Clipp Speer Ann Brown, MD MHS 4/25/22

# Title: Navigating a Career in Academic Medicine: Reflections on Creating Your Path TRANSCRIPT

# **Learning Objectives**

At the end of this session, participants will be able to

- Identify career development as a proactive and self-directed process.
- Articulate the connection between your internal authenticity compass and your career path.
- Define personal leadership skills



Good Afternoon, and thank you to the PWIM team, and Danni Zipkin for this treasured invitation to give the annual Clipp-Speer lecture. And special gratitude to Laura Svetkey who has been an advisor, mentor, confidant and colleague for nearly my entire career.

It is an enormous privilege to honor these two amazing women. I met Dr. Jody Clipp early in my career when I was considering ideas for my K grant. What I remember is her outsized generosity. Though I had met her only briefly before, by the time I walked into her office, she had already pulled several articles for me based on the short description of my ideas I'd given her. She radiated enthusiasm that filled me with a sense of possibility and confidence. I did not know why she was being so nice to me, but it was powerful. It is an example of the truth in Maya Angelou's observation:

"I have learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel" -- Maya Angelou

Jody Clipp and Marcy Speer both created environments that made it more possible for others to succeed and I am honored to be able to remember them by talking about something I know they would value: building a career that you love and can love for a long time.

This talk is about career development, and is dedicated to those of you who are early in your career and have many years ahead. As I close the books on 3 decades in academic medicine, and 18 years working on behalf of faculty in the Dean's Office of this School of Medicine, I am reflecting on what I've learned. I will try to translate that into something of value to you.

To help me with this, imagine that I'm speaking to you from a time that is 30 years into your future. I'm speaking to you from the 2050s when you are where I am now, in the privileged – and sometimes bewildering- position of looking back on many decades of work.

Or for those who have already been here for a while, consider yourself at a future inflection point, when you are considering retirement, or an encore career.

As you look around in this future state, and can see not just what you did last year, but what decades of effort have created, what do you see?

What has been meaningful to you? What fed your soul and sustained you through the rough spots? And how did your choices affect your partner, your family, and your wellbeing?

I think this is a fair question because academic medicine offers the opportunity to build a career that reflects who we are, expresses our deepest values, and allows us to have impact in the way we wish to have impact.

And my message today is about being intentional about career development, even as you are juggling the challenges of the moment.

When I say career development, I mean not only growing your subject matter expertise, but also engaging in a parallel curriculum around HOW to navigate your job with intelligent awareness of your own skills and values, as well as the rules of the road.

It is the curriculum of how to build your career, harness your strengths, engage the energy of others in collaboration, read the culture, interpret signals you get from the environment, navigate conflict, and negotiate for what you want.

This is the work of your own career development.

The question of how to approach career development is typically answered with a nod to the importance of mentoring. In medicine, we work on what is essentially an apprenticeship model, where we learn from people with more experience.

The traditional mentoring model relies on individual mentorship. Our patterns around this are evolving, but in this model, you find a person senior to you who will invest in you, hold your best interest, and share the unwritten rules of the road.

This is most clearly operational in career pathways where the essential stepping stones are pretty well laid out. For example, in research-intensive careers those stepping stones are grants, publications, national contributions and recognition and the creation of new knowledge. The ideal mentor has travelled a similar path and has an interest in guiding you. There is mutual benefit in the relationship.

This is oversimplified but illustrates the concept, and describes a "mammalian model" of mentoring where survival depends on deep individual investment.

As I was starting out, I was interested in that research pathway, but not certain that that is how I would be successful. I loved clinical medicine, and was very compelled by my interactions with patients, and the chance to make a difference in their lives, and the chance to become truly expert in my clinical area.

So I was not certain if and how mentorship would work for my career path, especially since I was not clear on what it would be exactly.

Maybe some of you are in the same boat.

I viewed my career goals as being unusual. I cared a lot about patient care, and was curious about research (and did complete a K23 award with tremendous research mentoring, and completed a Master's degree in clinical research), but I was also distracted by what seemed to be a conundrum. Why were there so few women, especially in senior and leadership roles?

And for me, this translated into an interest in women's career development. It seemed to me that academic careers were built on a model that was at the very least awkward for many women. That model seemed to arise from a somewhat outdated and at least strained model of social norms, in which the full time labor of a household manager was needed to enable the faculty member to have unlimited availability to work. This ideal worker could work long hours in the lab, in the hospital, or absorbing the rules of the road from their mentor who was also there at all hours. They could travel to meetings unencumbered, without having to consider home responsibilities like child care. These would be managed through the unpaid labor of a household/life engineer who would shop for groceries, remember birthdays, rear children and care for elders.

So economically speaking, the faculty salary paid for the labor to two people: the faculty member producing work, and the person managing everything else. And that model was the essential motor for academic medicine as I saw it. That's the model that made a career work smoothly and I wasn't sure how that could work well for many women.

That was my conundrum.

So I became curious about how women – or any caregiver- could make it work. How could that awkward fit still allow a flourishing career? I became interested what mentoring looked like for that person.

There is another model of mentorship that could be called the "guppy model" in which many are given the chance to start a career, to recruit the support they could, and time would tell who makes it.

In my own lack of clarity early on, I felt more like a guppy. And I saw that many others, including other women, were in the same boat. I began to think about ways the institution could support mentoring for others like me.

It seemed that a step forward would be to add to the traditional model of mentoring by making information about how to navigate an academic career more widely available to faculty.

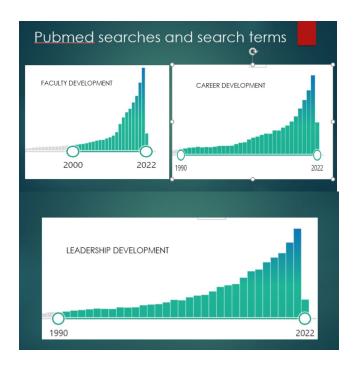
Instead of relying solely on a single mentoring relationship to provide guidance, what if we could create a way to make important information about career advancement and "secret handshakes" available to everyone?

This also seemed like an important way to raise the level of support for everyone no matter if they found that one perfect mentor or not. If the traditional mentoring paradigm assumes some degree of similarity, a connection based on commonalities, then more broadly available information about how to advance in a career might be a way of supporting people with different ideas and backgrounds and making it more possible for them to advance too.

So back in the early 2000s Anna Brodeur, my work partner of 25 years, and I developed the Professional Development Seminar Series. I was the Associate Dean for Women in Medicine and Science at that point.

This was a series that was open to everyone, and included seminars on skills research such as Writing Winning Grants, the Gopen Writing Course, giving effective presentations, responding to a grant review. And we included programs on personal leadership like the Myers Briggs Type Indicator (MBTI), conflict management, negotiation and others.

To illustrate the concept that this was new at the time, let me show you some pubmed searches that show the growth of publications using these terms in this time period.



So these concepts weren't terribly common or at least published about back then.

Over time, our research support resources have grown tremendously, and now information about research careers is incredibly robust and widely available through dedicated offices such as The Duke Office of Research Initiatives, with Research Onboarding led by Rebecca Brouwer, Duke Office of Clinical Research (DOCR) with Research Wednesdays, the Duke ASIST (Advancing Scientific Integrity, Services and Training), and the Office of Physician Scientist Development (OPSD) led by Rasheed Gbadegesin to name a few school level resources.

The Research Mentor Training Program is another incredible resource run by Dr. Cathleen Colon-Emeric, Associate Dean for Faculty Mentoring in my office, as well as Dr. Gentzon Hall. And I'm very proud of how this program is providing training to elevate our mentoring skills. The mentor training program uses a case based curriculum designed by the National Research Mentor Network. A core element of the curriculum is mentoring across differences. And this is very important work as it will lift up inclusive practices in our model of traditional mentorship.

And in the Department of Medicine, a robust FACULTY DEVELOPMENT ACADEMY was established in 2011 under the leadership of Mary Klotman, Laura Svetkey and others, and has grown to offer support tailored to your career track.

And over time, with the growth of other widely accessible research career resources, my office has been able to focus on personal leadership. The focus here is on self-awareness, and self-management skills.

We approach this through periodic seminars – again to demystify the environment-including these:

#### **INDIVIDUAL SEMINARS**

Kerfuffles Conflicts and Misunderstandings, Strategies for Engagement, Ann Brown Financial Bootcamp, Scott Gibson Emotional Intelligence, Myers Briggs Type Indicator, Hile Rutledge Bystander/Upstander Intervention, Ada Gregory

And we offer cohort based fellowships that run over a good part of the year, and focus on career navigation and leadership skills.

