

Social Networks

A Key to Improved Institutional Performance

Presented by Karen Stephenson and facilitated by Nancy Aronson and Ferne Kuhn

2009 ELAM® Forum on Emerging Issues

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Advancing Women's Leadership in Academic Medicine: An Overview of the ELAM Program

ELAM Overview

Founded in 1995, the Hedwig van Ameringen Executive Leadership in Academic Medicine® (ELAM®) Program is the only in-depth national program that focuses on preparing senior women faculty at academic health centers (AHCs) to move into positions of leadership where they can make positive change. ELAM is a core program of the Center for Executive Leadership in Academics and is housed within the Institute for Women's Health and Leadership® (IWHL) at Drexel University College of Medicine. Together, ELAM and the IWHL continue the long legacy of advancing women in medicine that began in 1850 with the founding of the Female Medical College of Pennsylvania, the nation's first women's medical school and predecessor of today's Drexel College of Medicine.

ELAM's year-long part-time fellowship program mixes traditional executive seminars and workshops on topics pertinent to AHC management, with group and individual projects aimed at developing personal leadership. Throughout the year, there are opportunities to meet with nationally recognized leaders in academic medicine, health care, government and industry and to interact with peers from different disciplines and institutions. The program year culminates in a 1½ day Forum, when the Fellows, their Deans, and other invited guests gather with top experts to explore a new methodology or strategy for addressing a timely issue facing AHC leadership.

Recognition of ELAM's importance and the leadership potential of its graduates is evidenced in the following statistics: nearly 90% of U.S. medical schools and 63% of U.S. dental schools have sponsored ELAM Fellows. ELAM participants now hold senior posts (division chief through university president or higher) at close to 100 U.S. academic institutions, including 16 deanships and two presidencies.

ELAM Recognition and Support

ELAM has been honored in every facet of its work. In higher education, it has received the American Council on Education's Office of Women in Higher Education Network Leadership Award; in medicine, the Association of American Medical Colleges' Women in Medicine Leadership Development Award; and in dentistry, the Dr. Edward B. