven, continued globalization of development projects and HQ commitment to the NACDC. NovoSeven development has progressed successfully toward becoming a haemostatic agent for treatment of critical and life-threatening bleedings. To ensure overall strategic alignment, there will still be one NovoSeven Product Business Plan under the responsibility of the Expanded NovoSeven global project team (eGPT) which consists of the NovoSeven-Critical Bleeding [Trauma and Surgery] GPT, along with two NovoSeven PVPs and Marketing Team Leader of the NovoSeven Support project. Stephanie will be Medical/Science team leader on the eGPT as well. This team will be responsible for ensuring overall PBP alignment (including alignment of regulatory strategies and clinical development plans), and will also recommend priorities between indications and new strategic initiatives to the TADevCommBioPharm. Recruitment to replace Stephanie has been initiated. Stephanie will return to Novo Nordisk in Princeton after her assignment to continue as overall Medical/Science Team leader for the NovoSeven GPT. (May 2004)

Staiano-Coico, Lisa PhD (ELAM 2002-03), Cornell University, was appointed Dean of the College of Human Ecology there. (July 1, 2004) She will be dropping her vice provost titles, but keeping the Executive Director’s title (Tri-Institutional Research Program) for now. http://www.news.cornell.edu/releases/May04/Dean.Staiano-Coico.ssl.html.

News of Note, SELAM Members

Beemsterboer, Phyllis MS, EdD (ELAM 1997-98), Oregon Health & Science University SOD, received an award at the International Association of Dental Research (IADR) meeting: the IADR Colgate/Oral Health Research Award. “A nice plaque and a check for $2,000. Not bad, eh? Of course being in Hawaii was not bad either.” (March 2004)

Clem, Kathleen MD (ELAM 2002-03), Duke University SOM, brought us up to date on her doings: “My ELAM project – to gain institutional approval for an Emergency Medicine research center – has come to fruition - and beyond. Not only do we have approval, we have funding and space. This will allow us to develop independent funding for additional research, and open the way for international Emergency Medicine advancement. My new Research Director has been recruited and we plan to open this summer. Just an FYI – I am currently organizing a project in Kenya – building a clinic and teaching local health care providers. The Kenyan government will then help with ongoing support after it is established. I am planning to go to the site in April.”

Clifford, Jane PhD (ELAM 2001-02), Drexel University COM, Professor and Chair, Department of Biochemistry, was appointed to the editorial board of the Journal of Virology for a two-year period. (Jan 2004-Dec 2006)

A number of SELAM members/ELUMs were nominated by their state legislators and named Local Legends in their respective states: Linda Fried MD, MPH (ELAM 1996-97), Johns Hopkins University SOM; Suzanne Landis MD (ELAM 1995-96), University of North Carolina at Chapel Hill SOM; Christine Matson MD (ELAM 1996-97), Eastern Virginia Medical School; and Rebecca Pauly MD (ELAM 2001-02), University of Florida. (Jan 2004) “This honor has been bestowed upon women physicians who have demonstrated commitment, originality, innovation, or creativity in their field of medicine. Local Legend[s] will be recognized on a web site that will celebrate the accomplishments of America’s women physicians. AMWA’s 2004 banquet honored all of the Local Legends from around the country. The Local Legends recognition is a companion project to an exhibition created by the National Library of Medicine entitled Changing the Face of Medicine: Celebrating America’s Women Physicians. You can learn more about the exhibition at http://www.nlm.nih.gov/changingthefaceofmedicine/. The exhibition is located at the National Library of Medicine in Bethesda through April 2005. At that time the exhibition will travel around the country.”

Hammond, Donna PhD (ELAM 1996-97), University of Iowa Carver COM, has been named to a section editor position for the journal Neuroscience, the official publication of the International Brain Research Organization. (May 2004)

Kosoko-Lasaki, Sade MD, MSPH (ELAM 2002-03), Creighton University SOM, was named a recipient of the 4th Annual Dr. Stan Truhielsen Award by Prevent Blindness Nebraska. The announcement said: “Dr. Kosoko-Lasaki is associate professor of Ophthalmology, and Preventive Medicine and Public Health and is also associate vice president for Health Sciences, Multicultural and Community Affairs at Creighton University Medical Center. The Truhielsen award is given to an individual who works for medical advancements in saving or restoring vision. Dr. Kosoko-Lasaki has researched glaucoma and Vitamin A deficiency in the Caribbean, West Africa, and Asia. She is actively involved in many organizations including the American Academy of Research in Vision and Ophthalmology and the Nebraska Educational Alliance for Public Health Impact.”

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Riba, Michelle MD, MS (ELAM 2002-03), University of Michigan Medical School, is now serving her term as President, American Psychiatric Association. She says: “Going to Paris tomorrow for a meeting; then run the APA BOT meeting in VA; then to the Royal College in Harrogate!! Also Louisiana Psychologists Prescribing...Each day is something different!!”

Rusch, Sara MD (ELAM 1996-97), University of Illinois at Chicago COM at Peoria, writes: “I’ve been elected Governor of the Illinois Downstate Chapter of the American College of Physicians (ACP) and will start my term as governor elect this spring.”

Shaw, Kailee MD (ELAM 1995-96), University of South Florida COM, writes: “I have just completed my term as Vice Chair of the Child and Adolescent Psychiatry Committee and Team Leader for the ABPN Child and Adolescent Psychiatry and as of January will start a new appointment on the RRC. I am still Vice Chair of the Department. (under a new Chair, Francisco Fernandez). Director of the General and Child and Adolescent Psychiatry residency programs and, for the moment, also Acting Director of the Division of Child and Adolescent Psychiatry.”

Tedesco, Lisa PhD (ELAM 1996-97), served on the study committee that authored the Institute of Medicine Report, “In the Nation’s Compelling Interest: Ensuring Diversity in Health Professions.” This report, commissioned by the WK Kellogg Foundation, examines institutional and policy-level strategies — defined as specific policies and programs of health professions schools, their associations and accreditation bodies, health care systems/organizations, and state and federal governments — to increase diversity among health professionals.

Three SELAM members have leadership roles with the American Dental Education Association (ADEA). Sharon Turner DDS, JD (ELAM 1997-98; SELAM past president), is Chair, ADEA Council of Deans; Karen West, DMD, MPH (ELAM 1998-99; SELAM president), is Chair, ADEA Council of Faculties; and Marsha Pyle DDS, MEd (ELAM 2003-04) organized a joint meeting in Cleveland of three ADEA councils (she served as Chair, Council of Faculties). Marsha’s article, with coauthor EP Stoller, “Oral Health Disparities Among the Elderly: Interdisciplinary Challenges for the Future” appeared in J Dent Educ 2003:67:1327-36.

ELUMs

Rao, Vijay MD (ELAM 2002-03), Thomas Jefferson University COM, was elected to the College of Physicians of Philadelphia. (May 2004). About her tenure so far as Chair, Department of Radiology, she says: “After nearly two years in this job, I now know what this job entails. Managing 40 MD faculty, 50 physician trainees, and 270 non-physician employees is challenging but exciting. We do 300,000 exams per year, and deal with 4 different management companies in addition to the hospital and college administration. I don’t have to worry about being bored!!!”

Taylor, Anne MD (ELAM 2001-02), University of Minnesota SOM, was selected as a 2004-05 Council of Deans (COD) Fellow, Association of American Medical Colleges. (May 2004)

Eve Higginbotham MD (ELAM 2000-01), University of Maryland SOM, was a 2003-04 COD Fellow.

Faculty/Other

Robinowitz, Carolyn MD, was elected Treasurer, American Psychiatric Association. (May 2004)

South-Paul, Jeannette MD, professor and chair of family medicine and medical director, University of Pittsburgh Medical Center Health System, was one of three recipients of the 2004 Joy McCann Scholars awards from The Joy McCann Foundation. The awards honor faculty in medicine, nursing, and science who have assumed a personal responsibility to cultivate the next generation of health professionals through active mentoring. The Joy McCann Foundation is co-chaired by Joy McCann Daugherty and Robert M. Daugherty, MD, PhD, former dean of medicine at the University of Nevada SOM, vice president emeritus for health sciences at the University of South Florida, and former chair of the AAMC Council of Deans.

Mentionings, SELAM Members

Brown, Wendy Weinstock MD, MPH (ELAM 1997-98), VA Tennessee Valley Healthcare System, became a grandmother for the first time when Ethan Cole Brown “made his debut on Friday, February 6, at 2:49 PM EST - 7lb 12 oz; 19 inches; blue eyes and blond hair (just like his Dad [Joshua]).” She wrote that she’s “semi-delirious” and passed along the website where Ethan’s pictures are posted: http://www.freewebs.com/ethancleebrown.

Hardt, Nancy MD (ELAM 1995-96), University of Tennessee Health Science Center in Memphis, was featured in an article in the Feb 2004 issue Memphis Woman: The Success Magazine for Mid-South Women. Its cover featured her picture (WOW!) and story, “Dr. Nancy Hardt: Working for Women’s and Children’s Health.” It was a fantastic story of her accomplishments and aspirations and a great tribute to her work and ideals, reflecting her genuine desire to make a difference.

Howell, Lydia MD (ELAM 1998-99), University of California, Davis SOM, and Klea D. Bertakis, co-authored the article “Clinical Faculty Tracks and Academic Success at the University of California Medical Schools” (Acad Med 2004;79 250-257). http://www.academicmedicine.org/cgi/content/abstract/79/3/250 etoc

Judd, Vicki MD (ELAM 2000-01), University of Utah SOM, was selected as Doctor of the Year for 2004 by the Utah Medical Association Board of Trustees, with a special ceremony in the Utah State Capitol on March 30, 2004, National Doctors’ Day. The honor was presented by Governor Olene Walker in conjunction with the signing of a proclamation designating March 30 as Doctors’ Day. “Judd is the third woman physician to receive the award since its inception in 1978. The honor recognizes one physician annually for his or her outstanding contribution to the practice of medicine. Expressing appreciation for the honor, Judd, whose specializes in pediatric cardiology, said, “There are a lot of people who have helped me in my profession and many practitioners in the state who deserve this award as well.” She [also] is the recipient of the University’s Department of Pediatrics’ Excellence in Teaching Award, the American Medical Women’s Association Gender Equity Award and the Linda K. Amos Award for Distinguished Service to Women at the University of Utah. Last year she received the Excellence in Teaching Award from the Physician Assistant program.”

Magrane, Diane MD (ELAM 2002-03), AAMC, was featured in “Up Close and Personal with Diane M Magrane MD” in the Jan 2004 issue of Academic Physician & Scientist. She mentions her participation in ELAM as part of her professional development. The interview captures the core of who she is and what she’s trying to accomplish. Her personal mission statement: “To make a difference in the lives of others such that they are better off for having met me.”

Martin, Mary DDS, MEd (ELAM 1999-2000), co-presented “Women Dentists Take the Lead” in conjunction with Houston’s Star of the South Annual Meeting of the American Association of Women Dentists. This interactive course focused on communication skills, interoffice relationships, team building and more for the dentist and her team members looking to improve their leadership skills (Houston, Feb 2004).

Sood, Aradhana (Bela) MD (ELAM 2002-03), Virginia Commonwealth University SOM, is President of WISDM (Women in Science, Dentistry and Medicine). In the group’s Spring 2004 newsletter, her president’s column focuses on balance: http://www.womeninmedicine.vcu.edu/PDFWISDMnews2004Spring.pdf. (See p. 26 of this issue.)

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Speer, Alice MD (ELAM 1997-98; SELAM past president). University of Texas Medical Branch, and Michael Boscon were married on April 3, 2004. Pictures of the happy couple before, during and after the festivities can be seen at http://albums.proshots.com/studiob images/. Select BOSCON in the drop down list; the password is alice.

The January 2004 issue of the AAMC Reporter published responses from Janet Bickel MA (ELAM Faculty and Alliance), Susan Murin MD, MSc (ELAM 2003-04), University of California-Davis SOM, Susan Shurin MD (ELAM 2000-01), Case Western Reserve University, and Amparo Villablanca MD (ELAM 2000-01), University of California-Davis SOM, to “What should academic medicine’s New Year’s resolution be?” As Page Morahan would say, nice illustration of “graceful self-promotion” (see her article in the Feb 2004 issue of Academic Physician & Scientist & Winter 2004 issue of SELAM International News).

Cincinnati Children’s Hospital Medical Center Research Horizons: Winter 2004 issue featured an article on the six ELUMs at the University of Cincinnati (Sandra Degen 1997-98, Paula Hillard 1998-99, Uma Kotagal 2001-02, Ardythe Morrow 2000-01, Gail Slap 2003-04 and Lori Stark 2000-01): “ELAM: Expanding the Pool of Women Leaders.” In the article, Degen comments on ELAM’s value to her and others: “It has moved women to higher administrative levels and increased our visibility nationally. It’s given us skills that have made us better at our jobs.” In the article, Degen comments on ELAM’s value to her and others: “It has moved women to higher administrative levels and increased our visibility nationally. It’s given us skills that have made us better at our jobs.”


The University of Pennsylvania’s FOCUS on Health & Leadership for Women sponsored its 5th annual spring conference for senior women faculty. The program featured PonJola Coney MD and Wendy Wolf MD, MPH (both ELAM 1995-96), Janet Bickel MA and Page Morahan PhD (both ELAM Alliance, Advisory Committee, and Faculty). (May 7, 2004)

ELUMs

Farrar-Dixon, Cherea DDS, MSPH (ELAM 2000-01). Meharry Medical College SOD, and Jeanne Sinkford DDS, PhD (ELAM Advisory) are featured in the 2004 Aetna African American History Calendar (December and May, respectively).

FDA Commissioner Mark B. McClellan MD named 11 physicians to the FDA’s Advisory Committee for Reproductive Health Drugs. The committee will be chaired by Linda Giudice MD, PhD (ELAM 2002-03), the chief of reproductive endocrinology and infertility for the Department of Gynecology and Obstetrics at the Stanford University Medical Center. In addition to Giudice, two other committee members are ELUMs: Vivian Lewis MD and Valerie Montgomery Rice MD (both ELAM 2003-04). The announcement continued: “Each of these 11 physicians brings strong scientific and medical backgrounds to this important advisory group,” FDA Commissioner Mark McClellan, MD, said. ‘Under Dr. Giudice’s stewardship, this panel will provide sound, science-based advice on reproductive health issues that will improve women’s lives across the country.’ At the request of the FDA, the advisory committee reviews and evaluates data on the safety and effectiveness of marketed and investigational human drugs for use in the practice of obstetrics, gynecology and related specialties, and makes appropriate recommendations to the FDA. While the committee is an existing FDA advisory committee, its entire membership had lapsed and it had not met for two years. One of the first issues the committee will examine is the issue of hormone therapy, which has come under increased attention with the release of several new studies questioning its safety and effectiveness.

Heilpern, Katherine MD (ELAM 2002-03). Emory University SOM, was quoted five times (!) in an article that appeared in the June 2004 issue of Academic Physician & Scientist focusing on the Emory Emergency Medicine department: “An Emergency Medicine Department for the 21st Century.” Kate is Vice Chair of the department.

Kahn, Barbara MD (ELAM 2000-01). Harvard Medical School, was cited as lead author of a study in an article that appeared in the Philadelphia Inquirer, “Enzyme may be key to weight control.” (March 18, 2004) She writes: “I am in Hinxton, England, near Cambridge speaking at the ‘Days of Molecular Medicine Conference.’ Fly on to Australia tomorrow to speak at a Research Institute in Melbourne and then at the 3rd Annual AMP Kinase Symposium. This paper my lab published in Nature this week is a very important study and one we worked quite hard on.”

Lippa, Carol MD (ELAM 2003-04). Drexel University COM, head of MCP’s Memory Disorders Center, was featured in the Philadelphia Inquirer (June 14, 2004): “Her Mission: Defeat Alzheimer’s.” The article highlighted Carol’s clinical and research efforts and included a huge photo of Carol and another of her and her daughter, Sara, in Carol’s lab.

Marshall, Mary Faith PhD (ELAM 2003-04). University of Kansas SOM, was appointed to a new committee at the Institute of Medicine, the Committee to Establish a National Cord Blood Stem Cell Bank. She writes: “The request came from Congress, and it should be both interesting and fun. I think one goal of ELUMs should be to get as many women into the National Academy of Science and the Institute of Medicine as possible.” (May 2004)

Norwood, Vicky MD (ELAM 2002-03). University of Virginia SOM, gave birth to Katherine Anne Kahler. She writes: “She was a bit little – 5lb14oz when she was born (12/7/03 – a day that will live in my infancy!) but was already up to 9lb10oz [early Feb].


Faculty/Other

Bachrach, David FACMPE/FACHE (ELAM Alliance and Faculty), had a cover article in the Jan 2004 issue of Academic Physician & Scientist: “Emotional intelligence is important in determining leadership success.” He also had an article in the April 2004 issue of the same publication: “Leadership lifecycles.”


Morahan, Page PhD (ELAM Co-director, Alliance, and Advisory Committee), had an article in the Feb 2004 issue of Academic Physician & Scientist: “Graceful self-promotion: It’s essential.” This also appeared in the Winter 2004 issue of this newsletter.

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Address Changes SELAM Members

Burdick, Anne MD, MPH (ELAM 2002-03)
aburdick@med.miami.edu

Fitzpatrick, Lorraine MD (ELAM 1995-96), Director, Global Development, Amgen Inc., One Amgen Center Drive, Thousand Oaks, CA 91320; (805)313-4138; cell (805)573-9355; lfitzpat@amgen.com or Lorie.fitzpatrick@amgen.com

Goldstein, Rose MD (ELAM 1998-99), preferred e-mail: rgoldste@uottawa.ca

Heard, Jeanne MD, PhD (ELAM 1999-2000), jkh@acgme.org

Howell, Lydia MD (ELAM 1998-99), Associate Dean of Academic Affairs, Professor of Pathology, University of California, Davis Medical Center, PSSB, Suite 2500, 4150 V Street, Sacramento, CA 95817; 916-734-4610; pager: 916-762-6013

Magrane, Diane MD (ELAM 2002-03), Associate Vice President for Faculty Development and Leadership Programs, AAMC, 2450 N Street NW, Washington, DC 20037-1127; 202-828-0575; fax 202-828-1125; dmgrane@aamc.org

Padilla, Maria MD (ELAM 1997-98), Mount Sinai Medical Center, 1 Gustave Levy Pl, New York, NY 10029; 212-241-5656; fax 212-876-5519; maria.padilla@mssm.edu

Soninno, Roberta MD (ELAM 1997-98), 4627 South Beechwood Drive, Macon, GA 31210; 478-757-0042; Fax: 478-757-1151; her e-mail stays the same – soninno2000@yahoo.com

Trujillo, Angelina MD (ELAM 1995-96), work: Silverton Specialists, 452 Welch Street, Silverton, OR 97381; home: 148 Breyonna Way Silverton, OR; 97381; 605-376-6479; atrujill@prodigy.net

Weatherstone, Kathleen MD (ELAM 1999-2000), home - 10144 Mackey, Overland Park, KS 66212; 913-522-8325 or NICU 913-541-5275; kweather@sunflowerneonatology.com

Williams, Janet MD (ELAM 1999-2000), Janet.Williams@URMC.Rochester.edu

Address Changes, ELUM Members

Frederiksen, Marilyn MD (ELAM 1997-98), mcf810@northwestern.edu

Ginzler, Ellen MD (ELAM 1996-97), SUNY-Downstate, ellen.ginzler@downstate.edu

Hoy, Mary PhD (ELAM 2003-04), institutional name change to Kansas City University of Medicine and Biosciences; mhoy@kcumb.edu

Nelson, Lee MD (ELAM 2001-02), jnelso@fhcrc.org

Tracy, Cynthia MD (ELAM 1999-2000), ctracy@mfa.gwu.edu

Faculty/Other

Aschenbrener, Carol MD (ELAM Alliance, Advisory Committee, Faculty), Vice President, Division of Medical School Standards and Assessment, Association of American Medical Colleges, 2450 N Street NW, Washington, DC 20037-1127; 202-828-0596; fax 202-828-1125; caschenbrener@aamc.org

Danner, David Ed D (ELAM Alliance, Faculty), Organizational Effectiveness Partners, 571 Sterling Street, Newton, PA 18940; 215-860-3615; C 215-519-8393; dwd@verizon.net

Evans, Clyde PhD (NEW member, ELAM Alliance – watch the website for details); Vice President, Director, American Network of Health Promoting Universities, Association of Academic Health Centers, 1400 Sixteenth Street, NW, Suite 720, Washington, DC 20036; 202-265-9600; fax: 202-265-7514; cewevans@acadhilthcrts.org

Rosalyn C. Richman, MA

Congratulations, Valarie Clark!

Diane Magrane, MD, Associate Vice President, Faculty Development and Leadership Programs, Association of American Medical Colleges, announced the promotion of Ms. Valarie Clark to Director of Faculty Development in the Division of Medical School Affairs on March 18, 2004. “This promotion recognizes her capable leadership of Women in Medicine and Faculty Affairs, which included her solo guidance of the programs in the one-year interim between Janet Bickel’s departure and my arrival.”

SELAM MENTORS

WOMEN AT THE HELM:
KANSAS CITY LEADS THE WAY

A cadre of female leaders uniquely leads Kansas City, the “City of Fountains,” located at the confluence of the Kansas and Missouri Rivers, in both Kansas and Missouri. A female is governor of Kansas. The Greater Kansas City metropolitan area is governed by female mayors in Kansas City, MO, Kansas City, KS, as well as numerous suburban communities, including a county executive. The president of the Greater Kansas City Chamber of Commerce is a woman (and president of one of the medical schools). The presidents/chancellors of three major universities are women: University of Missouri-Kansas City, Kansas City University of Medicine and Biosciences, and Park University. With such a rich supportive female leadership, should it be a surprise that the academic deans of each of the three medical schools in Kansas City are women?

We had the rare privilege to interview Barbara F. Atkinson, MD, Dean of the College of Medicine, Kansas University Medical Center and ELAM faculty, Betty Drees, MD, (ELAM 2001-02), Dean of the College of Medicine, University of Missouri-Kansas City, and Sandra K. Willsie, DO, (ELAM 1999-2000), Vice President of Academic Affairs and Dean of the College of Osteopathic Medicine, Kansas City University of Medicine and Biosciences, regarding their thoughts and perceptions about women leaders in academic medicine. The following is a condensation of those interviews.

What do you look for in a job candidate?

Willis: For an executive level position, I look for an innovative, driven, hard working individual who isn’t too needy or a complainer; someone willing to take risks, is an out-of-the-box thinker, who will consider the needs of the institution first, acts as a team player and hasn’t had a history of job-hopping. I enjoy a creative thinker to bounce ideas off, someone who speaks honestly in a private setting about concerns they may have, yet be supportive of institutional initiatives.

Sandra K. Willsie

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**Atkinson:** What you look for in a candidate is whether he or she is really interested in your job, if they’ve done the homework about what the job is, and can they ask you questions that make sense. It’s really important that they do their homework. I look for dynamism and a vision for what the job would be, that the candidate has a vision for where he or she wants that program to go next and that they bring something to it; and if they haven’t developed that vision yet, are they asking the kinds of questions to focus on the vision?

**Drees:** It is important for the candidate to study the position description to determine whether the position is for a “builder” or is for “maintenance.” The candidate needs to possess the correct attributes and skills to accomplish the job. I am impressed with people who do their homework by checking the institution’s web sites, literature, etc. When submitting an application, the candidate should be prepared to give specific examples of her experience that prove she has the skills to do the job. Demonstration of leadership at some level is important, e.g., as a program director or organizing a project. Also, describe how you have made people around you better. The fact that you’ve been successful in your research or garnering ROI’s doesn’t necessarily translate into good leadership. The CV by itself is not sufficient evidence, but is needed to establish a threshold of credibility. In a cover letter, emphasize how you are a good fit for the position. Having individuals known by the institution write letters of introduction is valuable.

**Atkinson:** How concrete do you expect the vision to be?

**Drees:** Timing is important. Arriving the day of the interview in a rush is not a good idea, so come in the night before. Proper dress, and good interviewing skills that include making eye contact with all members of the group are important.

**Atkinson:** Don’t ask for salary too soon. Don’t imply that you need to know how much vacation time is allowed, or that it won’t be hard work. It’s surprising what some people actually do, or what they’ll say to medical students or residents that they won’t say to other people. As if we wouldn’t ask the medical students or residents what their opinions are. The medical students and residents don’t want someone who is not going to be nice to them or cherish their place in the institution. I don’t think you should lie about who you are or what you want to do, because if it’s not a good fit, you’re better off knowing it. I don’t mean lie so much as cover up or pretend you’re something you’re not. It’s better to have it straight out there, and no fit is no fit.

**Willie:** Some things to avoid include wearing too much jewelry, dressing suggestively or appearing unkempt, getting too familiar with the interviewers, asking about money or time off in the first interview, or bashing a former supervisor. It’s best to acknowledge failure from the past, if that exists, and focus on what you learned from it rather than make excuses. Good eye contact and a solid foundation of knowledge about the institution where you are interviewing is a ‘must.’ We recently interviewed a candidate who didn’t. Bring your spouse after the first interview. It created such a significant problem that the candidate declined the offer.

**Is there anything that women candidates tend to do by virtue of which they undermine themselves?**

**Atkinson:** The biggest difference is that women tend not to ask about their salary and their package, even at the end. They tend not to ask for enough. First of all, they don’t brag about what they have done — sometimes you have to drag it out of them. And then when it comes down toward the end, they’re not very good at asking for important things. Most chair-level people can get their package together by the end of the process, but even then they won’t have asked for their own salary, or something else important. They haven’t thought through ahead of time what they should ask for, or may not know that there are AAMC tables that suggest ranges of things. They need to come with things they want all laid out.

**Willie:** Some women shy away from adequate self-promotion during the interview process and tend to be less forthright in voicing their expectations from the institution/employer. This may stem from the way many of us were brought up: to ask for what you want is considered aggressive or pompous. Some women tend not to do the necessary research to know what they’re worth and then confidently ask for it.

**What are two important things you have learned on your path to the deanship?**

**Drees:** You can never communicate too much – in both directions, with those above you and those below. Also, space is more difficult to manage than money. Be able to look out into the future five years hence and know what you need for personnel, money and space and get a commitment in writing.

**Atkinson:** The importance of planning.
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Willsie: Hard work pays off – volunteer to take on leadership roles in your professional societies and institution and be willing to work overtime. The worst thing you can do is to fail to meet commitments. Develop a support group of other accomplished women – not necessarily in the same field (but in a safe place). Take the time necessary to grow and maintain those relationships.

Do you have advice for balancing your personal and professional life?

Atkinson: I don’t think it’s easy for any dean, including male deans – it’s the single hardest thing. Especially when you first start, the first year is a huge learning curve. I’ve done it twice. The first year in both places was hard, although the second time I knew how to cope with it a little better. It is partly the pace of what happens, partly understanding the kind of things that face you every day, but then it just takes an incredible amount of time to do the things that have to be done. Figuring out how to get it done, and communicating in the right way to people how to get it done. Any support that you can get on the side from family and any lack of having to deal with stresses on any other front are helpful.

Drees: Balancing personal and professional lives is a skill that needs to be worked at, like CME. It is helpful if you have advisors outside of the workplace.

Willsie: I’ve learned that I must prioritize commitments and do things I enjoy. During 10 years of single life, I did not do well in achieving that balance. Of course, as a result, I was quite successful in building my career and CV. In fact, with the ELAM 360° evaluation, the need for me to devote more time to myself and less time to my career was recommended by a wide variety of reviewers, at all levels! I subsequently learned to take more time for my personal life. I hired a personal trainer and actually build in time for this on my calendar. This time is just as important, if not more so, than a meeting at the University. After our mother died in 1998, my sisters and I pledged, at a minimum, to go to church together each week. We usually go to lunch or dinner afterwards for quality time. I also spend quality time with my husband of four years. We have so many things in common that we have a great time and laugh often! Laughter always helps to put things in perspective.

How has your partner/spouse supported you on your journey?

Willsie: We support each other. He has helped me to understand nuances of ‘the players’ that I deal with in life and at work, and helps me work through those decisions about whether or not something is really a big deal, worth lots of energy, or one that warrants just letting go. We have a great partnership; I support him and he supports me, and we treasure that aspect of our relationship.

Drees: It is impossible for either men or women to succeed without support from both men and women. We all have to make personal choices. I have been married for 29 years. There have been times when one or the other of us hasn’t worked, or that we have moved for each other. And we have shared responsibility for child rearing and household chores. What is most important is that there are explicit understandings about what each partner is going to do, and that you have these discussions up front. There are both men and women whose marriages have not survived because someone wasn’t willing to give or to be flexible.

Atkinson: Regarding distribution of responsibilities, I think it just evolved to that. My husband has always been incredibly supportive. He started when I was in medical school, which I began just as my two kids were starting school. It was a hard time, it took two people to balance all of that, and he was always extremely supportive. I was finishing my residency and starting a junior faculty position about the time the kids were graduating from high school and starting college. That next phase is one in which I worked the hardest ever. He was by then beginning to play golf again and spend some time on himself again. He did that on weekends and I worked on weekends, and that actually worked. We still could have a life together. Then as I got busier and busier, he started doing more and more. He likes to cook, and he helps out – he certainly does more than his share.

Do you have advice on dual career issues?

Atkinson: It’s very hard. First of all, recognize what the issues are. It’s timing of so much. There are times when it’s easier to do things; it’s hard to do things when the kids are little. From junior high on you have more time. There are certainly times in your career when you have to recognize you don’t take on a new challenge. The first year of a new position really does take time, so don’t take it with a new baby or something like that. You just really have to think about what can be done and don’t bite off too much. Don’t take on an editorship of a journal if you don’t have the time to do a good job, or two or three major career things at the same time – that could be the straw that breaks the camel’s back. Try to do an outstanding job of one thing, rather than do too many things at the wrong time. Second, really try to figure it out. I have always looked at problem solving as one of my skills. Sometimes you have to problem solve in your own life. So the way we solved the problem of two of us working hard when we were in medical school and needing time with the kids was that we bought a place with another friend by a Vermont lake where we went every summer weekend. We could go sometimes as much as a month in the summer and through the spring and fall as well. That gave us absolute time away, so the kids weren’t with their friends; they were with us. We didn’t take work with us, we enjoyed it and we were together. Trying to figure out how you carve out something you think is special for both priorities, work and family, is as important as anything. My husband Bill and I have continued that. Sometimes we go away and do stuff together and the time off is very precious.

Willsie: We don’t always thoughtfully make the choice to let someone into our lives who is in the same profession vs. a different one; it just happens. I do think that partners in the same profession or same workplace must be very careful not to let that shared aspect of their lives dominate. It is very important to effectively communicate with each other about expectations within the relationship, regardless of whether or not you have the same career or work in the same place.

My husband and I find that it is best that we are not in the same

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career or working at the same place. Money can sometimes be an obstacle for dual career couples, especially if the woman makes considerably more than the male. Be up front and sensitive, if that is an issue in the relationship.

Drees: Universities can’t guarantee a university position for spouses, but they do work with community partners to assist the spouse. Faculties in management or higher-level administrative positions create difficult stresses. This is a BIG issue. It is easier to find a spouse a position if he or she primarily does clinical work. Higher-level administrative positions are more difficult to find. During hard financial times, it’s harder to make the spouse feel valued, too – this is especially difficult for men. It is increasingly becoming a challenge as more and more candidates are coming in as dual career couples. We’ve had several positions in the university, high level deans and administrative positions, where the spouse has taken a high level volunteer position if he or she can’t find a job subsequent to moving. Also, the significant other needs to be proactive in terms of his or her own job searching.

Did you have a mentor who helped you plan some of that out in terms of your professional goals and how to balance when to say no?

Atkinson: No, I wish I had, but I didn’t. I had Bill there. He’s probably the closest to a mentor that I had, but his advice was more like, “Don’t tell me you think you can really do X or Y.” Although when it came to some things it would be pretty clear: “You know if the American Board of Pathology asks you to be on a test committee, that’s one you really better not say no to. Even if it takes more time, it’s probably worth it.” My friend Carla was one female mentor early on and was very supportive during medical school and residency. She had been an intern with Bill (he graduated from medical school 10 years ahead of me). I had just graduated from college. She was the first woman medicine intern at Jefferson so she was very strong. She was very good at encouraging me. My husband and my dad were the other ones who gave me the biggest push to go to medical school. I was not going to go to medical school; trying to decide what to do was a checkered five years. I knew I didn’t want to stay home. I wanted something, but I didn’t know what. I started taking courses at night when the kids were little and Bill was in Vietnam. Then I tried being a housewife for a year, and I was going absolutely nuts. It was particularly bad because we didn’t have any money, and I was so isolated. When I talked to my dad, a PhD biochemist, about going to graduate school in biochemistry, he said, “Go to medical school. Your options are so much greater as a physician. You can do research that way. You can do so many different things.” Those are the people I still consider as my strongest mentors.

I don’t think you HAVE to have a mentor teaching you. You should look around, and start noticing people you respect. That really is a major part of it. There are other people you can look to, college presidents, other women deans, and just see how they do it. Most schools have women department chairs, and some do it well, and some don’t do it as well. But analyze what’s working for this or that person. Some people don’t think in an organizational way. Try to look at the whole university, the whole medical center, and the whole picture. Most people, especially as they start out as junior people, look at a very small part of what their job is. Very few people look at the whole. Take opportunities if you’re part of a whole university. At Penn one of the most valuable things I did was to be the medical center representative on the university communications committee, just to learn how the whole university looks and to see what the people in the rest of the university thought of the medical school. Even on one campus, look beyond the medical school to the hospital. Take a broader view of the whole, because the more you see of that early on, the more you are exposed to people who are successful at the top. Another piece of advice is to do financial things. I’ve always told people that, if you have a choice of a committee or project, choose one that has finance involved, something that generates revenue or has financial impact. That experience is unlike any other. You really need to know that for any type of management job later on.

Is there much networking among the deans?

Atkinson: No, I don’t think so. The deans in the city here get together every month or two for breakfast. Maybe men do that more. Everybody’s problems are so different, that taking the time to explain the problem isn’t worth it. Don Hagen (Executive Vice-Chancellor, KUMC) and Don Hemenway (Chancellor, University of Kansas) are extremely important because they are people you can really trust to be on your side. They understand the issues here, and that’s more important than trying to persuade somebody from the outside. If I really have to, I’ll go to a consultant. I talked about one issue with a dean whom I trust while I was at ELAM. So many of the issues are political anyway, and to describe the politics is hard.

