

# Sponsorship: A Path to the Academic Medicine C-suite for Women Faculty?

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## Abstract

Despite increases in the percentages of women medical school graduates and faculty over the past decade, women physicians and scientists remain underrepresented in academic medicine's highest-level executive positions, known as the "C-suite." The challenges of today and the future require novel approaches and solutions that depend on having diverse leaders. Such diversity has been widely shown to be critical to creating initiatives and solving complex problems such as those facing academic

medicine and science. However, neither formal mentoring programs focused on individual career development nor executive coaching programs focused on individual job performance have led to substantial increases in the proportion of women in academic medicine's top leadership positions.

Faced with a similar dilemma, the corporate world has initiated sponsorship programs designed to accelerate the careers of women as

leaders. Sponsors differ from mentors and coaches in one key area: They have the position and power to advocate publicly for the advancement of nascent talent, including women, in the organization. Although academic medicine differs from the corporate world, the strong sponsorship programs that have advanced women into corporations' upper levels of leadership can serve as models for sponsorship programs to launch new leaders in academic medicine.

Over the past decade, the proportions of women among medical school graduates and medical school faculty have increased to 48% and 37%, respectively.<sup>1</sup> However, the proportion of women in the academic medicine "C-suite"—a slang term for the highest-level executives in an organization (e.g., chief executive officer, chief financial officer)—has remained stubbornly and shockingly low at 12% for the past six years.<sup>1</sup> Similarly, only 12% (8 of 66) National Cancer Institute–designated cancer centers are currently led by women.<sup>2</sup> Women are better represented in midlevel administrative positions in the dean's offices of medical schools, where they make up 44% of

assistant, 37% of associate, and 32% of senior associate deans.<sup>1</sup> If these roles are stepping stones to the position of dean, we should expect to see an increase in the number of women deans in the near future.

However, according to data from the corporate world, an influx of women deans or cancer center directors from the academic equivalent of middle management is unlikely. Although the yearlong Executive Leadership in Academic Medicine program that has as its goal the development of women leaders—specifically as deans in the fields of academic medicine, dentistry, and public health—has had a significant impact on the representation of women in dean-level positions, it has had less impact on full dean positions.<sup>3</sup> Academic medicine is not alone on this issue. Women are underrepresented at the leadership table in almost every realm, from Fortune 500 companies to Congress to the biotech industry.<sup>4</sup> What is most disconcerting is that this underrepresentation has been resistant to career development, mentoring, and coaching efforts as well as extensive research and publications on the topic.<sup>5–7</sup> Women are not much better off in this respect than they were a decade ago.

including conflicting life, family, and work priorities; lack of self-efficacy and confidence; feelings of marginalization and isolation; insufficient mentoring; and failure to build relationship capital. Although interventions in academic medicine (e.g., professional, faculty, or leadership development programs, formal mentoring programs) have helped to some extent, they have not had a major impact. So perhaps it is time for academic medicine to consider a concept that appears to be working in the corporate world—sponsorship. Many corporations have initiated sponsorship programs that are having a positive effect on the gender composition in the C-suite.<sup>13,14</sup>

## What Is Sponsorship?

*Sponsorship* is the public support by a powerful, influential person for the advancement and promotion of an individual within whom he or she sees untapped or unappreciated leadership talent or potential.<sup>13,15–17</sup> This sponsor has the position and the power to advocate for unrecognized talent at the leadership table, where discussions occur regarding advancement to high-profile, critical positions. Sponsorship can effectively catapult nascent talent from unknown to rising-star status. Given that there are few, if any, women at the leadership table, the female talent in an organization is not likely to be recognized and discussed and, thus, is likely to remain untapped.