In addition to building the participant's own career skills, an overarching goal with this work is to develop deep leadership capacity within the institution so that all graduates can contribute to a productive and healthy work environment in their own units.

Our office, under the guidance of myself and Cary Ward with Jessica Womack, Fiona Johann, Kyle Nunn and Dede Crosmer, offers these programs with the philosophy that leaders are not born, they are made. We start with the premise that leadership is not a position, it is a set of behaviors. It is a bundle of skills to be learned.

The personal leadership curriculum looks generally like this

- Self-awareness through tools such as EQ, MBTI,
- Conflict management
- Authentic Leadership Vision
- 360 with coaching
- Interviewing leaders
- Leading through change
- Proactive Career Planning
- Negotiation
- Being an inclusive leader, understanding unconscious bias
- Bystander intervention/Responding to incivility

SoM Leadership Courses					
Course	Year Started	Participants /year	Total Participants	Demographics	Target Audience
LEADER	2010	30-50	473	50% Female 14% <u>URIM</u>	Early Career Researchers
DCLP	2010	25	146		Mid-Career Clinicians
ALICE	2016	18	97	100% Female 8% <u>URIM</u>	Mid Career Women Leaders
ADVANCE- UP	2018	14	54	100% <u>URIM</u>	<u>URIM</u> faculty

The post class evaluations are generally very positive, with virtually all scores being in the range of 4.5-5 out of 5, and comments reflecting gratitude.

A common theme in all of the comments was the value of going through the course with colleagues, and developing a network that could continue beyond the fellowship.

The best feedback I get is when someone comes to me saying that they tried something new that they learned in a program, and that it made a difference. One faculty member told me that she started sitting at the table instead of along the wall of a meeting room, and she found that her ideas got a lot more air time.

Regardless of whether you participate in a fellowship like this, each person in this audience, no matter what career stage or role is a leader. Stepping away from the hierarchical implications of the word leadership, and considering the function, you are all leaders. You are all influencers. You are seeking to make things happen, and to elevate your own contributions to the world.

With this framework, each of us has the chance to be a leader by cultivating a healthy environment where all feel a sense of belonging. It is us who create that environment in how we treat each other, and how we deal with differences and how we choose to address challenges.

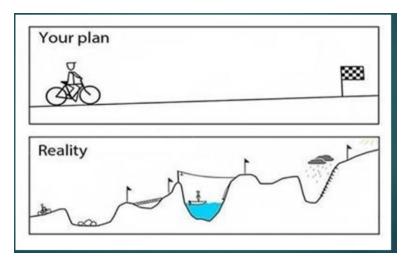
So if you accept the premise that we are all leaders, how do you embody that? My answer is that it starts with the work of self-awareness. Becoming aware of your strengths and areas for development. Then you can look outward to support other people and influence the institution.

By showing up here today, you are investing in your own professional development, and thus already doing this.

To build on that, I want to share some themes that have emerged as clear and strong from a long career in faculty development.

## PAY ATTENTION TO WHAT GIVES YOU ENERGY

You will be given opportunities to do many different kinds of things in your career. You will have the chance to teach, mentor, lecture, serve on committees and in administrative roles,



participate in research, and collaborate on fascinating projects. You will want to have some filter through which you pass these opportunities so that you capture the ones that are most important to you.

There will be ups and downs, and knowing what in your work energizes you, and cultivating those things, will you keep going. So note what gives you energy, even joy, and also what drains you.

# **CULTIVATE AND VALUE YOUR TEAM.**

Part of that sustaining energy comes from the people around you, so cultivate your team.

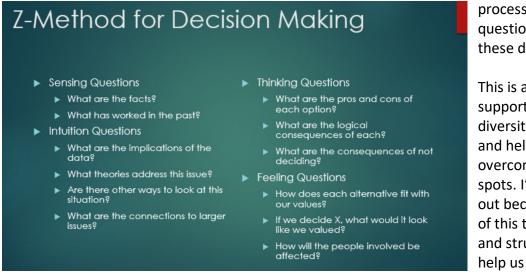
For me, my staff has been a team that has been a bottomless source of energy, wisdom and guidance. I have had the incredible good fortune to have worked with a highly functioning team for a long time. Anna Brodeur and I grew up together professionally and have partnered for 25 to create our team. Dede Crosmer and Jessica Womack have been with me for 14 years and bring incredible skill in innovation and organization. Kyle Nunn and Fiona Johan are more recent but have quickly become incredible and talented partners.

This is the group I work with most often. This is my team. For you it might be your lab, your research group or your clinical care team.

One reason my team is critical to me is that it makes me better. As an example of this, we make decisions as a group, and benefit from the different viewpoints that each person brings. We learned as a team early on to use this diversity of thought to make better, more durable decisions.

One structure that helps us make good decisions is a process we learned from the MBTI trainings we put on. I'm going to describe it to you: The Z method or all functions decision making. Here "functions" refers to preferences as described in the MBTI. You don't need to know your own MBTI to do this, or even much about the instrument. Here's how it works.

When you have a decision to make, and you are discussing it as a group, ensure that the vetting



process includes questions that reflect these domains.

This is a structure that supports thought diversity in our work, and helps us overcome our blind spots. I'm pointing it out because a subtext of this talk is that skills and structures that help us do the right

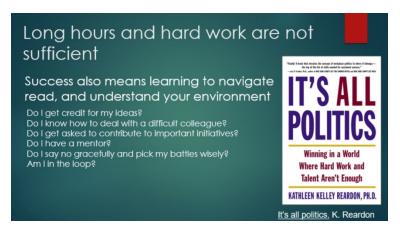
thing, well, help us do the right thing. Structures take the work out of remembering to do the right thing.

## HARD WORK and CONTENT EXPERTISE ARE ESSENTIAL BUT NOT ENOUGH

Learning this lesson can be a bitter pill to swallow. Maybe this has happened to you. You work very hard on something, maybe you even get a high honor like being invited to give a talk at a national meeting, or an award.

But then something happens and you realize that your leadership is unaware of all this goodness. Your own people may be unaware of a special accomplishment or area of expertise that you have developed.

And maybe you take that to mean that you are invisible and not valued, and go down a rabbit hole of despair.



That can happen very easily in a setting where the pace is fast and leaders have too much to manage.

# LEARN TO GET COMFORTABLE WITH THE ART OF SELF PROMOTION

So make it easier for them and for you by making a habit of communicating about your work and your good news. When you have something wonderful happen, send your leadership a brief note to let them know. Believe me, in a sea of bad-news emails, this information will be uplifting, and will give the Chief something to brag to the Chair about!

As a corollary, treat your annual review with some thoughtfulness. Make it meaningful, and a place to share not only your accomplishments, but your goals. Include ideas for how your leadership can support you. Maybe you'd like to be considered for a committee assignment, or to contribute to a new initiative. Bring that up.

We have a template for the annual review process on the Office for Faculty Website. This can provide some guidance for preparing for these reviews.

### PLAY YOUR HIGHLIGHT REEL

Along these lines, build the habit of acknowledging your successes to yourself. We pay too much attention to our blooper reels, and not enough to our highlights.

It's easy to come home at the end of the day wearing the hair shirt of self-recrimination about what went wrong. And when we do revisit our days, many of have a bias toward recalling the negative. This bias elevates our self-critical voice, and minimizes the vast majority of things that went well, and were even very positive.

Notice if you have that negativity bias. I think we all do. At the end of the day, spend some time reviewing your highlight reels.



This is not to say that you should ignore your mistakes, but it is encouragement to also give attention to the things you did right.

My colleague Neera Skurky encouraged me to do this with this notepad. And I offer it with a reference to Dr. Barbara Fredrickson's work if you wish to learn more about the science of positive psychology. This loops back to thinking about what gives you energy.

#### KNOW THE evolving RULES FOR ADVANCMENT

Part of the navigating the institution is knowing the rules for advancement. As part of my office's goal of keeping advancement criteria relevant, we have added information on "non traditional" scholarship, and how that can be "counted" for your promotion. Under the leadership of Dr. Jimmy Tcheng Assistant Dean for Faculty Appointments in my office, we have developed documents describing how to show your scholarship, and to demonstrate its impact in the areas of Advocacy, Digital Scholarship, Team Science and most recently, in partnership with Kevin Thomas and the FARE committee, Justice, Equity, Diversity, Anti-Racism and Inclusion (JEDAI) (still in draft form but coming soon). If you are doing this work, or would consider it if you knew it could count toward your promotion, check it out.

This work- to codify what we value into promotion criteria- is another example of how structures can support an environment of equity.

#### COACHING

Coaching is emerging in our community and in academic medicine more broadly, and I think this is a powerful tool.

Some of the housestaff and faculty in this audience are part of the Residency Professional Development Coaching Program, led by Dr. Karen Steinhauser. So you have some familiarity with coaching.

Coaching is a strategy that starts with the assumption that the wisdom to solve a problem is within the person being coached. The coaching conversation is directed at pulling out the challenge, and through skillful and nonjudgmental questions, evoking awareness that informs their way forward. It emphasizes recognizing and deploying the strengths of the coachee. It calls for the very difficult coaching skill of NOT giving advice. The coach is more of a midwife for

the coachee's insight, than an advisor.



Thinking about how this can play out for career development, we can become peer coaches for each other, to help each other sort out what is most compelling and important. And we can use this skill to help others grow, and understand themselves.

Michael Bungay Stanier writes about

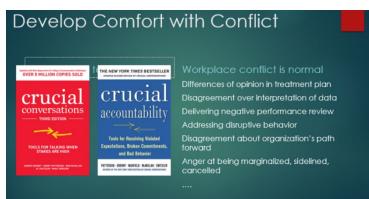
this and has published a book called "The Coaching Habit". Here are his top questions for a coaching conversation. I offer it to you with the encouragement to practice this with each other. To ask these questions and to listen with the intent to let the other person explore.

1. What's on your mind?

- 2. And what else?
- 3. What is the real challenge here for you?
- 4. What do you want?
- 5. How can I help?
- 6. If you are saying yes to this, what are you saying no to?
- 7. What as most useful to you (in this conversation)?

## DEVELOP SOME COMFORT WITH CONFLICT

Conflict is a normal part of any system and our environment is one where conflict is expected. We have high stakes, strong commitment and strong emotions about our work, and we certainly have differences of opinion. What matters is how we manage conflict. I lead a workshop called Kerfuffles, Conflicts and Misunderstandings that delves into this in detail. Preparing it has taught me a lot about conflict and how to approach it with respect, intention,



curiosity, and generally to see this body of work as something that we can get better at. And through that work, to strengthen our sense of community and belonging.

Over time, my job has come to include more conflict management. Often this is in the realm of distressed faculty, and unprofessional conduct. So I want to talk a bit more about this.

#### PROFESSIONALISM AND RESTORTATIVE JUSTICE

We are held together by our values. In the health system, as you know, our values are Caring for our patients, their loved ones and each other. We are guided by the Duke Code of Conduct and in the SoM by the Statement on Faculty professionalism. These documents attempt to balance a goal of consistent observance of those values, with the imperative for innovation, and the significant independence of the faculty role. That can create tension and boundary pushing.

Part of upholding our values is holding each other accountable for our actions. In 2011, then Dean Nancy Andrews asked me to launch a SoM professionalism initiative. Professionalism was not new or invented in 2011, but we did take some steps to codify our expectations. This led to the Statement on Faculty Professionalism, and strengthening of structures for managing concerns about unprofessional behavior.

This is important work because it undergirds our commitment to a culture that is healthy, where conflicts are addressed rather than swept under the rug. And where differences are expected and honored. This is a work in progress. And we are getting better at accountability here.

We are developing more systems and strategies to address unprofessional behavior. You are all aware of the PACT program run by Dr. Bill Richardson, Dr. Diana McNeill and Cindy Gordon. This gives us a framework to provide peer feedback about conduct challenges. The beauty of the PACT program approach is that it upholds the belief that, though we are all capable of acting out, we are also capable of insight. That when we are made aware that something we've done is harmful to someone else, we can take steps to change. The vast majority of reports made to the PACT program about a faulty member are singles. One peer messenger visit is enough, and the problem does not recur. Insight, or at least self-correction occurs.

My office convenes a group of Vice Chairs who are responsible for faculty affairs in their departments. We are working together to develop skills around the difficult conflicts that can arise between faculty, between staff and faculty and between trainees and faculty. This group, the Faculty Affairs Steering Committee (FAST) is strengthening our collective ability to address difficult or distressed behavior in a way that gives an opportunity for restoration. But also draws a line when needed.

Notably, building this learning it is a way to address perceptions, raised by our staff, that faculty can get away with anything. It's no use complaining because nothing happens. Creating an inclusive community means addressing these concerns.

This is important work, and nuanced. And we have more work to do. And it is also true that, in some circumstances, reconciliation may not be possible and in those cases we need formal processes to investigate and to hold people accountable.

This is generally a good thing as it is a process that values justice. But it is not perfect.

The problem is that, in my experience, no one feels better after the process. Participating in a formal investigation even with the most skillful process is sometimes traumatic.

In fact, the parties can end up feeling hurt by the experience. Establishing accountability does not remove the harm. The person making the complaint may get justice, but they are still injured. Often they have mixed feelings after making the complaint.

The accused, if found accountable, may be punished. And the community is often left unsettled. While we have accomplished accountability, we are left with broken pieces.

To be clear, this is not unique to our institution and I am not criticizing our institutional offices. It is a manifestation of our justice system. This is how it works in this country. We determine responsibility and respond with punishment.



Because of the pain that many experience as part of this process, I have recently gotten interested in alternative ways to

resolve disputes. So when I saw a call for applications to participate in a pilot program called Restorative Justice in Academic Medicine hosted by the AAMC, I responded. In early 2020, six of us were able to participate in the virtual training, where we learned a different concept of justice, one that is used in other communities, including some Native American communities and others. This is one in which, instead of focusing on blame, we focus on harm. We ask who was harmed and what can be done to

restore relationships and to repair harm and restore community. Instead of focusing on casting out the bad actor, it focuses on acceptance of responsibility, and rebuilding trust so that the community can stay whole.

These are the RJ questions and they can transform how we think about conflict, and how we think about accountability. It asks us to value who we are as a community. It values the perspectives of the accused, the accuser and the people in the orbit of the conflict.

What if we were able to do that instead of focusing so much on blame and punishment? I don't know the answer, but I think it is a good question. And asking this question is where I am at the end of my 3 decades.

#### CONCLUSIONS

So as I reflect on my career so far, I see forward movement. In the early 1990s when I started, faculty development was a peripheral concept, and not one that permeated the environment.

Now decades later, career development is a thing, and it is broadly accessible, not limited to the lucky few who find a dedicated mentor. Traditional mentoring is supplemented by programs that unlock the secrets for success.

Professionalism as a durable commitment to the culture emerged or at least became more visible a decade ago. Now it is a significant focus, with growing structure, for my office and for other leaders in the school.

Going from being an unfamiliar concept to a state in which that concept is integrated into daily discourse is a long process. For me it has been the work of a career. Culture change takes time. Progress is measured in decades.

That seems relevant today as we think about the culture work we are doing now. Certainly there are accelerators, events that speed the process. The COVID pandemic has taught us that sometimes, the way we live, work and relate can change suddenly. The uplifted awareness of how deep racism runs in our institutions and consciousness has created new urgency for justice. And the vote to integrate our clinical practice or not will surely bring about some immediate changes.

But what I want to say is that you have a long timeframe to make your impact. The tyranny of the immediate is upon us all, so it takes fortitude to step out from under that to consider our larger purpose.

What will you be saying about your career in 30 years? What will you do with those 30 years? Or whatever time remains? 30 years is a lot of time to accomplish big things. I want you to know that now so you can make big plans.

#### THE WAY FORWARD

Looking ahead, I see many emerging initiatives that keep the work that has been so important to me moving forward. I see structures being created that will carry these ideas forward. These are things that lift up our commitment to a healthy work environment.

- Faculty development resources are widely available. And I see growing commitment to build leadership skills in our titled leaders, and recognition of their role in setting the tone of the work environment.
- NEW OMBUDS OFFICE- the ombuds function, so skillfully embodied by Dr. Svetkey for faculty in the SoM, will now be elevated to a dedicated central University office.
- COACHING Awareness of coaching as a strategy to supplement mentoring is growing. While executive coaching is impractical for many of us, we are learning from Dr. Karen Steinhauser and others how to provide a coaching approach for each other.
- RECOGNITION OF THE CULTURE AND OUR PEOPLE AS CRITICAL TO OUR EXCELLENCE. Establishing the new Vice Dean for DEI, and the selection of our own Kevin Thomas to lead it elevates diversity equity and inclusion to the highest levels.
- STRUCTURAL CHANGES. We are re-looking at our APT processes and standards, and asking how they can be changed to reflect modern academic life. We are managing difficult behavioral challenges with more intention and structure.

These are all developments that I believe reflect the spirit of the Program for Women in Internal Medicine. They certainly reflect the effort and values of all of us in the Office for Faculty. Thank you for the chance to share these thoughts with you. And thank you to my team for their long, consistent and creative contributions to making Duke an even better place to learn, work and grow.