Willsie: Some, but there is never enough.

Do you spend much time on external politics, lobbying the Kansas legislature, etc?

Atkinson: Yes, and probably not as much as needs to be done. It’s really important because we’re the only medical school in the state, and the state gives us a lot of money. There’s a lot at stake. Especially during certain parts of the year, over stem cell issues, and educating legislators about medical school education in general and why that’s different from education at the community colleges and trade schools that the Regents manage. We spend a lot of time with our local county legislators, committee chairs, and our important supporters, to let them know what the issues are.

How do you do reality testing?

Willsie: My husband Tom is handy. He will ask, “Is that going to matter to you in three months?” I also have a peer group of women who meet regularly and support each other. My sister, who also happens to be a psychiatrist, has been helpful in brainstorming approaches to dealing with particularly difficult personalities during my career (of course, that rarely is an issue!).

Drees: By talking/networking with other deans.
What is your support group?

**Atkinson:** Probably still Bill and other people I work with here. Family, too.

**Drees:** My support group includes family, and friends in the community, including some who are not in medicine. And, of course, my immediate staff of associate deans. Behind closed doors, your associate deans must be able to be completely honest with you. I pick people for this—they must tell you when you are headed in the wrong direction. And I use outside consultants when I need to. I network with other deans when problems or issues arise. Both networking with the deans and use of consultants allows you to find out how common your problems are. It may be a little disappointing to find out that others have the same problem, but it’s more comforting to find out how common your problem is—that others’ share it. An outside perspective is really valuable. Using an outside consultant is the norm for deans dealing with thorny issues. This helps internally when dealing with others’ emotions, e.g., when you are setting up a faculty practice plan. Also, it’s common to use consultants when you need technical expertise, such as legal or financial knowledge, when you don’t have it in house. And sometimes, even if you do have in-house expertise, the emotional issues may be so strong that you need a 3rd party, nonaffiliated perspective. Sometimes people hear things better from an outside consultant.

**Willsie:** My husband, sisters and a peer group of women. That group of women includes several from different generations and career paths, including medicine and law, and has been together for years. We have a revolving leadership who makes sure we meet at least every three to four months. We make appointments far in advance, and everyone tries to keep them. We also communicate regularly by email and telephone.

What do you do to stay healthy? Physically and spiritually?

**Drees:** I belong to a fitness center and have a personal trainer. I also take piano lessons, which I took through high school, but then put aside for a while. I’ve just started up again and it’s wonderful. For me, physical fitness, art and music are very important. I attend my children’s activities and am as involved as possible in what they do. Making sure that you do things outside of work is very important for balance.

**Willsie:** Go to church regularly; take time for reflection and read for pleasure. Have fun! Laughter is vital to a good outlook on life and one’s career. I also work with a personal trainer; physical activity plays an important role in my life, in sleeping well and keeping a good perspective.

What is the hardest won lesson you’ve learned on your way up or as Dean?

**Willsie:** Not to give up. Early in my career, when I wanted to apply for federal funding from the NIH, I was told that I couldn’t. I was shocked that this initiative was not supported, but my then-supervisor didn’t or wouldn’t see the importance of this (to me or the institution) and instead considered only that I might possibly need a release from some clinical activity. I sought out a group to support me with my supervisor and continued to press the issue. He finally caved in and supported my application. Even though I added this additional effort to my other responsibilities, in the end, I was the winner. I didn’t give up and I was successful.

**Drees:** When you take a higher position, your relationships with former colleagues are fundamentally changed. You need to find a new peer group at the new level.

What do you know now that you wish you had known when you took the job?

**Drees:** Doing a 360° evaluation is very important. Doing 360’s might not be a good idea within departments, but perhaps the MBTI would be.

**Willsie:** Both Tom and ELAM really have helped me with this. In my first position I just said, “Yes.” Tom helped me to recognize that “I deserve this” (when asking for a sign-on bonus). An executive coach might be good to assist in the negotiation process.

What do you wish you had asked for that you didn’t?

**Drees:** I would have asked for more specifics on the multiyear commitment, past the first year or two. And I would have gotten more advice from outside people such as personal coaches, which I have used. Our university, for example, pays a retaining fee for expertise from leadership development programs.

**Willsie:** Nothing. With help from my mentors and what I learned at ELAM, I successfully negotiated an excellent package.

Men are trained to move up the ladder and that it’s expected. That is not true for women and especially in medicine. How do you learn that? No one is going to tell you to do things. How do you know?

**Drees:** Make yourself visible! There are so many issues to consider that it is naïve to think that the Dean will “discover” your good works. The Dean considers the collective and individual needs of all of her faculty and has many, many issues to consider. So you need to worry about your own best interest, too, and not hope to be discovered like a Hollywood starlet. Men ask to have their needs met; women don’t. In an annual evaluation, speak up, make it clear what you’d like to do. Ask about opportunities for training programs like ELAM. Don’t go around the Department Chair to the Dean. Have the Chair be a sponsor, for the Chair’s recommendation is a valuable endorsement. Most Department Chairs are willing to promote individuals for internal opportunities, but not for other institutions. Networking is important when looking for jobs. Make sure you are where the Dean is looking. Work with Associate Deans, as they are the ones recommending to the Deans. As a Dean or Department Chair, make sure that opportunities you are looking to fill are well advertised and communicated. This way you are more likely to get a diverse group. As Dean, you should actively seek a diverse team, which makes it much stronger. This is where networking is extremely valuable, as the people who may be the best for the job aren’t necessarily looking.
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Willsie: From self-education, and peer and mentor modeling. Starting as early as possible, women need to learn the fine art of self-promotion to effectively make others aware of their knowledge, skills and accomplishments. I learned this skill early on in my career from a very wise woman, a PhD researcher, who encouraged me to send copies of letters of recognition, acceptance for abstracts, manuscripts, national presentations, etc. to my division chief, department chair and Dean. This felt uncomfortable at first, but it worked in achieving the desired effect.

Administrators have a global responsibility to effectively model for faculty. It is the responsibility, for example, of all division chiefs and department chairs to develop their faculty. If the faculty fail, then the supervisor, in a sense, fails as well.

Women also need to support each other. Don’t be so naive to think that you won’t have career obstacles in the form of women; there is still an element of women who resent other women as leaders. I once was advised by a second very wise woman mentor to say to my male department chair, “I am going to trust that you will treat me as fairly as you would want your daughter treated.” His daughter was just finishing medical school and I knew he wanted the best for her. It worked!

Do you ever get together with the other Deans?

Drees: We three Deans all know one another and get together every month or two for breakfast.

Willsie: Dean Drees and I have met for breakfast three times during the past year. Dr. Atkinson joined us for our last get-together. There is great potential for women deans to become an effective support group. In addition, this same forward thinking group could work together to devise new solutions to old problems via effective inter-institutional partnerships.

Do Deans ever have to build things out of newspaper or do team building activities?

Atkinson: No, I never had to do anything like that. I actually haven’t done all that many leadership-training kinds of things. I went to an AAMC program for new chairs when I was a new chair, and the closest thing we did to that was doing Myers Briggs. It is probably good to do some of that. There are some who work together well more naturally than other people. Getting people to understand about working together is important.

Networking Thoughts

1. Make eye contact. Look them in the eye and remember their eye color.
2. More ears – less mouth. Impress them with your interest.
3. Smile. And genuinely. “Ladies are usually better at this than men.”
4. Firm handshake. “Men are usually better at this than the ladies.”
5. Elevator speech – “your short and concise response if someone asks you what you do before you ask them...and follow your little speech with a sincere inquiry about them.”
6. Successful networking benefits all parties. This is instead of, “What’s in it for me?”

Interview Thoughts

“Tell me about yourself” ranks second to, “Why did you leave your last job?” John Karras, director of career services for Keller Graduate School of Management of DeVry University, recommends that in 30 to 60 seconds you “list your personal points of marketability, your organizational and leadership skills, your dependability and flexibility – you as a person, rather than your job experience.” To separate yourself from the other candidates, state the skill and follow with an example. Tailor the skill to the position.

His examples of “what to say in that less than one-minute window of opportunity: ‘I am kind to my parents.’ ‘My dog loves me.’ ‘I donate blood.’ ‘I help people across the street.’”

Notable

The Census 2000 report (of 1999 income data) refers to “the familiar relationship between female and male earnings...where it is clear that women at every percentile level of their earnings distribution earn less than men at the same percentile level.” Physicians and dentists are the only two occupations with median incomes $100,000 or higher. Median income for female physicians is $88,000, 63 percent of the $140,000 for male physicians. Median income for female dentists is $68,000, 62 percent of the $110,000 for male dentists.

The report also cites a General Accounting Office study, using the Panel Study of Income Dynamics, which concluded that work patterns are a key factor in this difference. Work patterns include fewer years of experience, working fewer hours annually or part-time, and leaving the labor force for longer periods of time than men. “When we account for difference between male and female work patterns as well as other key factors, women earned, on average, 80 percent of what men earned in 2000.” And they admit that their model can’t explain all of the differences.

This is what I call “stagnant news.”
If you do any shopping via the Internet, here’s an innovative and convenient way to support SELAM: consider using the iGive web site to make your online purchases. With connections to more than 400 businesses nationwide (including most of the big retailers from Barnes & Noble to Yankee Candle Company), iGive directs a percentage of every purchase you make through its web site (on average between 2% and 10%) to your designated charity or cause. It’s not only virtuous, it’s painless. Just go to www.igive.com, sign up as a member, and designate the Society for Executive Leadership in Academic Medicine as your cause. Then shop ’til you drop!

**Accessorize. Wear a SELAM Pin or Scarf**

Show your support stylishly by wearing the distinctive SELAM pin or scarf, based on the three-winged bird motif representing the qualities of leadership. The pin, designed by nationally acclaimed jewelry artist Nancy Megan Corwin and inscribed with “SELAM” and the artist’s name on the back, is a unique design guarantees it will be a conversation piece. The new, smaller version is 2 1/4” long and comes in either sterling silver or 14K gold plate.

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Versatile and elegant, the SELAM scarf can add sophisticated flair to any business wardrobe. Made of silk and measuring approximately 14”x53”, each scarf bears a distinctive pattern and color scheme, reflecting the unique sensibility of the individual makers—textile design students at Philadelphia University. The original SELAM scarf was created in 2000, when the ELAM Class of 1999-2000 donated the first design as its class gift.

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**Exercise Your Talents and Leadership. Join a SELAM Committee.**

SELAM is a growing organization that needs your expertise. By joining one of the following committees, you will have an opportunity to work with other women leaders while helping to shape the organization’s future. Committee terms are for two years and members are appointed by the President. Contact Vivian Reznik for more information at vreznik@ucsd.edu.

<table>
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<tr>
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<th>Development: Develops and carries out activities that enhance SELAM’s mission and increase revenues to support SELAM activities.</th>
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</tr>
<tr>
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The Physician Executive’s Coach on Visualizing: What Does It Look Like When It Is Working Well? Part Two

In Part One of this article [January 2004 issue] I claimed that:

- Faculty morale was, in general, lower throughout academic medicine than it had been in the past due to a series of seemingly imponderable factors, including:
  - The relative decline in public resources for higher education in general and thus the increasing dependence upon the clinical income stream for the support of faculty and programs and, further, the loss of ‘academic time’ diminishing the rationale for physicians to commit to academic medicine in the first place.
  - A change in the expectations of those physicians completing their training today with respect to achieving a better balance in their life with respect to personal and family time, complicated further by the debt load that they carry from college/medical school/residency.
  - A sense of powerlessness to manage, let alone control, their present, further exacerbated by a sense that they will have even less ability to determine their future.

- The article spoke about change and the capacity for individuals and organizations to manage and absorb change, yet the imperative that leaders guide their organizations to a more sustainable future through effective assessment, decision-making and execution.

- And I talked about ‘visualizing’ a ‘better place’ for the organization through an inclusive and participative process that revisits and refines (possibly, re-defines) the Mission/Vision/Values as well as the processes by which decisions are made and implemented.

The net result of this effort is a sense of clarity and ownership by the leadership team (e.g., deans and chairs), as well as by a broad base of faculty and staff in being able to better articulate and accept:

Where we are
Where we need and want to be
How we are going to get there
The rules by which we will travel

So, Where Do We Go From Here?

Create an Aura of Optimism

It will be hard to capture the attention, let alone the commitment, of a demoralized faculty and staff. Here is where charismatic leadership comes into play. You need to create a reasonable sense of optimism that:

- Responsible change is possible … we can do this.
- We can get through this together and be better for it.
- While not everyone here today will likely be here tomorrow, those who do remain will have a secure future (If we do nothing, it is likely that none of us will be here tomorrow!).

- We have a window in time during which to act…let’s open it and begin this journey…NOW!

Focus on the People

Too often organizations get this wrong. I look to the writings of Jim Collins whose books *Built to Last* and *Good to Great* have become contemporary classics in their practical approach to moving organizations forward. And remember:

The right people will overcome nearly any structure…The wrong people will not be made materially better by a change in structure.

Collins looks at several factors, but among the most critical to an organization’s success is:

- Getting the right people on the bus
- Being sure the right people are in the correct seats (functions)
- Get the wrong people off the bus (they are likely toxic and will undermine an otherwise good team).

Here are some more thoughts from Collins:

Do we have the ingredients?

First Who … Then What

- Right people
- Passionate
- Committed
- Focused

Do we have the right ingredients?

First Who … Then What

- Being the “right person” has more to do with character traits and innate capabilities than with specific knowledge, background, or skills.

Work on the Right Things

Too often people spend an inordinate amount of time worrying about, if not working on, things over which they have little control or influence. Take some time to evaluate those factors that are impeding your success, and put them into
one of four categories. Put your energy into those things that you can impact or influence. Don’t allow yourself or others to be distracted by the rest.

Create ‘Templates’ That Help People Do the Right Thing

Create a mechanism to evaluate proposals that come to you. The use of a template for this purpose allows many people (both your direct-reports…and their direct-report…) to apply a format for considering issues with a rationale that allows for good decision–making, resource allocation and focus of energy.

Put your time and energy only into those items that legitimately fall into the shaded area…things that have a High Impact on Programs and a High Return on Investment.

Leadership can be overwhelmed with the plethora of ‘good ideas’ that come from the ranks of faculty and staff. It is conceivable (quite conceivable) that many of these will not meet the ‘test of reasonableness’ for a number of reasons. Here is one suggested template which, when applied, allows for senior staff to prioritize proposals and sort out those that should not receive consideration. (Remember, your time is a precious resource. Chasing a project along a lengthy but dead-end path is a waste of that resource.)

Some projects will pass the early tests but fail to develop to a point where they can be implemented. Subscribe to the adage, “Fail Rapidly.” This means, try it, test it, and if it doesn’t meet the performance test, drop it and move on. And don’t spend time on focusing blame. Not every good idea can go the distance.

A Template for Managing Projects

Leadership effectiveness is enhanced when those who support you know what you expect and deliver a proposal with all elements in place. Requests for resources and/or proposals to pursue new projects may be relatively informal or may require a comprehensive business plan. In either case, it is helpful to have a template that can be followed in all cases that will assure that before an item comes to you for consideration it has gone through a logical and consistent titration process. Here is one that has worked for me.

10 Points to Follow When Managing Projects

The key questions are

1. What is the issue? Your premise?
2. Does it fit within the institution/organization’s Mission?
3. Does it fall within our agreed to priorities?
4. What are your measures of/criteria for success?
5. What will be the benefits/impact to your unit? Collateral units? The institution/organization? Have you gained support/approval from the leaders of collateral units? Can we contemplate any opposition/resistance? How do you plan to mitigate this?
6. What resources will be required (dollars [capital and operating/cash flow], space, people/time, external approvals) to complete this project?
7. What are the risks of proceeding? How will these be mitigated?
8. What is your exit strategy should this initiative not meet your expectations? What measures/thresholds have been established to trigger such an action?
9. What is the timeframe for planning, execution and initial operation prior to mainstreaming activity? Identify milestone dates/activity levels.
10. If the answers to the above questions are positive/appropriate, is there any reason why you should not proceed? If not, please proceed!

Create a Program Discontinuation Process

Most institutions have many good projects that should (or must) be implemented but aren’t due to a lack of available resources (money/people/space). There is a mindset that only newly acquired resources can be applied to projects. Nothing could be further from the truth.

I subscribe to the adage:

The most important activities that are awaiting approval to proceed are far more important than the least important activities in which you are presently engaged.

As such, you MUST create a mechanism to redeploy resources from one group to the other. You cannot depend upon newly acquired resources alone to do these important activities. When it comes to redeploying your ‘people resource’, be sure to put your best people on your biggest opportunities, not your biggest problems.

Do the right things … Stop doing the wrong things

Here’s a simple stratification process I’ve used in the past when looking at activities that may be cut from our schedule of things we do:

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The authors note that the power lies in its inclusiveness, encompassing and legitimizing the either/or and both/and ways of being, each strand depending upon the other.

The major relational practice emphasized throughout the book is “collaboration as a superior mode of interaction...because it taps strengths...that the current hierarchical mode of interaction subverts” (p. 61). The authors note “collaboration is built on trusting relationships, that this trust must be built slowly over time and through shared experience.” Also, “although there may be willingness to change, new ways of behaving are not adopted quickly or easily” and that the “collaborative way of interacting will not magically smooth out all interpersonal relationships, but it will lead to decisions that participants support, and it will contribute to the professional development of most.”

One historical fact was a troubling finding for me. Dale Spender in her 1982 book, *Women of Ideas and What Men Have Done To Them*, reports that, beginning with Aphra Behn in the 16th century (first woman to support herself by writing), each generation of women has discovered similar findings to the NECEL group. And each group doesn’t “know about them because they have been systematically rendered invisible and/or discredited by the workings of a patriarchal society...She [Spender], and we, didn’t know because we were not supposed to know” and that in “each century, groups of women find each other, coming together with only their personal experience as a benchmark, and discover with joy that other women share their feelings and experience” (p.84).

The authors conclude that if “we are to realize these possibilities [relational leadership] they must be passed on...to the young women who follow us” and we must help them “articulate their firmly held beliefs earlier” rather than spending too much time, as we have, in “trying to fit into the mold” (p. 87). The authors emphasize the need to integrate the words and works of other women into our own work, so that “what has preceded us and what follows will not be lost...[They] believe that the price for losing

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• Does this activity support our Mission? If yes, consider it. If not, eliminate it.
• Does this activity support our Mission but is not consistent with our Vision of our future (5-year horizon)? If so, resize it such that the resources invested are better aligned with its value to our Mission. (Note: When things are really stressed, and other options do not appear available, seriously consider cutting it.)
• Does this activity support our Mission and our Vision, but operates with a cost that exceeds its value (a return in economic or programmatic terms that is misaligned with its value to Mission/Vision/Values)? Resize it to better balance the cost/contribution equation.
• Does this activity support neither the Mission, nor the Vision, nor the Values of the organization? If so, eliminate it as rapidly as is practicable. Then explore how this activity crept into the organization in the first place and plug that hole!

Cut Costs by Removing Waste

After going through the steps above (actually, while going through these steps...you can, after all, multitask), take a careful look at those activities which you know are central to your Mission, consistent with your Vision of the organization going forward, and supportive of your Values. Look for waste in the process by which you accomplish these activities. The concept is called Lean Thinking or Lean Process Management … or, in Japanese, *Kaizen*. Space does not permit further discussion of Lean this month. I will return to this topic in a future newsletter.

David Bachrach, FACMPE/FACHE has more than 32 years of experience in academic medicine administration and provides leadership coaching to physicians in academic medical centers and teaching hospitals. He may be reached at The Physician Executive’s Coach Inc. sm, 2650 Juilliard Street, Boulder, CO 80305, (303) 497-0844, PhysXCoach@aol.com or visit his website at www.PhysXCoach.com.

BOOK REVIEWS


This is an IMPORTANT CONCEPTUAL BOOK, one of the first that explicitly describes “relational leadership.” The book arose out of a 20-year sharing process among the Northeast Coalition of Educational Leaders (NECEL), women educator administrators in K-12 and higher education setting. The NECEL began in the 1970’s when they were often the first woman as school principal, etc.

The women came to understand that they did not realize in their early days of leadership that gender is a category of experience, and did not know that they were mimicking the rules of the leadership role as they found them. They discovered that “one does not question the given until one sees that it has been given” (p. 66). They did not see this until they began sharing their experiences of feeling out of step with the typical male hierarchical leadership style.

One of the themes they discovered is the importance of “respectful and ongoing dialogue between and among [women] contempo-

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NATIONAL LEadership ProGram
NAMES ITS NEW CLASS OF FELLOWS
Class Selected from among Academic
Health’s Most Promising Women Leaders

Forty-five senior women faculty from medical and dental schools in the US and Canada have been selected as 2004-2005 Fellows by the Hedwig van Ameringen Executive Leadership in Academic Medicine (ELAM) Program for Women. The 2004-2005 Class consists of women from 39 medical and dental schools. Six institutions are sponsoring Fellows for the first time: Nova Southeastern University SOD, Temple University SOM, Uniformed Services University of the Health Sciences F. Edward Hebert SOM, University of Arizona COM, University of Missouri-Columbia SOM, and University of Missouri-Kansas City SOD.

ELAM’s mission is to increase the number of women at academic health centers in leadership positions and their success rate in attaining and remaining in these positions. Currently, in the US only 11 of the 126 allopathic medical schools, 5 of the 20 osteopathic medical schools, and 9 of the 56 dental schools are headed by women deans (including interim positions). Of these, 7 (28%) are ELAM alums.

“ELAM intervenes at a critical stage in a woman’s professional career and provides her with the skills, information and peer networks that will help her advance to the top,” explains Page Morahan, PhD, Co-Director. “Once there, ELAM graduates have proven their ability to manage the challenges of leadership, helping their institutions navigate the curricular, organizational and policy changes needed to improve medical and dental education, research, practitioner training, and ultimately the delivery of health services to the public.”

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Catherine K. Lineberger, MD, Associate Professor of Anesthesiology, Residency Program Director, Duke University SOM, Durham, NC

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My dream for women and men

I have a dream that someday soon women will:
- stop referring to their successes as luck
- confront those who undermine them
- take risks on their own behalf
- support each other
- select problems worthy of their energies
- hire a village if they don’t like housework
- give themselves as much credit as their friends do
- invest in a coach when they need a guide and ally

I have a dream that someday soon men will:
- routinely nominate women for honors
- get out of the way if they are insecure (the REAL ceiling)
- be drawn and quartered if they pretend to support women but act the opposite

I have a dream that someday we will together:
- become androgynous
- reclaim the word “feminist” and abolish the phrase “pink ghetto”
- find metaphors outside the realms of sports, pyramids, war, machines
- witness the demise of “women’s month” since we celebrate all year.

I have a dream that with each passing day, more girls will develop their voices and more boys their hearts.

[Written for Medical Society of Philadelphia’s Kate Hurd-Mead Lecture, March 17, 2004]

Janet Bickel
Career Development and Executive Coach
Faculty Career and Diversity Consultant
703/876 0111; Janetbickel@cox.net; www.janetbickel.com

Surely the day will come when color means nothing more than skin tone, when religion is seen uniquely as a way to speak one’s soul, when birthplaces have the weight of a throw of the dice and all men are born free, when understanding breeds love and brotherhood.

-Josephine Baker, entertainer and civil-rights activist

My mother always told me, “Never call boys on the telephone. Let them make the first step.” If I’d done that, I’d probably be somebody’s secretary right now instead of secretary of state.

-Susan Farmer, Rhode Island secretary of state (1983-86)
STRATEGIC CAREER PLANNING
Women Helping Women to Advance in Academic Health Centers

Andrea Jung, CEO of Avon Products, says, “Women don’t support other women as well as they should.”

This is a touchy subject we don’t often address. However, until we begin to accept that we are on the women’s team (whether we want to be or not) and strategically work together, we will achieve neither the gender equity nor performance effectiveness needed for academic health centers (AHCs) to thrive in the 21st century.

I am continually struck with how isolated, independent and competitive women in medicine and dentistry are. We don’t ask for help; we believe we must do it ourselves (show no vulnerability). To confess, I also often don’t even think about asking – it just isn’t on my radar screen! We also tend to view the world from a scarcity point of view, rather than from an abundance perspective. And finally, we compete with women as much or more than with men. Where we may give a man the benefit of the doubt, we seldom give the woman the same.

In my opinion, this is especially true for Euro American women. African American women, for example, seem to help each other up the career ladder (lift as we climb) much more.

Why do women need women to advance?

Why is this important? The American Council on Education’s Office on Women found that women presidents of colleges and universities had a shorter time in office than did men presidents. The reasons why included: (1) They were isolated, and did not have a safe group to give them a reality test. (2) The feedback they did receive was probably delivered more indirectly than a chair of a board, for example, would give to a male president. So women stayed in denial longer, until the situation was career limiting.

Madeleine Albright has beautifully stated the imperative for trusting professional relationships: “We need to turn our friendships into functional networks. We’re good at making friends, but less good at networking. Men are very good at networking, but don’t make friends. The question is how not to be so lonely [in leadership], not to feel you have to watch your back, but don’t make friends. The question is how not to be so trusting professional relationships: “We need to turn our friendships into functional networks. We’re good at making friends, but less good at networking. Men are very good at networking, but don’t make friends. The question is how not to be so lonely [in leadership], not to feel you have to watch your back, but don’t make friends. The question is how not to be so trusting.

In ELAM, we spend a great deal of effort to develop a close community of women. Our goal is for every ELAM Fellow to feel safe enough to share her vulnerability in tough times with at least one of her 44 ELAM Fellows or other ELAM alumnae or faculty – and thus to obtain the reality check, as well as support that she needs.

How can women help women advance?

Gail Evans, in She Wins, You Win, has emphasized that women need to accept that we are on the women’s team. We’re viewed first as a woman, whether we like it or not – that’s what’s visually seen – being a scientist is second. People of color know this phenomenon well. As I have heard from many, they perceive that they are first seen as a person of color, probably woman next, and scientist, physician, or dentist third. So they consciously strive to bring others along. Therefore, it is essential for women to learn to work with women better.

Another guiding principle for me is that women need to take more responsibility for advancing women. Certainly, we can work to change the system. However, it is not a complete “We:They” situation. Women need to accept that some of the lack of results in advancing women stem from our own actions or inactions.

The strategies I suggest have been influenced by Simmons College Center for Gender in Organizations, of which Robin Ely and Debra Meyerson are faculty. They have described four different approaches for advancing women. Their important message is: the first three approaches are necessary but not sufficient; we need to spend more attention and effort on the fourth approach. Here are some ideas about how women can strategically use each approach.

Fix the Woman. Women’s groups tend to do best at this. The problem is that it is all too easy to burn out with activities that aren’t necessarily strategic. Senior women can do more to:

- Organize strategically useful workshops for women (and often open to men).
- Mentor junior women, especially in groups so the limited time of senior women can be respected.
- Meet together informally to share what works for them in childcare, writing papers, etc., consciously moving beyond the complaint cycle.
- Spend effort in Women in Medicine or Women in Dentistry groups in their home institutions and in disciplinary organizations as part of giving back.

Equal Access. This has probably been the second most widely used approach for advancing women, and includes efforts such as stop-the-tenure-clock, maternity leave and other policies. The problem is that these efforts still view the woman as the problem, accept the system has to be lived within, and therefore only aim to modify the system at the edges (not fundamentally) to accommodate women. Again, it is a necessary, but not sufficient, approach to advancing women in a sustainable manner.

Celebrate, Value and Increase the Visibility of Women and Their Relational Skills. We can do much more of this approach, particularly when coupled with strategic plans.

- Talk up achievements of other women (by-passing uncomfortable self-promotion!).
- Write good recommendation letters for women – there is subtle gender bias in these letters!
- Spend the extra effort to nominate women for awards, jobs, etc. Women do less nominating, so less women get awards! Don’t worry so much about being “fair” and therefore believe that if you are going to nominate, you must nominate both a man and a woman. Men are nominating men – so the men will definitely be nominated!
- Recommend women to search firms when they call. Spend that effort! Men do this routinely, while women often do not even return the phone calls or emails of search consultants.
- Politically strategize concerning positions. One idea is to invite women in as Visiting Professors and make sure they see the “right people.” Then, when the job is formally open, the committee will know there are

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Page S. Morahan, Ph.D., works with scientists and faculty to provide strategic planning for rewarding careers. She is Co-Director of ELAM, an independent consultant and member of the ELAM Consulting Alliance, and co-Director of the Foundation for Advancement of International Medical Education and Research Institutes. To be on an email list for occasional mailings on career planning and leadership development, contact: 215-947-6542 or psmorahan@att.net.

References for this column are listed below.


FOOD FOR THOUGHT: STRATEGIC CAREER PLANNING Part II

This article is the second in a series that will respond to some of the questions I have received as a follow-up to the first article in *SELAM International News*. All questions have been responded to by phone, in person, and/or email. Please feel free to continue to send your questions to me at my email address janagreenwood@earthlink.net or call me at 202-746-6987. Your identity will be kept confidential.

Question: “Your column brought home for me several issues I had not faced. First, strategic planning for my career is something I would benefit from doing if I want to have the best chance of becoming a Dean or Vice President. Second, looking at careers and positions in relationship to my age helped me focus on reality. Third, actually reading the list of obstacles helped me consider how I must think about planning. Would you please tell me what I need to do to have search committees decide to interview me? I believe I have the credentials for a Dean of a College of Medicine position, but I do not get interviewed.”

Response: After reviewing the curriculum vitae of the person asking the question, I agree with her that she does have the qualifications for a Dean of a College of Medicine and is qualified to be invited for interviews. While it is not possible because of limited

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qualified women, and the potential women candidates will have established some credibility. And when women visit the campus, give them help about whom they should see, etc.

- Strategically work together on committees. When Sally says something and nothing happens, and then Joe says it and everyone says that’s a great idea, Marie can chime in and say, “Yes, that was a great idea that Sally had that Joe added to!”

- And very importantly, *never criticize* a woman in front of a man. Women (and minorities) suffer under the additional disadvantage of the “visibility-vulnerability spiral.” Any criticism is remembered much more, since women are more visible, than is a similar criticism against a man.

**Change the Culture.** Ely and Meyerson emphasize that this fourth approach must be used to attain sustainable change. And the Center for Gender in Organizations at Simmons College has taken this into action research toward a dual agenda – gender equity plus increased organizational effectiveness. In other words, the “women problem” may be the presenting issue, and by surfacing and questioning the underlying unquestioned assumptions, deleterious effects on organizational effectiveness can be uncovered. For example:

- Why do we accept that we need to be happy with one woman chair out of 20 in a school? Instead, we can strategize to get that first woman chair, make sure she’s successful by giving her *all* the support we can rather than criticize her; and then get other women as chairs!

- Why do we accept that only those who are primarily independently recognized investigators, first authors and Principal Investigators (PI) should get promoted? These are out-dated criteria. Harvard has a taskforce determining how to better recognize and reward “middle authors.” NIH has announced it will begin to recognize co-PIs. The new NIH Roadmap emphasizes complex interdisciplinary work and recognition of such efforts by all participants. Women, particularly senior women, can work within their schools and disciplinary societies to change promotion criteria to better suit the needs of AHCs in the 21st century.

- Why do we accept that only full time faculty members are commited and worthy of development and promotion? Senior women faculty can help develop new policies that provide true prorated benefits, promotion possibilities, etc.

I agree with Madeleine Albright’s “Frankly I think there’s a special place in hell for women who don’t help other women.” It is now time for senior women faculty to begin to more strategically and actively help women advance to leadership positions. Both individual small efforts and larger coordinated efforts will be required if AHCs are to capitalize on all of the intellectual capital within their male and female faculty!
space to review all of the details of the suggestions in this column, several highlights are included.

1. The *curriculum vitae* presents her life in the acceptable and expected academic format and needs to be presented in this traditional format for a search committee to review adequate detail about her background. However, the CV was never intended to be a persuasive, marketing document used to advance her to a position of Dean. While there are candidates who present only their CV to a search committee, it is in her best interest to provide more specific information in addition to the CV and to provide it in a different format.

2. It may help to think about the information she sends to the search committee as similar to the case she makes when applying for a grant. She has to make the case on why her research interests qualify for receipt of a grant. She makes this case because her research is consistent with the granting agent’s funding priorities.

3. We discussed each of her employment positions looking for examples that were persuasive and that made the case on how her accomplishments matched the requirements for the position. For administrative positions, it helped her to think about three major areas for organizing her presentation. Those areas are *leadership and vision*, *management*, and *resource development*. While the list of accomplishments may be long, she found that all examples could be appropriately listed under one of these three topics.

4. The presentation of the information she decided to send to the search committee includes a cover letter, résumé, and CV. I will provide additional information about the cover letter and résumé in later columns. For the résumé that is intended to make the case on her skills, experiences, and accomplishments match the requirements for a Dean’s position, she will list the positions she has held with the most current position listed first. She used the following example of a format as her model:

**University of XXX, Department Chair of YYY, 1998-present**

**Responsibilities include:**
XXX is a research extensive university with 40,000 students. The Medical College has # Departments, # Centers, and # Institutes and includes # faculty. The budget is $$$$. The Department of YYY has a budget of $$$ and # faculty with $$$ in external funding.

**Examples of Accomplishments:**
*Leadership:* Provided leadership for the college-wide strategic planning committee that resulted in the addition of a new research institute and secured an additional $10 million in federal funding for the university.
*Management:* Offset a state budget reduction of $4 million with increased fundraising with donors. Developed an incentive plan for interdisciplinary research that resulted in 12 new initiatives across the university and medical center.
*Resource Development:* Reallocated $5 million to faculty for new research development opportunities that resulted in faculty receiving $20 million in new federal funding.

5. The techniques of writing examples of accomplishments that are complete include asking her the question, “So what happened as a result of the work that was completed?” I continued asking her this question until there was nothing additional to add. For example, she had listed as an accomplishment that she managed a budget of $35 million. This example is *not* an accomplishment; it is a responsibility. When she changed it to the examples used above in the management category, it responded to the question, “So what was the result?” She currently is working on being even more specific in response to the “So what was the result?” question.

An additional quick question from her was how to have executive presence in an interview. The response for this topic will be included in a future column. Responses will include her style of dress as well as the substance of her answers.

Jan Greenwood, PhD, President of Greenwood & Associates, Inc. (G&A), an executive search, consulting, and training company that specializes in working with higher education and academic health center clients, has worked in higher education since 1969 and executive search since 1992. After working with two of the largest global executive search firms, she fulfilled her dream this year and started her own company with Betty Turner Asher, EdD, who was previously President of a research university with a medical school. Approximately 40 people are consultants or affiliates with the company, Dr. Linda Fisher, who has her medical degree from Harvard, is working with G&A to continue building G&A’ s health specialty. G&A has consultants located across the country. The corporate headquarters is in Florida. Jan also maintains a metropolitan DC office. Jan is a licensed psychologist who specializes in career development. She has led workshops and provided coaching for women and/or people of color who have been interested in their career advancement. As a tenured professor, she specialized in group work and developed a curriculum that included group process for small, large, and inter-groups, organizational behavior and development, counseling, and therapy. The curriculum was based in part on Tavistock training she completed after her doctorate. Jan has been President for two higher education institutions. A library will be named for her this fall semester at the first college where she was President. Continuing education credits have included work in the areas of forensics and managed care. Her higher education and executive search experiences have intersected throughout her career with the medical field. Examples of her executive placements include Dr. Karen Holbrook, President of The Ohio State University, and Dr. Bernie Machen, President of the University of Florida. She has completed searches for academic health centers such as Executive Vice President for Health Affairs and Dean of the College of Medicine among other positions of strategic importance to the universities and academic health centers.

Believing in fate produces fate. Believing in freedom will create infinite possibilities.

-Ayn Rand, writer and philosopher

If all you have to offer is a look that is supposed to be appealing, then you are going to be paid attention to about a tenth as long as you would be if when you speak you are interesting.

-Julia Roberts, Academy Award-winning actor
ISSUES IN THE WORKPLACE

Insights Gained from Comprehensive Evaluation

The potential of being involved in a leadership development program designed by and for women was very intriguing. There is no doubt that the ELAM program offers many important tools and assessments that enable one to grow and develop. For me, one of the most important parts of the process was the Benchmarks 360° evaluation.

Initially I approached this with much trepidation. I worked hard to identify people who would be willing to go through the evaluation, and to be constructive and honest in their assessment of my strengths and weaknesses. I had a high response rate, and eagerly anticipated the results of my assessment so that the growth process could begin.

The Benchmarks study represents an evaluation of the different aspects of my leadership and interpersonal skills. After reviewing my reviewers’ comments, I felt that I could directly address two areas for self-improvement.

Leading employees

The weaknesses noted in this area (although we should refer to them as challenges and areas for improvement!) included my willingness to delegate responsibilities, gain commitments before implementing changes, recognize conflicting views with each decision, adapt plans as needed and adjust management style. I developed a plan around each of these issues. To highlight a few, with regard to delegation, I began by developing management plans with two of my direct reports. In each case, we have set up regular meetings to review task documents. I will develop time frames for completion of these tasks and stick to those time frames. Things that I want to do I will try to delegate when there are more pressing issues that I need to handle. I have had to release the purely clerical aspects of my position(s) in order to focus on more visionary approaches to the different groups that I lead.

Another identified challenge related to obtaining commitments before making changes. It was important for me to develop a strategy to discuss issues with other people who are affected by the change, in order to determine if there are other courses of action. In the past my style has been to move forward without buy-in. By spending time listening before I make a change will not necessarily prevent the change but may allow the change to occur in a different – and potentially more acceptable – way.

A third challenge related to being adaptable in my planning process. My style has been to “live and die” by the plan. This goal of adaptability interacts with others in the sense that I will spend time listening to others’ opinions even after a plan has been constructed, since valuable advice can be gained. I will also work harder at making midstream corrections of potential benefits of improved relationships without sacrificing the spirit of the plan.

Respecting self and others

Specific issues related to the ability to find common ground, in handling unfair attacks, settling problems without alienating people, and sorting out my own strengths and weaknesses. For example, I began to tackle the problem of finding common ground. In many ways this reflects back to listening and compromise. I recognize that is some instances I cannot please all the people all the time. However, trying to understand the issues of all parties will help me find the appropriate level of support and compromise that will still get the job done. Specifically, instead of digging in my heels when someone does not agree with the plan, I will learn more about what the individual’s issues are. It will be important for me to learn to separate content from relationship issues and address them appropriately.

A second, related issue is my own self-perception. Over the last few years I have accepted several new administrative posts, yet I remain my harshest critic. Sorting out my own strengths and weaknesses has become a cornerstone of my daily task list. Generally I am pretty hard on myself with regards to my skill set. This can come across as a lack of confidence as well as a lack of skill. I need to be more honest with myself about what I am capable of doing. I need to be more willing to take on challenges that I may have recently shied away from. I will also need to develop or strengthen any skill deficits through courses, training or reading in order to improve and enhance my skill sets. Obviously ELAM has been a tremendous start! I will also identify mentors for specific issues, as well as seek out advice from higher administrative people who have insight into the issues and a good sense of what they view as my strengths and weaknesses. I will work at taking advice in the spirit in which it is given – again separating the personal from the professional.

For many of these activities, I will use both the Dean and my department chair to provide feedback for approaches and results. I have shared this developmental plan with them and asked for their feedback on a regular basis. I am particularly indebted to my department chair, as he has set a marvelous example for me regarding how to develop oneself in a new position. I encourage everyone with the opportunity to participate in an evaluation of this nature to go for it! The insights gained have made a significant impact in my professional and personal interactions with the individuals who impact my day-to-day existence.

Lois J. Geist, MD
ELAM Class of 2003-04
Associate Dean for Faculty Affairs and Development
University of Iowa Carver College of Medicine
lois-geist@uiowa.edu

Some Crucial Points to Remember When Negotiating a Job Offer

Negotiation involves determining what it is that you want and need, and stating your case assertively so that ultimately most of your needs and wants are met. Most importantly, it is understanding clearly what is needed and wanted by your Section Chief, Chair, Department Head, potential employer or others, and then providing grounds for a match between your skills, abilities and experiences and their needs.

Doing this in such a way that both parties feel that they have gotten what they need and want is an art. In good negotiating, each side will make concessions and the aim is for a WIN-WIN solution!

• **Timing** is a crucial variable. The window of opportunity for negotiating is widest between the time an offer is extended and before it is accepted. Discussing your needs before an offer seems to be forthcoming is presumptuous and may work to sour a prospective

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employer. Trying to add yet another perk or benefit after an agreement has been concluded may cast a shadow on your arrival. And, once on the job, your bargaining power is greatly diminished.

- Review the information you have about the position and the company.

- Re-examine the inventory of your skills, abilities, values and experiences. You will be negotiating from the point of the benefits you bring to the job.

- Assess your financial and non-financial needs and wants considering such issues as:
  - salary, benefits and perks
  - relocation expenses
  - spouse/partner job support
  - parental/family leave
  - facilities
  - scope of responsibilities
  - sabbaticals
  - parking
  - contract terms
  - title/rank
  - money for dues, subscriptions, and travel
  - tuition reimbursement
  - research equipment
  - support staff

- Research comparable salaries and benefits by field and geography by checking with professional organizations and associations, colleagues in similar positions in similar settings, mentors, and surveys published by professional associations, and federal, state and local authorities.

- Plan and rehearse your negotiating strategy. This crucial time sets the precedent and tone for the relationship you will have with your future employer.

- Focus on concerns and priorities for mutual gain, not individual interests. Each issue should be explored as a search for mutual benefit with a focus on the employer’s needs and values and what you bring to meet them. Reinforce the match between your skills and experience and their needs.

- Set your priorities carefully! Be fully aware of what you are willing to give and what your limits are. Present all areas to be negotiated at the same time. Pulling one more issue out after all is thought to be said and done will serve to create suspicion.

- WIN:WIN – aim for a fair and equitable agreement, one that seeks to understand and meet each other’s needs.

- Be sure to receive the negotiated offer in writing before writing an acceptance letter. If it is not the institution’s policy to do so, summarize your understanding of the terms agreed to in a note. If their understanding of the terms does not agree with yours, then they must say so. In your acceptance letter, re-state your understanding of the terms you have agreed to, including your starting date.

Judith Katz, EdD, educational consultant
Presented at Temple University School of Medicine Faculty Development Workshop, March 3, 2004
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EXERCISE
Describe a current situation in which you can use negotiation skills.
What information do you need to collect?
What needs and wants will be considered?
YoursTheir
What benefits (skills, abilities, experiences, interests) do you bring to the situation?
What is your BATNA (Best Alternative to a Negotiated Agreement)? What will you concede? What are your limits?
What are your opponent’s “hot buttons”?
How can coalitions/consensus be built?
What will promote mutual benefit? How will you prepare?
With whom can you rehearse?

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Some suggestions for additional reading:
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**Learnings on Leadership**

During the past year, I was fortunate to have the opportunity to participate in two leadership fellowships, the ELAM Program and the Woodruff Leadership Academy (WLA) through Emory Healthcare. These fellowships underscored to me the fact that leadership is a competency, with its attendant knowledge, skills, and attitudes. One of the most useful aspects of these leadership development programs is the networking they afford. Another extremely useful component of these programs is the chance to participate in a 360 degree evaluation process, in which people systematically receive feedback from their boss or bosses, peers, subordinates, and self. I recommend that we each engage in such a process every five years, with self-assessment being an ongoing part of our professional and personal lives. And I believe that 360 degree evaluations should occur in all of our training programs (medical school, graduate school, residency, fellowship, and postdoctoral). Receiving comprehensive input about our strengths and areas for growth facilitates our own capacity for self-reflection, helps us function more effectively in our current roles, and provides a platform for us to become stronger leaders.

I would like to share some of the key points that I have learned about leadership in the hopes that more members of SELAM consider more advanced leadership roles, that SELAM members who are leaders can be more effective in their roles, and that we consider teaching our students about leadership in a more systematic and coordinated fashion. It is important to remember that leadership is an action, not a position. It is a process, not a task.

Effective leaders have vision and good strategic planning abilities. They are knowledgeable about themselves, the people, the politics, and the issues. They are intelligent, creative, and exhibit a strong work ethic. They have a high degree of emotional intelligence, and they demonstrate a sense of humor. Able to inspire, motivate, and lead others, they are attuned to new opportunities and willing to take on novel challenges. They surround themselves with smart, dedicated, and capable people and make a commitment to retaining and developing them. These interpersonally skilled, versatile, and accessible individuals hold onto their own values and high ethical standards and maintain their integrity and honesty. They demonstrate loyalty to people and ideas.

Capable leaders manifest wisdom with regard to their ability to see and understand issues, set priorities, and act prudently and courageously. Fair, reliable, consistent, and sensitive in their dealings with others, they are tenacious and motivated, and take a lot of initiative. On one hand, competent leaders are able to be reasoned and thoughtful, and on the other hand, display passion. These individuals model values and behaviors, focus on group and team building, develop consensus, are inclusive, share power, delegate well, and are competent at conflict management. They create relationships that generate clarity, commitment, and engagement.

Effective leaders distinguish themselves as mentors. They are long-term oriented, and advisory by nature. They impart wisdom, care deeply about the career development of others, facilitate political navigation by their protégés, serve as objective consultants, and celebrate and reward their protégés’ successes.

People who are considered to be effective leaders are good communicators. They engage in all forms of communication at every opportunity with those internal and external to the organization. They have the knack for avoiding mistakes that will haunt them forever. When they do make mistakes, they acknowledge and learn from them. Exemplary leaders challenge the process by searching out opportunities, and experimenting and taking risks. They fundamentally grasp the concept that the whole is greater than the sum of its parts.

Burgeoning evidence supports a collaborative approach to leadership as being optimal in the majority of settings and situations. Collaborative leadership means creating a supportive and positive workplace environment, inspiring and communicating a shared vision, openly providing information, conveying the rationale for decisions (e.g., why they say yes or no), valuing and respecting others, enabling others to act, strengthening people, and sharing power and leadership. Collaborative leaders master the art and craft of empowerment. They empower their team by actively listening to others, valuing the viewpoints of others, developing people and organizational capacity, looking for ways to advance the careers of those who work with them, and putting themselves last. They encourage the heart by recognizing individual contributions and celebrating team accomplishments. They know that they gain power by giving it. They know that the more people feel power, the greater their satisfaction in the workplace. They build teams for the future.

Another useful framework is appreciative leadership. This approach, which represents a paradigm shift, is based on the construct of appreciative inquiry, the art and practice of asking questions that strengthen a system’s capacity to apprehend, anticipate, and heighten positive potential (David Cooperrider). Appreciative leaders encourage others to tell their story. They focus on the system at its best; they see the good. They see the positive behavior they want to develop. They track the positive, and fan it across the organization so people want to do more of it. Appreciative leaders convey hope by creating inclusive communities; searching for positive examples (best practices); and creating, validating, and spreading the message of hope (James Ludema). These individuals combine effective management

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and leadership skills with high emotional intelligence. In other words, they put it all together.

Institutions that value highly effective leadership frequently underscore the importance of performance management. Leaders in these settings typically espouse a well-articulated vision and associated goals, and ensure that bidirectional feedback processes are in place. They provide direct, specific, developmental, and positive feedback in an appreciative fashion. In addition, they are receptive to receiving feedback from their colleagues, subordinates, and superiors.

General Electric (GE) has a superb model of leadership (John Rice). This leadership model is based on the principle that optimal results occur when integrity and quality lay the foundation for all aspects of the organization’s functioning, and when the people and processes in the system facilitate the creation of high quality products. To support optimal results, leaders in the system must engage in the five Es: energize, energy, edge, execution, and empathy.

The following are some of my favorite quotes about leadership.

- Leadership is like beauty – it is hard to define but you know it when you see it. – Warren Bennis
- If you are not coaching and teaching, you are not leading. – Jack Welch
- There is no limit to what a (wo)man can do or where (s)he can go if (s)he doesn’t mind who gets the credit. – Robert W. Woodruff
- If you want to do more with less, work together. – Lynn Epstein
- Imagination is more important than knowledge, for knowledge is limited to all we now know and understand, while imagination embraces the entire world, and all there will ever be to know and understand. – Albert Einstein
- The best way to predict the future is to invent it. – Peter Drucker

Nadine J. Kaslow, PhD, ABPP
ELAM 2003-04
Professor and Chief Psychologist
Emory Department of Psychiatry and Behavioral Sciences at Grady Health System
nkaslow@emory.edu

Lessons from ELAM: Leading from Within

It is easy to recognize individuals who become leaders in the traditional pathway, e.g., a Department Chair or Medical School Dean. However, there are many other types of leadership in academic medicine that are equally important but not so obvious. My personal experiences after ELAM, in both administrative and other academic leadership roles, have led me to closely and critically examine my own strengths in order to focus on the leadership roles that most closely match my skills and goals. It also was important for me to consider how these choices affected the balance in my life.

Although we clearly need leaders in key administrative roles, the time and energy needed to be effective in these positions may limit achieving other objectives. In my case, the goals of being a leader in my area of research and in medical education require a different approach. This approach includes fostering an open and collaborative attitude towards research and mentoring new investigators and clinician-teachers, both at my own institution and at a distance.

For example, when giving invited lectures, one of my goals is to stimulate someone in the audience to pursue further research in my area of interest, to point out the remaining unanswered questions and how these might be approached. I encourage other investigators to communicate with me (often by email) and offer to help review their manuscripts at the draft stage. Besides encouraging new independent research, this approach has led to collaborative projects in several cases, using data from my institution to address hypotheses proposed by other investigators.

Another example of my approach is that, as a senior investigator in my field, I make the effort at national meetings to attend abstract oral presentations and poster sessions by younger investigators and introduce myself to the authors to discuss their work and provide positive feedback. Recently, as a Visiting Professor, one Assistant Professor said to me, “You probably do not remember me, but I remember you! About four years ago you came up to me at my first poster and told me that you hoped I would continue in a research career. That really meant a lot to me.” Well, her comment really means a lot to me too, and emphasizes how we can be leaders with only a little personal effort.

Probably my most important leadership role is as an author of textbooks on echocardiography and valvular heart disease. The impact of writing articles and textbooks includes not only the information provided which, hopefully, results in improved patient care, but also being an author serves as a role model for others. Even though women now make up a large percentage of physicians, the number of women authors and editors remains relatively small. As an editor, my experience in seeking out the best authors to write chapters or review articles is that my list of authors reflects the gender, ethnic and racial diversity of our profession. In many cases, I then serve as a reference for academic promotion for these authors, and I take every opportunity to suggest their names as reviewers, editorial board members, and speakers or chairs at national meetings.

The skills that ELAM provides are valuable not only for more traditional leadership roles, but also for “leading from within.” Besides looking for opportunities to lead, we each need to look within ourselves to discover how best we can be leaders.

Catherine M. Otto, MD
ELAM 1998-99
Professor of Medicine
Director, Training Programs in Cardiovascular Disease
University of Washington (Seattle)
cmotto@u.washington.edu
ON BECOMING A PUBLIC SERVANT

It didn’t take long for my postman to decide he didn’t like me any more. Since my election last March, I’ve been deluged (Can paper deluge?) with correspondence from the University and a variety of good folks trying to help me do my job as Regent. I thought about a speed-reading course and Woody Allen came to mind. Mr. Allen says he took a speed-reading course. After reading War and Peace, he said, “It’s about Russia.” My family has also reacted without reading, or weighing, the mail. The address on that mail gets their attention. “The Honorable Patricia S. Simmons.” Those of you who know me see the oxymoron right away and may worry about the size of my head. Worry no more; I’m still a peabrain. My family makes sure I remember who I am and that I have every reason to be humbled. My husband likes to request that I get my honorable self into the kitchen to help with the dishes. My son is still unimpressed and still doesn’t listen. And my daughter addresses correspondence to the “Lovable and Mostly Honorable.”

But more than a somewhat amusing title has come with this job. Life as a Regent of the University of Minnesota has been my most remarkable and exciting foray into leadership. All of you are leaders. I’ll bet all of you give of yourself in many ways, so you will know what I mean about the joy of public service. After I was asked and encouraged to run for office, I did my homework and decided that governance in higher education was just what I wanted to do. The role of the university in the definition of how our future will look has my full and rapt attention.

Deciding to be a Regent meant giving up some things at Mayo Clinic. Not only does the new position make demands on time (about a 0.25FTE) and energy, but also because Mayo and the University compete in some arenas (practice, research funding, and education to name three), I was at risk for real or perceived conflict of commitment. I didn’t want to take the job with one hand tied behind my back (or a noose around my neck!), so I resigned key leadership positions including the Board of Trustees, its Executive Committee, and chairing the Board of Mayo Medical Ventures. It wasn’t actually hard. I had achieved what I hoped to achieve. Frankly I was ready to use some other parts of my brain and think about issues other than healthcare and medical economics. Happily, my practice, education, and research commitments at Mayo are probably easier to fulfill, because Mayo is a world leader in its field. I still enjoy having a voice and some leadership responsibilities at the institution I love; I was willing to give up some things to be a Regent, but not medicine and being part of Mayo Clinic.

And like being there, the getting there was a rich and rewarding life experience. Unlike leadership positions I have had in medicine and the business of medicine, this one required a very public campaign and election. I don’t think any of us would argue that there is more than a little politics in our achievement of leadership positions in academic medicine, but we don’t usually deploy campaign brochures and partisan caucuses. Once my decision was made to try to be a Regent, wonderful people came forward to help me. The first female state senator in Minnesota, a former Vice President of the nation, Minnesota’s most prominent businesswoman, a former lieutenant governor and state supreme court justice, people I admire in my community, and leadership of both of our major political parties were key. A favorite state senator, himself a conservative Republican, early on told me I didn’t have enough Democrats to get me elected, and he himself proceeded to hook me up with some. I’ve never experienced the joy and wonder of watching a women’s network in action like the one that helped me. Across Minnesota there is a group of extraordinary women with skill and commitment who are bound and determined to get women elected. And they do.

The Board of Regents is the governance body for the University of Minnesota, a research university with about a half billion dollars in annual research funding and some 65,000 students distributed on six campuses across the state. Our responsibility is to oversee the University’s fulfillment of its mission and management of its resources through policy and major financial decisions. As heady as that may sound, we still get to wallow in the mud of football stadiums and athletic scandals. In turn, we are accountable to the people of Minnesota, a constituency rightfully demanding that the University perform to meet the higher education needs of the state. I receive lots of advice. We are the targets of not a few demonstrations. But you’ve got to love a group of bikini- and Speedo-clad students demonstrating against high tuition on a frosty Minnesota February morning with signs reading, “FREEZE TUITION!”

Of all the rewards being a Regent has brought, associating with University, political, and community leadership has been the best. I went into this position with a jaded view of government and came out with extraordinary respect for many of our state and national leaders. Mine is an uncompensated position, but what I give of my time and energy pales compared with what I see good people contributing in my community, state, and the world of higher education. I’ve even reconciled the title thing. It is clear that “The Honorable...” just represents a misspelling, and The Humbled Patricia Simmons is mighty pleased with this opportunity to serve. When someone asks you to run for office, don’t just run the other way, because in public office you run into some extraordinary people and life experience.

Patricia (Patty) S. Simmons, MD
ELAM 1997-98
Associate Professor, Pediatric and Adolescent Medicine
Mayo Clinic College of Medicine

My Turn

The hysteria around the stock market: Sell right, buy right, the smart investor, saving for old age and infirmity, risk taking and risk averse, bullish and bearish...on and on we go. The world is hanging on to this illusion that we are indeed planful people, that human beings with their developed neo-cortex are different: contemplative and reflective.

Yet, the stock market is a wonderful metaphor for our personal lives. As a Child Psychiatrist, I watch people, smart people, mind you, as the stock dividend of their relationships sinks to a zero. Sometimes, unintended and uncared for, their investments shrink, unbeknownst to them. Conversely, for some, try as they may, the downward spiral does not stop.

Marriage or, for that matter, any relationship is a social contract that we bind ourselves into. We get into these quasi-stable arrangements for long-term equity building. We do not cash out dividends. We keep reinvesting into the stock, hoping there is gold at the end. There is a lot of sublimation of desires and wants for the growth of this common vision of what is called a family. Depending on where one is in one’s mutual relationships, this seems a noble and lofty investment or a total loss.

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The winners or the losers are amongst us: our colleagues, our employees and employers.

“Should I leave? Do I want out?” are familiar themes of relationships and the stock market. The same angst of what is the best time to buy or sell mars the beginning or the end of a relationship: not easily done. The nervousness pervades everything percolating into the being like the stain of ink. Out, in, out and the fantasy that we are in control.

Then there are people like me: very slow to move, titanic in their resolve to stay the course. Having negotiated the 23-year mark of my marriage, and nearing the half-century mark of my life, I teeter totter at the late blooming Eriksonian crisis of my life: generativity vs. self-absorption. Should I give of myself to the larger world, or remain absorbed in the small circle I have inhabited for most of my mature adult life, my nuclear family? When struggling to clearheadedly assess what my life would amount to, at the age of 60, will I be able to honestly say I made the right choices?

Just like my stocks, I wish I had a crystal ball. I have no idea whether this is a “woman thing” or not, but we women sure as hell struggle much more with this dilemma. I see few simple answers. After all, if I don’t move into the outer world, it is more of the same: the internal yearning to become a contributing member of society is thwarted. If I move into the outer world, tentative and ambivalent, I hear the echoes of my own guilt mocking the abandonment of all I have held dear for so long.

The other day, in a very public place, I learned what my weak spot was. Commenting on my youngest son’s award for being an outstanding student of the year, a former resident and now a colleague stated rather innocently, “It must be your husband’s effort. You travel too much.” It hurt. Yet, it was a defining moment. Forced to examine why it hurt so, I have become clearer and more honest with myself. I cannot afford prevarication or hiding behind artifice that will merely lose me more time. In that moment and thereafter, I began to contemplate the reallocation of the stock investments I have made in my life in a thoughtful and planful way. Not that my life has not unfolded planfully. It has and I have virtually no regrets. But the lessons I am learning include a deeper appreciation for the cliché that indeed “I have one life to live.”

Like a good investor, I need to look hard and close at my portfolio, discard and abandon antiquated notions that descend on me: destructive, regressive; pushing all those dysfunctional buttons. I must surround myself with people I enjoy, things I feel passionately about and causes that I believe in. I suppose I can manage my life: generativity vs. self-absorption. Should I give of myself to the larger world, or remain absorbed in the small circle I have inhabited for most of my mature adult life, my nuclear family? When struggling to clearheadedly assess what my life would amount to, at the age of 60, will I be able to honestly say I made the right choices?

5th Annual SELAM International CE Meeting: Effective Leadership

The 2004 SELAM International Spring Program was held April 23 and 24, 2004, in Philadelphia. Linda Adkison, PhD, (ELAM 1998-99) and her outstanding Program Committee led this remarkable, memorable meeting. “Effective Leadership,” the program’s theme, was filled with insight and perspectives from a diverse panel of speakers: medical and dental school deans, chair of a basic science department, chair of a clinical department, a chief medical officer, career coaches and management consultants.

President-elect Karen West, DMD, MPH, kicked off the program Friday morning with her welcoming address. In Understanding Academic Finances, Sharon Turner, DDS, JD, and Dean of University of Kentucky College of Dentistry, explained how local, state, and national social issues affect higher education finances. She described the roles of strategic planning and financial decision-making, and the relationship of institutional missions and strategic plans. She also discussed financial opportunities and challenges specific to dental schools. Though focusing on information needs of decision-makers, her presentation was fascinating to anyone seeking to understand influences on institutional finances.

Joanne Conroy, MD, Chief Medical Officer of Atlantic Health System, followed by exploring ethics in financial issues – how to recognize and appropriately respond to them. Her presentation, Recognizing and Responding to Ethical Pitfalls in Academic Finances, was filled with good advice to those in charge: always provide value to your customer, inspire ethical behavior by “walking the walk,” make heroes out of those who serve as the corporate conscience, require suppliers to be upstanding corporate citizens, and conduct training programs on corporate ethics and resolving ethical dilemmas. She cautioned against hiring dishonest people with the expectation of teaching them honesty. A better idea was making sure on-the-job pressures don’t get out of hand. Dr. Conroy concluded by paraphrasing Dwight Eisenhower for something to chew on when facing confusing situations, “A people that value its privileges above its principles soon loses both.” Commenting on Wall Street’s finance and ethics, Dr. Conroy stated, “A firm’s income statement may be likened to a bikini; what it reveals is interesting but what it conceals is vital.”

Next, three leaders explored lessons learned through the clarity of hindsight. Jane Clifford, PhD, Chair of Drexel University Biochemistry Department, presented Considerations before Applying for a Chair Position. She reflected earnestly on motivations and realities of being a basic science chair – what is needed to be successful, the financial operations of a basic science department, and how and what to negotiate. She advised, “Follow your gut – if it does not feel right, don’t do it.”

Susan Rattner MD, MS, and Senior Associate Dean for Academic Affairs/Undergraduate Medical Education of Thomas Jefferson University, covered A View from the Office of the Dean. Drawing from 15 years of personal experience, Dr. Rattner described in detail the Office of the Dean’s organizational structure and revenue sources. She also shared what she learned about knowledge, skills, styles and attitudes needed for success in academic administrative roles. Her discussion of pathways, risks and benefits in the professional niches that make up various dean positions was especially interesting to participants aspiring to become a dean.
The morning session concluded with Leadership and Financial Perspectives. Through the eyes of the Chair of the Professional Liability Subcommittee at her institution, Marjorie Bowman, MD, MPA, and Chair of University of Pennsylvania Department of Family Practice & Community Medicine, presented Malpractice as a Financial and Leadership Challenge. Dr. Bowman described the malpractice crisis and its impact on academic medicine and clinicians. She shed light on national trends and factors influencing the current crisis. Dr. Bowman also discussed several proposed measures to solve the problem.

Friday afternoon centered on a variety of techniques and skills to work more effectively in groups. Katherine Hirsh, DPhil, energetically conducted Practical Applications of Myers-Briggs. A faculty at the Center of Teaching and Learning at University of Minnesota, Dr. Hirsh is also co-author of Introduction to Type and Teams and The Myers-Briggs Type Indicator (MBTI) Teambuilding Program. Participants received an intense course on how MBTI affects individuals and team performance. Participants learned to apply MBTI to manage team communication, team culture, leadership, change, problem solving and stress. Participants participated in an exercise on team diversity (and in particular, MBTI type diversity). Judith Katz, EdD, a faculty member of the ELAM program, has more than 20 years’ experience as a psychologist consulting to organizations and individuals. She led another interactive exercise, Building and Leading Successful Teams. She used a wilderness survival exercise to instruct participants on decision-making and consensus problem solving. An interesting footnote to the session: it turns out that few accomplished SELAM scientists, educators or clinicians know much about surviving in the great outdoors.

The day away from campus went quickly. Over dinner, participants exchanged personal stories and tossed around ideas on finances, malpractice, and financial ethics. No doubt the collective knowledge of the group would increase anyone’s effectiveness at any institution or campus. Participants were also able to catch up with email through high-speed Internet connections in each room, a free service provided by the Courtyard Marriott conference hotel.

Vivian Reznik, MD, MPH, and outgoing SELAM President, joined the program on Saturday with a warm welcome to the 2003-04 ELAM Class. Lynn Epstein, MD, kicked off the program with Leadership Paradigms: The Winds of Change. Just completing her term as President of the American Medical Women’s Association, Dr. Epstein addressed challenges for new leaders trying to further the best interests of their organization. She outlined a structure for finding the best match between organizational needs and strengths of individual leaders. Her motto: “It’s amazing what you can accomplish if you don’t care who gets the credit.” “If you want to do more with less, work together.” “The leader is just one member of the team, albeit an important one!”

Adele Scheele, PhD, career coach and Director of the Career Center at California State University at Northridge, described Critical Career Competencies for the 21st Century. Dr. Scheele discussed six critical career competencies: experience doing, risk linking, show belonging, exhibit specializing, use catapulting, and magnify accomplishing. She explained these competencies as ways of becoming more proactive, creating better chances for overcoming limitations. She said these skills, or “markers of awareness,” though not part of professional training, make the difference between smart people and smart, successful people. The message was refreshing, especially when applied to academic medicine.

Leading with Appreciation wrapped up the meeting. The team of ELAM Co-director Page Morahan, PhD, Patreece Thompson, MD, and Ray Wells, PhD, introduced the concept of an appreciative leader. Dr. Thompson is a psychiatrist and Director of Client Services with Career Concepts, a management consultant firm. Dr. Wells is President of Wellbeing Systems, Inc. They defined appreciative leadership as capable of finding the meaning of change, and discovering/covering forces that energize systems and move them in the direction of highest destiny. They explained what appreciative leadership looks like, the eight principles underlying the concept, and the application of appreciative inquiry through the method of “feedforward” instead of feedback. During interactive exercises, participants were given practical tools to become appreciative leaders and tips on sustaining their development.

The two-day program was great. The ideas and experiences shared are invaluable tools to more effectively manage time and resources, and more quickly adapt to change in the academic healthcare environment. And the annual auction was both fun and productive. Rosemarie Fisher, MD, our ELAM alumna, demonstrated professional auctioneer skills that will surely come in handy one day after retiring from her dean position! Continuing Education Program Committee members who also contributed to the Spring Program are Chris Abrass, MD, Valarie Arkooch, MD, Theola Doublas, DDS, MBA, Kathleen Szazama, MD, JD, Ann Thompson, MD, Mary Lou Voytko, PhD, and Pamela Zarkowski MPH, JD.

Helen K. Li, MD
Associate Professor and Director
Vitreoretinal Diseases and Surgery
University of Texas Medical Branch - Galveston
hli@utmb.edu

Quotable

After all these years, I am still involved in the process of self-discovery. It’s better to explore life and make mistakes than to play it safe. Mistakes are part of the dues one pays for a full life.
- Sophia Loren, Italian actor, and the first actor in a foreign film to be honored with a Best Actress Academy Award

Character cannot be developed in ease and quiet. Only through experience of trial and suffering can the soul be strengthened, vision cleared, ambition inspired, and success achieved.
- Helen Keller, activist for the deaf and blind and winner of the Presidential Medal of Freedom

I want to make people feel intensely alive. I’d rather have them against me than indifferent.
- Martha Graham, dancer, teacher, and choreographer

Winning is not the end-all, be-all, but performing to the best of your ability is.
- Sylvie Bernier, Olympic gold medalist in diving

Years are only garments, and you either wear them with style all your life, or else you go dowdy to the grave.
- Dorothy Parker, writer, poet, and critic
Avery on
9 Keys to Personal Responsibility for Interdisciplinary Healthcare Delivery

Teamwork is an individual skill — not a group skill — and begins with taking total responsibility for your own team experience.

Do your healthcare professionals go from case to case doing little more than hoping this team will provide a good outcome and true interdisciplinary experience? Or have they come to expect a mediocre team experience, not a great one? Raise your standards for team performance with nine keys for being totally responsible for your own team experience.

1. Agree to response-ability.
Unlock the key to your personal power and growth by becoming consistently more willing and able to respond to whatever happens on your team. When you find yourself in a non-productive or counter-productive relationship, rather than deny, blame, or justify, ask yourself, “How did I create this for myself, and how will I respond to change it?”

2. Retain your personal power.
Treat every action and decision as one you consent to and take responsibility for speaking up when you disagree with your team’s purpose and direction. Know and understand that “going along” without passion or commitment takes your team where no member wants to go.

3. Increase your “provocability.”
Get over the need to be nice—or the need to be seen as nice — by “calling” others on their broken agreements or irresponsible behavior. Address small irritations first — they’re easier to confront — and identify your teammates’ poor behavior and let them know what you prefer instead.

4. Experience and express judgments fully, then let them go.
Traditional wisdom admonishes you to “judge not,” but not judging is an improbable — if not impossible — action. Rather than make quick judgments, examine your emotions and respond in a way that improves the relationships that are at risk.

5. Learn from every upset.
Harvest value from an upset by moving from an “excuse mentality” — getting upset at someone or something, then assigning blame or making excuses — to asking yourself how your own choices and actions created the situation. Determine how you can change your behavior to strengthen the team. And if you need to ask for new agreements with your teammates, do it then and there.