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Sponsors, particularly those who are men, can fill this void by acting as advocates for women; they can raise women's visibility and highlight the value of their contributions in these discussions.<sup>13,15-17</sup>

Sponsorship is not a promise, a career plan, or a block on the organization chart. It is a public commitment of a leader to support the advancement of a talented woman or man. Sponsors do not appoint their protégés to positions; rather, they spotlight them and open doors for them, enhancing their credibility and recognition within an organization. Sponsorship is not about advancing unqualified individuals; rather, it is about identifying "high potentials,"<sup>13</sup> that is, high-performing individuals who are unrecognized by leadership, many of whom are likely to be women.<sup>18</sup>

### **Sponsor Versus Mentor: What Is The Difference?**

Although mentors may act as sponsors, mentors' and sponsors' roles and positions are very different. First and foremost, sponsors must be highly placed in an organization and have significant influence on decisions regarding advancement. In contrast, mentors can be at any level in the organization. The ability to mentor does not depend on position or power; selection as a mentor is likely to be related to scientific or professional credibility and reputation. In academic medicine, assistant professors can be mentors but, by virtue of their position, are unlikely to be sponsors. Second, whereas sponsors act as advocates, mentors usually work behind the scenes as counselors, focusing on professional advancement and development of content-related acumen. Mentors do not necessarily assume the responsibility of advocacy.

Women do not lack mentors, but mentoring programs have not been particularly effective as a means of bringing women into the C-suite in the corporate world or academic medicine.<sup>16,19</sup> One study of high-potential graduates from top business schools showed that women had *more* mentors than men, yet they lagged behind men in all career advancement metrics.<sup>20</sup> The major difference between the two groups was that the women's mentors were not as highly placed as the men's

and were therefore less influential in their organizations. Most telling, the men's mentors were endorsing their mentees publicly—in other words, they were acting as sponsors. Women were not so fortunate; fewer reported having a sponsor.

A review<sup>6</sup> of 42 studies that assessed the influence of mentoring on women faculty in academic medicine reported conclusions similar to those of studies in the business literature: Mentoring was influential in all realms of career and personal development. However, it is clear from the current underrepresentation of women as deans of medical schools and CEOs of corporations that mentoring, though necessary, is not sufficient to help women reach the pinnacle of leadership in either the corporate or academic world. According to Ibarra and Kirby,<sup>21</sup> women continue to be "over-mentored (but under-sponsored)."

### **Coaches Versus Sponsors**

Executive coaches have become popular in academic medicine.<sup>22-24</sup> Coaching begins where mentoring ends and, like mentoring, is a private, one-on-one relationship. Unlike mentoring, which is focused on individual career development, coaching is focused on enhancing job performance. A coach listens, observes, and offers objective recommendations to improve the performance both of new leaders and individuals with leadership potential by helping them develop key leadership skills, such as self-awareness and effective communication. Coaching can and does help women faculty acquire the skills and confidence needed to advance successfully, but the paucity of women leaders in academic medicine suggests that, even with leadership training, women are not being tapped for executive positions. Coaches, like mentors, do not have the power and position to advance careers.

The distinction between mentors, coaches, and sponsors has been well stated by Kathy Hopinkah Hanna, a national managing partner at KPMG LLP US: "A coach tells you what to do, a mentor will listen to you and speak with you, but a sponsor will talk about you."<sup>25</sup> These three players all have key roles in career development, but only sponsors

have the clout to position women and men for leadership.

### **Why Do Women Need Sponsors?**

Hewlett et al<sup>13</sup> found that although sponsorship benefited both men and women in all important measures of corporate career advancement (e.g., salary, job satisfaction, getting stretch assignments), fewer women than men had sponsors (13% versus 19%), and men were 46% more likely than women to have sponsors. Without sponsors, women were less likely than men to be appointed to top positions and, more important, less likely to apply for them.

In addition to institutional and cultural norms, women's perceptions of their "readiness" for leadership positions, lack of confidence in their own capabilities, and almost visceral reaction against self-promotion are factors that may impede advancement and contribute to their reluctance to apply for top positions.<sup>4,26</sup> Sheryl Sandberg,<sup>27</sup> Facebook's chief operating officer, writes that women do not "lean in" but, rather, hold back; Sandberg offers a training program for women to overcome these self-imposed obstacles. But this also presents an opportunity for sponsors. They can help women gain the self-confidence to apply for challenging assignments or positions, value their accomplishments, and realize their full potential. Sponsors can both act as advocates for and assist women in their pursuit of top spots, encouraging them to overcome their aversion to self-promotion and assert their competence. Sponsors can challenge women to volunteer for "stretch" assignments rather than wait to be asked to take them on. Many women operate under the assumption that they work in a meritocracy, but the consensus is that being smart, working hard, and, in the case of academic medicine, publishing are not enough.<sup>13,15,16,20,26</sup> It takes more—it takes sponsorship. Without it, women are less likely than men to be assigned the "hot jobs" or be appointed to the top positions.<sup>28</sup>

### **Will Sponsorship Work in Academic Medicine?**

Many corporate sponsorship programs for women are producing results. At American Express, the "Women in

the Pipeline and at the Top” initiative aimed for a “more gender-intelligent organization.”<sup>13</sup> The corporation developed the Pathways to Sponsorship program to increase leadership visibility and opportunities, and in 2010 convened its first global women’s conference at which 160 of the company’s women leaders could network and connect with C-suite executives. Deutsche Bank’s sponsorship program pairs high-potential women with senior leaders who act as advocates for them and raise their visibility at the leadership table.<sup>16</sup> At the end of the yearlong program, two-thirds of protégés are either in or ready for larger roles and responsibilities.

However, academic medicine differs from the corporate world, although it, too, espouses meritocracy as critical to advancement. As academicians we pride ourselves on our search processes and the due diligence we conduct to find the “best” candidates, who are mostly men. Although we could not find any academic medicine sponsorship models, at the university level a few initiatives exist, including the company-to-graduate-student Citigroup–UCLA Anderson School of Business initiative.<sup>13</sup> At an individual level, former Princeton University president Harold Shapiro sponsored women for top positions in academia, including several women who have become university presidents.<sup>29</sup> For more than 20 years, he identified talented women, gave them high-profile jobs, and helped them gain necessary executive leadership skills—all facets of sponsorship. Perhaps most important, he helped them overcome self-imposed obstacles (e.g., thinking that they were “not ready” or not accomplished enough) and negotiate for the resources required to be successful.

Perhaps academic medicine cannot completely imitate the corporate model of sponsorship, but we could adapt aspects of it. We cannot name a woman as dean, CEO, or cancer center director without conducting a search, but we can prepare women faculty to compete for these positions by helping them obtain “hot jobs” in the organization—that is, the mission-critical roles, highly visible projects, or global initiatives that will catapult them into the limelight and prepare them for executive-level positions.<sup>28</sup> Clearly these opportunities

exist for women faculty. The current and future challenges facing academic medicine make us ripe for new ideas and new leaders. As leaders, women bring their own mix of experiences and perspectives, which leads to a diversity of ideas that drive better and more innovative problem-solving approaches.<sup>19,30–32</sup>

Sponsorship can occur at many levels of our organizations and professional societies to raise women’s visibility in roles that do not involve search committees. Actions that can bring women to the forefront include appointing them to key committees and training them to serve as committee chairs, as well as appointing them to journal editorial boards and preparing them to become senior editors. Recently, the editors of *Nature* publicly recognized the underrepresentation of women referees and women-authored papers in the journal and indicated they would implement changes.<sup>33</sup> Such awareness and intent of leaders to identify and act as advocates for high-potential women when the opportunity arises is the very nature of sponsorship and can facilitate and accelerate the entry of women into the academic medicine “C-suite.”

### Why We Should Be Sponsors

So what is in this for the sponsors? According to the business literature,<sup>15,17</sup> sponsors gain both personal and professional satisfaction from the relationship. Many sponsors describe a deep sense of satisfaction in identifying and watching their protégés develop as leaders. Sponsors become known as people with an eye for undiscovered talent. Sponsors also benefit from their protégés’ insight into different levels in the organization. Finally, sponsors value the legacy of developing talent in the women and men who will lead their profession into the future. That legacy is also one that we value in academic medicine.

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