6. Open a new relationship with a contribution.
Advance the work of the new team by making a valuable contribution up front — anything that has value to the group, from sharing special information to which you have access to leveraging your network of contacts to get something done. Make it known that you don’t expect an immediate payoff, but extraordinary payoffs later.

7. Be a “present hero” by serving yourself and your team simultaneously.
“Present heroes” are individuals who are mindful of the abundance they enjoy as members of their families, teams, and communities, and assume it’s in their own self-interest to invest a little personal energy to help the group. Choose one of the dozens of annoyances that you’ve been wishing “someone” on your team would take care of — from confronting a teammate’s difficult behavior to redesigning an inefficient work process — and take care of it yourself. Think in terms of service and avoid being self-righteous or attention-seeking.

8. Master your intentions.
Intention is always both conscious and unconscious. Use this awareness to fuel self-discovery, develop cooperation skills, and harness these forces to build powerful integrity. Have teammates ask themselves, “What are my intentions for participating in this team’s activities? Will my intentions, both conscious and unconscious, lead the team closer to its goals?” And next time you catch yourself taking words back by saying “I didn’t mean it,” reflect on how you really might have meant it at some level.

9. Live and work “on” purpose.
By working with the conscious intention that comes from determining and knowing your purpose in life, you attract individuals who help you learn and achieve more and are served by your purpose as well.

Do You Have TeamWisdom?
Put yourself to the test and see if you’re taking responsibility for your team’s success.

TeamWisdom is a set of individual skills and behaviors that leads to highly responsible and productive relationships at work. To learn if you’ve got it, read each pair of statements below and check “A” or “B” as being most true for you.

1. A _____ I make certain that our team is energized by clear purpose as well.
B _____ I think goal setting is a waste of time and energy, and bold goals that unite and stretch us.

2. A _____ I ask myself and my teammates, “What has our team been formed to do?”
B _____ I expect my team leader or teammates to tell me my role on the team, then leave me alone to do it. If a team member doesn’t do his or her part, it’s not my problem.

3. A _____ I take an active interest in what motivates my teammates, as well as think about and share what winning as a team means to me.
B _____ I think our team members’ interests and motivations are our manager or team leader’s concern, not my concern.

4. A _____ I only make agreements that I fully intend to keep. If a teammate breaks an agreement, I call him on it and explain how important agreements are to me and our team.
B _____ My teammates can’t predict whether I’ll follow through on my agreements. And who knows whether they’ll keep their agreements?

5. A _____ I make certain that our team is energized by clear and bold goals that unite and stretch us.
B _____ I think goal setting is a waste of time and energy, and I simply want to get to work.

Did you check more “A” or “B” statements? If you checked more “A” statements, your TeamWisdom allows you to get more done with less time and energy, earn more, attain satisfaction, and even transform your workplace. If you checked more “B” statements, you lack TeamWisdom and often frustrate yourself and others and cost your company money.

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How Are Your Team Skills?

Got the right stuff when it comes to creating successful teams and partnerships? Put yourself to the test and know for sure.

People who consistently create powerful relationships at work are people who know and practice great team skills. Are you one of them? Check the statements below that are true for you, then read on to see where you stand.

_____ I build effective partnerships with people on whom I depend to get my work done.
_____ I have a proven system for creating productive partnerships.
_____ I stay on top of others when they don’t deliver so I can continue to depend on them.
_____ I ask myself if I intend to keep an agreement as I make it.
_____ I own up to a broken agreement immediately and make amends at the first possible opportunity.
_____ I know how to break an agreement without breaking trust.
_____ I confront co-workers when they have broken an agreement with me rather than ignore or stew over it.
_____ I confront co-workers when they behave unethically, immorally, or illegally.
_____ I negotiate with co-workers about how we’ll work together and treat one another, as well as how we’ll address problems.
_____ I know how I want to be treated in a work relationship and understand how to ask for it.
_____ I view my judgment of others’ inappropriate behaviors as an opportunity to ask for what I want to see happen in the future.
_____ I work to ensure that I’m aligned with others and pursuing shared goals when our results depend on their performance.
_____ I learn and act upon what winning means to others when my work depends on their performance.
_____ I pledge to never defect on others when my work depends on their performance.
_____ I know how to discover and amplify others’ motivation for their work.

Scoring

Give yourself one point for each statement you checked as true. Then look below to see where you stand when it comes to your team skills.

0–3 Your results at work suffer from a lack of working successfully with others. Invest in individual team-skill development soon.
4–7 You miss out on the optimal benefits of working responsibly and productively with others. Learn more about team skills and practice them.
8–11 You maximize your technical skills through your relationships with others and are considered a good partner and teammate. Focus on sustaining and building upon these strengths.
12–15 You are poised for collaborative greatness. Put yourself in a position to leverage your own and other’s talents.


Book Reviews, continued from page 17

these works yet again is even higher in our generation than it has been in preceding generations.” The book concludes with thoughts about realizing the true integration of the double helix of the two ways of leading.

Page S. Moran, PhD


Are you frustrated by a large number of “unsolvable problems?” Has it occurred to you that many of them may not be “problems to solve” but rather “polarities to manage?” If the difficulty is on-going and has two interdependent poles (i.e., neither stands alone), then you have a polarity to manage rather than a problem to solve. Examples of polarities are means and ends, competition and collaboration, stability and change, centralized and de-centralized, autocratic and participatory, freedom and equality, critical analysis and encouragement, individual and family, and stress and tranquility.

Johnson explores all these and other polarities, employing a four-quadrant grid of two poles and their downside and upside. Neither pole is ever the “solution.” The key is understanding the dynamic forces involved and a willingness to explore the downside and upside of both poles.

For example, in a well-managed “Individual Responsibility and Organizational Responsibility” polarity, people challenge themselves and their subordinates to do their best regardless of the system. They are also able to challenge the system, guided by indicators such as too much waiting for organization improvements or too little feedback from individuals to the organization. Poorly managed, this polarity produces complaining and waiting, resulting in more resistance and loss of creativity. This framework encourages a balanced perspective and reveals how energies “get stuck” in the downside of a pole.

“Both/and” thinking must supplement “either/or.” Polarity management thus depends on “letting go to get more,” e.g., seeing another’s point of view increases the likelihood that she will see yours. Also required are skills at both Crusading and Tradition-Bearing and mediating between the two.

Janet Bickel, MA


A blend of business, history, psychology, and economics, The Support Economy argues that people have changed more than the corporations upon which their wellbeing depends. Individuals today, especially the Millennial Generation (born after 1982 – and 60% larger than Generation X), have a sense of self that is more intricate, detailed, and vast than ever. But managerial capitalism is not up to providing the sanctuary, voice and connection that individuals now desire.

Zuboff and Maxmin argue that “managerial capitalism” has outlived the society it was once designed to serve. It achieved the efficient production of goods and services (“transaction value”), but today’s individuals now want to take their lives into their own hands and are ready to pay for the support and
advocacy necessary. The authors term this more fertile form of value “relationship value.”

Fed by the self-sealing dynamics of men in groups, “Organizational Narcissism” helps explain why opportunities associated with “relationship value” have been overlooked. The primary source of this narcissism is the “organization man” – ensconced in the hierarchy of “my career, my identity, my wealth.” Organizational Narcissism translates into an ambivalence shaded with contempt toward customers, the majority of whom are women – the primary purchasers in this country. The authors also see a link between this ambivalence about customers and the crisis of masculinity which has accompanied the shift toward industrialization: the independent outdoor life has been replaced by a now husky guy in an office chair dependent on papers filed by a frail woman.

A related insight here is what the authors term “Career Taxidermy,” i.e., making something dead – old career norms – appear alive. Because women’s sociologic and biologic realities have little in common with old norms, they are the main casualties of this Career Taxidermy. But the moose is artfully embalmed to appear alive. So the educated working mom remains at the epicenter of the daily grind. But since she is also the front line of the “new individuated consumption,” the authors ask, “If boys liked girls better, wouldn’t they be richer?” They also argue that a stronger presence of women in management would create a more androgynous culture able to better bridge the distance between producers and consumers.

Zuboff and Maxmin conclude with metaprinciples of the new Support Economy, including that “the relationship economy is becoming the primary framework for wealth creation.”

Janet Bickel, MA


Shlain, an academic surgeon, has crafted an extremely well researched book that tackles a major historical question – why was there such a rise of hierarchy and male dominance and concomitant dismissal of women, after the egalitarian society of the gatherer-hunter era? He hypothesizes that this occurred because of the discovery of the alphabet and literacy, which surpassed the pre-writing cultures that used oral transfer and visual images for communication. His research shows that there is a remarkable congruence of the discovery of the alphabet, which required abstract, individual unit, linear thinking, and widespread literacy, with the downfall of women’s place in society. While he agrees that the evidence is correlative, and not scientific proof, he has accumulated an impressive array of evidence from vastly different cultures to support this thesis. He states, “Due to its exceedingly short learning curve, every society that has acquired alphabet literacy has become violently self-destructive a short time afterward. This madness has been associated with a virulent misogyny and spelled trouble for images, women’s rights, goddesses and right-brain values societies must recognize that the process of writing and reading initially reinforces left-brain values to the detriment of right-brain values” (p. 377). He goes systematically through the eras from about 3000 BC to the present, finding evidence in every society – even those as distinct as China and Greece – for the concomitant devaluation of women with the advent of alphabet and literacy. The process occurred somewhat later in China, because the Chinese kept an image culture longer than did the Hebrews, Greeks and Romans, but it has been just as virulent a process.

Shlain’s book nicely complements Robert McElvaine’s Eve’s Seed, which addressed the same question of why the female gender has been so devalued for eight millennia. McElvaine correlated the demise with the change from the gatherer-hunter era to the agrarian era and increased knowledge of biology and the pervasive use of gender-biased language to put down women. Both books provide strong evidence that: (1) the devaluing of women was NOT a part of the original human society; and (2) gender devaluing has gone on for so long that it is DEEPLY embedded, and will take major change to rectify.

Shlain sees hope in the re-emergence of the image society, e.g., photography, TV, computers, movies, and icons for signs. In his epilogue chapter, he says, “Reading and writing are such valuable tools in world culture that virtually all governments want their citizens to acquire them. Even when we become aware that literacy has a downside, no reasonable person would throw the baby out with the bathwater. Instead, we seek a renewed respect for iconic information, which, in conjunction with the ability to read, can bring our two hemispheres into greater equilibrium and allow both individuals and cultures to become more balanced - I am convinced we are entering a new Golden Age – one in which the right-hemispheric values of tolerance, caring, and respect for nature will begin to ameliorate the conditions that have prevailed for the too-long period during which left-hemispheric values were dominant” (p. 429-432).

Page S. Morahan, PhD


Although this book is written for the corporate executive, much of the advice and pearls are useful for positions in academic health centers and healthcare. Lucht has one of the clearest descriptions of the ins and outs of search firms, and suggestions for how to work best with them. A major message is that you should not expect to get more than four possible openings a year from any given search firm, simply because they ethically are not allowed: (1) for a period of up to two years to recruit employees from a firm for which they have done a search; and (2) to recruit you for two searches going on simultaneously except under special circumstances (you can see how the organizations paying them don’t want candidates to be negotiating between two positions by the same search firm!). The related message is that one should begin to build helpful relationships with search consultants in many different firms early in your career. Become known as someone who identifies useful recruits for them, and they are more likely to keep you in the front of their thinking for later opportunities. Lucht also has solid recommendations for cover letters, résumé on paper and online, using the Internet, negotiating, expanding your visibility, etc.

Page S. Morahan, PhD

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This is a MUST read if you want to learn about all the psychology and research that shows women don’t ask. The authors cover many of the erroneous beliefs that women have, and where they came from – in chapters entitled opportunity doesn’t always knock, a price higher than rubies (women ask for less), nice girls don’t ask, scaring the boys, fear of asking, low goals and safe targets, just so much and no more. What I particularly liked were the summaries at the end of the chapters, which cover actions that parents of girls, women, men, and organizational systems can take – and why it is advantageous for society to do so.

The chapter, “Nice girls don’t ask,” covered topics such as: society’s messages, the origin of norms, socialization of children, and expectations of adults. The authors conclude, “...socialization does such a thorough job of teaching little girls their proper role that by the time they reach adulthood, they believe that their gender-appropriate impulses and behaviors – such as being nurturing, friendly and selfless – are intrinsic expressions of their personalities rather than learned behaviors.”

In the chapter on “Scaring the boys” the authors suggest that women: (1) start their own businesses; (2) do everything they can to reduce their token status (recruiting other women, mentoring, building networks) if in male-dominated fields; (3) choose wisely by seeking out firms where many women already do what they want to do, the environment is ‘woman-friendly,’ and the evaluation system is well structured, and to allow the time to do plenty of research before accepting a job! They emphasize that when the percent of women reaches 35-40%, the range of behaviors allowed to women widens considerably.

To counter “Fear of asking,” the authors suggest: (1) reframe the interaction from contest to cooperation; (2) get help behind the scenes; (3) disarm the tough guys by using ‘negotiation jujitsu’ by stepping ‘to their side’ rather than directly confronting (treating with respect, listening to their arguments, acknowledging the legitimacy of their opinions, and agreeing where you can).

To increase comfort with risk taking negotiation, the authors suggest that women learn the five principles of ‘self-management’ – including: anticipating performance obstacles in negotiation and developing strategies to deal with them; practicing their responses with a partner to build their self-confidence; setting negotiation performance goals by evaluating all potential outcomes and ranking them; identifying ‘give-a-ways’ and settling on targets as well as the minimum they would accept; and monitoring their progress by tracking the negotiation goals they had attained and rewarding themselves. This process increased women’s sense of control.

Page S. Morahan, PhD


One of my favorite pastimes is wandering through a bookstore, caressing covers and pages as I unintentionally seek an addition to my overfilled bookcase. I probably own enough books to last through several retirements. I can’t say whether the title, picture, or author’s first name (correctly spelled!) first caught my eye. The description on the back cover sold the book.

Radish is a managing editor, award-winning journalist, Pulitzer Prize finalist, and nationally syndicated political and humor columnist. This book is a fictional account of eight women living in a small town in Wisconsin. They meet Thursday nights to share food, wine, and their stories – akin to an ELAM learning community. The story opens with Susan cutting her finger on a wine glass she dropped. As her friends come to her aid, Susan tells them she’s pregnant, not by her husband from whom she’s separated. During this night’s gathering, they dream of leaving – and just after midnight they head north down the highway. Woven through descriptions of the pilgrimage are flashbacks about the women’s personal histories and life-changing events. Within each chapter are news clippings and sections entitled “The Women Walker Effect,” through which we learn how this pilgrimage affects diverse people, men and women, throughout the country.

The characters’ diversity and its acceptance by themselves, their families, and strangers impressed me immensely. I wanted to walk with these women, who were liberated enough to accept Mary’s leaving early to return to her husband. Says Chris, “That’s the beauty. Each one of us has been and done what we needed to do. For Mary, that meant something totally different, which is really great.” Mary continued to support them in many ways, e.g., by leaving food and picking them up at the end of this walking retreat. On their last day, over a pot of coffee and a campfire, they engaged in a ceremony. During the pilgrimage Alice had gathered eight stones as “a touchstone for a new beginning.” As each woman, including Mary, accepted her “diploma,” Alice asked them to “say something about what [they had] done and what [she had] given away or left behind.” The epilogue describes what each woman did after returning home, both immediately and subsequently. The women continued to meet regularly (SELAM CE meetings?). Women, including the walkers’ daughters, formed women’s groups nationwide (regional meetings?), with far reaching effects.

To understand the title, you need to read the book. The explanation, a poignant story about tea, is revealed in a flashback about halfway through. The entire journey is a worthwhile, feel-good read.

Kristine M. Lohr, MD

Woman talking with man in business office, “You don’t understand, Brad. When I say, ‘I’m over you,’ I mean I’m your new boss.”

-Laugh Parade by Bunny Hoest & John Reiner

At the same time we tell girls they can do anything and be anything, we tell them, “You’d better be really thin. And you’d better be tall. And you’d better be super organized so you can do a million things at once.” We give all of these messages that undermine individuality, instead of saying, “Be the best person you can be.”

-Hillary Rodham Clinton, first lady (1993-2001) and US senator
WOMEN AGAINST LUNG CANCER

Health care professionals have formed a new organization, Women Against Lung Cancer: A Professional Alliance for Education, Advocacy, and Career Development. Two members of the Board of Directors of this new organization are ELUMs: Dr. Ellen Gritz and Dr. Jill Siegfried. Known by the acronym WALC, this non-profit group is actively recruiting new members. Membership is free and open to health care professionals, cancer patients, and members of the general public who support the WALC mission:

1. To educate the public and health care professionals about the magnitude of the lung cancer problem in women;
2. To support and encourage research in gender-related differences in the etiology, treatment, and prevention of lung cancer;
3. To encourage and mentor women health care professionals to pursue careers in lung cancer research.

Membership is welcomed from both men and women who are concerned about this problem. A membership form is available on the website.

Lung cancer now kills more women in the US than breast, ovarian, and uterine cancer combined, yet few Americans are aware of this fact. New cases of lung cancer in the US occur frequently among ex-smokers, who may be unaware they are still at risk even after decades of tobacco-free living. Most non-smokers diagnosed with lung cancer are female. There is new molecular evidence that some gene mutations may occur selectively in female tumors. Estrogens may also be involved in the development of lung cancer. The WALC website (www.4walc.org) contains references for the latest peer-reviewed scientific evidence about lung cancer in women, as well as a petition asking for more funding for lung cancer research.

WALC held its 3rd annual meeting on June 4, 2004 in New Orleans, the day prior to the American Society for Clinical Oncology annual meeting. In addition to updates on progress toward the three WALC goals, there was a session on negotiating skills in the workplace for academicians and clinicians. Dr. Claudia Henschke, who has been at the forefront of studies of lung cancer screening using spiral Computed Tomography (CT), was guest speaker. In 2005, WALC will sponsor a fellowship and a starter grant for researchers interested in the problem of lung cancer in women. In the coming year, WALC will be active in combined efforts with patient advocacy groups to increase lung cancer awareness, engage government officials in efforts to fight lung cancer, and remove the stigma that is accompanied by a diagnosis of lung cancer. Efforts to raise awareness among young adults is also a priority. All members of SELAM who have an interest in this topic are invited to join WALC. Please visit the website and sign the petition to increase federal spending for lung cancer research.

Jill M. Siegfried, PhD
ELAM 2001-02
Professor and Vice-Chairperson
Department of Pharmacology
Director, Lung Cancer Basic Science Program
University of Pittsburgh Cancer Institute
siegrie@server.pharm.pitt.edu

ELAM NEWS UPDATE

ELAM 2004-05 applications

- More than half the applicants were recommended by ELAM alumnies
- Admissions Committee included: Christine Abrass (1998-99); Sally Atherton (1998-99); Martha Elks (1995-96); Lydia Howell (1998-99); Margaret Kripke (1996-97); Alice Speer (1997-98); Anne Taylor (2001-02); Janet Bickel; Joseph Corless; Nancy Gary; Amira Gohara; Heber “Dickie” Newsome; Tony Windebank

ELAM 2004 Spring Session

- ELUMs returned as faculty: Julie Freischlag MD (ELAM 1996-97), William Stewart Halsted Professor and Chair, Department of Surgery, Johns Hopkins University SOM, was a stand-out Career Strategies panel member, along with Judith Katz EdD (ELAM Core Faculty and ELAM Alliance), David Bachrach FACMPE/FACHE (Physician Executive’s Coach and ELAM Alliance), Nancy Cook (Korn/Ferry International), and Jean Dowdall PhD (of Witt/Kieffer). Sponsored by the ELAM Alliance.
- Meet the Leaders featured FIVE ELAM DEANS (all of whom had Fellows in the 2003-04 Class): PonJola Coney MD (ELAM 1995-96), Senior Vice President for Health Affairs and Dean, School of Medicine, Meharry Medical College; Connie Drisko DDS (ELAM 2001-02), Merritt Professor of Periodontics and Dean, School of Dentistry, Medical College of Georgia; Lois Margaret Nora MD, JD (ELAM 1996-97), President and Dean, Northeastern Ohio Universities College of Medicine; Laura Schweitzer PhD (ELAM 1998-99), Associate Vice President for Health Affairs and Interim Dean,School of Medicine, University of Louisville; Sandra Willise DO (ELAM 1999-2000), Dean, College of Osteopathic Medicine, Kansas City University of Medicine and Bioscience (formerly University of Health Sciences). Sponsored by Kristine M. Lohr MD (ELAM 1997-98)
- Creating Cultural Competency, sponsored by the ELAM Class of 2003-03
- 2004 Forum sponsored by University of Texas Medical Branch at Galveston
- 2003-04 ELAM Fellows received, along with their certificate of completion, a new poster designed especially for the ELAM Program by Felicia Anggoro, a Drexel University design graduate student working part-time in the ELAM office. The poster features a photo of the Woman’s Medical College Class of 1891, from the Drexel University College of Medicine Archives and Special Collections’ Women in Medicine Collection, and a quote, “I am in the world to change the world,” (Muriel Rukeyser, from the poem Käthe Kollwitz). The poster also features the new ELAM logo (and newly trademarked), designed by ELAM Assistant Director Deidra Lyngard.

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The ELUM listserv is used well and often for:

- Numerous listserv discussions and requests for information on such topics as
  - Presidential fellowships
  - Whether academic tenure tracks exist for clinical scholars vs. physician scientists
  - Sabbatical policies and processes
  - Working group to mentor women through workplace issues, i.e., a safe place to discuss interpersonal skill development and self promotion
  - Institutional awards recognizing the accomplishments of women

- Position Announcements
  - Approximately 40 position announcements posted (and ELAM Co-directors were asked specifically for recommendations for 25 positions)
  - Note: Amanda Clark (ELAM 2001-02), Oregon Health & Science University SOM, forwards these postings to an OHSU listserv that reaches 400 women faculty!

The ELAM 2002-03 Class continues to meet via monthly teleconferences.

- The main agenda is a book discussion organized by Mary Thoesen Coleman MD, PhD, University of Louisville SOM. Books discussed include: The Answer to How is Yes by Peter Block; She Wins You Win, by Gail Evans; What Queen Esther Knew: Business Strategies from a Biblical Sage by Connie Glaser and Barbara Smalley; Tempered Radicals by Debra Meyerson; Difficult Conversations by Douglas Stone et al.

Milestones

- Get well wishes and speedy recovery to Carol Aschenbrener (appendectomy in June)
- Condolences to Nancy Gary on the loss of her brother, John J Gary DDS
- Condolences to Judith Katz on the loss of her sister, Myrna Brind

Rosalyn C. Richman, MA
Deidra Lyngard

I have made my world and it is a much better world than I ever saw outside.

-Louise Nevelson, sculptor

You’ve got to continue to grow, or you’re just like last night’s cornbread - stale and dry.

-Loretta Lynn, entertainer

ELAM Spring 2004: Reflections from the Steel Magnolias

Steel Magnolias, one of the learning communities of the 2003-2004 ELAM Class, appreciates the opportunity to share our reflections regarding the Spring ELAM session. Writing about the Spring session is appropriate, as magnolias bloom in the spring. Further, spring is a time of rebirth, and the completion of ELAM marks a transition in our lives.

Our comments focus on both the process and the content of the session. In terms of content, we had the opportunity at the SELAM program to learn about the construct of appreciative inquiry and the appreciative eye. We came to realize that it is much more effective to look at things positively first. Being appreciative leaders will help us motivate others more effectively and people will be more open to feedback. We were very impressed by the financial presentations. The financial simulation and the trends analysis presented by our peers were quite fascinating. The finance piece underscored how much we learned about finances during the course of the program. We were not anxious as we engaged in the financial simulation and had the opportunity to utilize practical skills.

Another particularly valuable session was the program on cultural competence. We particularly appreciated the segment on affirmative action. Members of our learning community were struck by how difficult it is for large groups to have a meaningful discussion about diversity. Having underrepresented minorities in the class raised the level of discussion and the forward thinking of the group. We hope that in future years, the segment on cultural competence will be expanded time-wise and broadened to include other elements of diversity including ethnicity, race, sexual orientation, religion, regional background, degree, etc. Because of the diversity of our own learning community, we were fortunate enough to be able to have tough discussions related to “white privilege” and the existence and nature of God or a higher power.

It has become increasingly apparent to all of us that effective leaders in the 21st century must be competent at fundraising. So, hearing more about ways to forge natural partnerships within and outside our institutions in order to gain funding for projects of interest, and learning how to develop and share our bold ideas with fund raisers, was very timely and quite fascinating. Each member of our learning community interviewed our local Chief Development Officer. We were impressed with the science and art of fundraising and how integral these individuals are to the successful functioning of our academic health centers.

Many members of our class are interested in pursuing more senior leadership positions, either locally or nationally. Thus, the sessions devoted to career planning were very informative. Learning how to prepare our resumes for leadership positions, becoming more comfortable with bragging rights and bully pulpits, and being informed about effective strategies for interviewing will increase our likely success in advancing our careers. Hearing what search committees and search firms focus on was extremely useful. We all appreciated Julie Freischlag, MD, telling her story about her rise to Chair of Surgery at Johns Hopkins University Medical School. We learned as much from her success, as well as from how she dealt with the myriad challenges she encountered along the way. The panel discussion with five women deans, all of whom...
are ELUMs, was wonderful. Hearing the diversity of perspectives on leadership, its joys and its challenges, was both sobering and invigorating. The information that these women imparted to us will enable us all to be more successful in our current positions, as well as our future roles.

With regards to process, all of our colleagues seemed to blossom during this session. There was wider and more balanced participation from the group. The quieter people were empowered to speak out more. The more outspoken women in the group learned to listen better. We recognized how valuable each class member’s insights are. We were honored to have had the opportunity to learn from so many talented people.

One of the most positive aspects of the final week of ELAM was the opportunity to spend more in-depth time with our deans and their representatives. We had the chance to engage in meaningful dialogue with them as people, about myriad professional and personal matters. The FORUM with Robert Kegan, PhD, facilitated our learning, in collaboration with our deans, about the change process, resistances to change, and ways to overcome these challenges. We trust that we are more comfortable addressing the personal contradictions that impede our professional development and the institutional contradictions that interfere with the greater success of our organizations.

An aspect of the process that was integral to our satisfaction with ELAM was our learning community. We were very fortunate to have developed a close-knit and supportive learning community. Over the past nine months, we came to realize how important we were to each other. We hope that future learning communities can benefit from our experience. We found that openly sharing our stories during the first session set the tone for honesty, self-disclosure, and mutual understanding within the group. As we became better acquainted, we continued to share our stories in more depth. We recommend that the ELAM leadership have a more focused discussion with next year’s class and faculty advisors about the value of sharing personal stories.

We also believe that the process of sharing stories can be useful to us as we form new teams and working communities in our institutions and professional organizations. Providing ongoing support to one another, via emails and comments on biweekly calls, enabled us to feel safe enough to share our personal and professional success and struggles and receive thoughtful, respectful, and nonjudgmental wisdom and guidance.

The input of our faculty advisor, Laura Schweitzer, PhD, was also invaluable to us. We appreciate that we were able to share the various responsibilities assigned to our learning community. We took turns planning our fun activities as well (spa trips, shopping trips, meals, and exercise activities). We were clear how important it was to be flexible, negotiate our differences, and have an appreciative eye when engaging with one another. It was refreshing to be around a group of people that we did not have to mentor, but who could mentor us. We have moved beyond just considering ourselves colleagues. We have become friends.

We recognize that we each matured professionally during the course of the fellowship. The Benchmarks process and associated plans, as well as the career consultations, helped us immensely in this regard. Those of us in the group who had more “steel” softened. Those who were more “flowery magnolias” were able to toughen up some. Our networking skills were bolstered. We look forward to continued networking with colleagues from our class, as well as the wider group of ELUMs and SELAM members.

Nadine Kaslow, PhD, ABPP
Angela Caliendo, MD, PhD
Carole M. Hanes, DMD
Sandra Harris-Hooker, PhD
Susan M. Hutson, PhD
Owen Phillips, MD
Etta D. Pisano, MD, FACR
Valerie Montgomery Rice, MD

SAVE THE DATES!

SELAM International CE Meeting, November 6, 2004, at the Annual AAMC Meeting, Boston MA. Carol Scott, MD, MSEd, FACEP (President, The Medical Education Group; author of Life Lessons from the ER: 25 Stories to Resuscitate your Personal and Professional Spirit) will speak on “Forget Balance! Discover Your BestStress™ Zone.” Followed by SELAM International Reception at which the 2004 SELAM Award for Excellence will be given. For further information, contact Tori Odhner, tori@drexel.edu.

7th Annual SELAM Spring CE Meeting, Philadelphia, PA, April 15–17, 2005. Contact Victoria C. Odhner, SELAM Administrator, tori@drexel.edu.

2nd Annual Women in Medicine Regional Leadership Conference, Peabody Hotel, Little Rock, AR, April 15–17, 2005. Contact Glenda J. Cooper, Director, Faculty Affairs, cooperglendaj@uams.edu for further information.

American Medical Women’s Association announces the Woman to Woman Mentoring Program “offering future female physicians and physicians in training the opportunity to connect online with a wide group of experience female mentors and colleagues on issues important to them.” The web-based initiative begins online Fall 2004 at woman2womanmentoring.com. To be considered as a virtual mentor, download the application at http://www.amwa-doc.org/ and fax to 973-635-9419 or contact Jan.madura@cstratinc.com for further information.

Quotable

It is more rewarding to watch money change the world than watch it accumulate.

- Gloria Steinem, political activist, writer, and editor

A strong positive attitude will create more miracles than any wonder drug.

- Patricia Neal, stage and film actor

Integrate what you believe in every single area of your life. Take your heart to work and ask the most and best of everybody else, too.

- Meryl Streep, Academy Award-winning actor

Nothing in life is to be feared. It is only to be understood.

- Marie Curie, physicist and first woman to win a Nobel Prize
PHOTO GALLERY

ADEA MEETING

ELAM alumnæ/SELAM members were well represented at the AAMC’s Faculty Affairs Professional Development Conference (Jan 2004, Florida). Standing L to R: Ann Otto, Lois Geist, Luanne Thorndyke, Page Morahan, Katherine Loveland, Meridith Marks, and Rose Goldstein. Seated L to R: Laura Schweitzer, Susan Hutson, Karen Sanders, and Carolyn Mazure.

The SELAM reception at the American Dental Education Association (ADEA) annual meeting in Seattle (March 2004) was sponsored by 6 dental schools and Phyllis Beemsterboer. The sponsors were recognized at the reception. L to R: Drs. Jerold Goldberg (Case Western), Eric Hovland (Louisiana State University, and ADEA President-elect), Terri Dolan (University of Florida), Phyllis Beemsterboer (representing herself and Oregon Health & Science University Dean Jack Clinton), John Williams (University of Louisville), and Connie Drisko (Medical College of Georgia).

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SELAM President-elect (now President) Karen West (R) presents the SELAM 2003 Award for Excellence to Sharon Turner (SELAM Past President) at the 2004 ADEA annual meeting in Seattle. Sharon is the first woman to become Dean at more than one dental school (first Oregon Health & Science University, now University of Kentucky). SELAM’s other 2003 awardee, presented at the AAMC annual meeting in November 2003, was Nancy Gary, founding board member of SELAM and the first woman to become Dean at more than one medical school (Albany Medical College and Uniformed Services of the Health Sciences).

While in Seattle for the ADEA meeting, Roz Richman also had a “reunion” with 4 ELUMs at the University of Washington. L to R: Roz, Soo Borson, Lee Nelson, Lorrie Langdale, and Ginny Broudy.
Karen West (R), incoming SELAM President, presents a thank-you gift to Vivian Reznik, outgoing SELAM President, at the Board meeting.


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Toni Ganzel (2003-04 Fellow) models her new scarf, purchased at the SELAM Auction.

L to R: Karen Gale, Karen Novielli, Valarie Clark (AAMC), and Susan Hutson (Gale and Hutson are 2003-04 Fellows).
REMEMBER!
• To let us hear about anything you want to share with all.
• To send in your nomination & questions for the next SELAM Mentor.
• To send in book reviews for SELAM News. (You are reading in your spare time, aren’t you?)
• To write or send in a topic for Issues in the Workplace.
• To recruit a colleague (or more – unofficial contest to get the most members!) to join SELAM Intl. Prospective members do not have to be ELAMs or ELUMs.
• To nominate a woman for the ELAM program. Send names to Rosalyn Richman.
• Due date for next newsletter is December 1, 2004.

Editor, Kristine M. Lohr, MD
Room A318, University of Tennessee Health Science Center, 956 Court, Memphis TN 38163, klohr@utmem.edu
Publications Committee:
Christine K. Abrass, MD, Chair
cabrass@u.washington.edu
Theresa F. Lura, MD
lura@etsu.edu
Mary E. Martin, DDS, MEd
mary-martin@ouhsc.edu
Barbara J. McLaughlin, PhD
bjmcla01@gwise.louisville.edu
Rosalyn C. Richman, MA
Rosalyn.Richman@drexel.edu
Robert E. Sonnino, MD
sonnino.roberta@mccg.org

Patricia A. Thomas, MD
PTHOMAS@kumc.edu
Sharon Turner, DDS, JD
spturner2@email.uky.edu

Corporate address & agent:
SELAM International, c/o Sara L. Rusch, MD, FACP, Associate Professor of Clinical Medicine, Chair, Department of Medicine/Pediatrics, University of Illinois College of Medicine - Peoria, 530 North East Glen Oak Avenue, Room 5694, Peoria IL 61637

SELAM MEMBERSHIP INFORMATION
SELAM International is committed to the advancement and promotion of women to executive positions in academic health professions through programs that enhance professional development and provide networking and mentoring opportunities.
Active Member: $250 initiation fee & $50 annual dues
Affiliate Member: $75 initiation fee & $50 annual dues
Institutional Member: $1,500 initiation fee & $300 annually thereafter (for up to six individuals)

For membership information, contact:
Victoria C. Odhner
SELAM Administrator
Drexel University College of Medicine
The Gatehouse, 3300 Henry Avenue
Philadelphia, PA 19129-1191
T. (215) 842-6473  F. (215) 842-1041
E-Mail: tori@drexel.edu
Website: www.selaminternational.org

http://www.selaminternational.org
Kristine M. Lohr, MD
Room A318
956 Court Avenue
Memphis, TN 38163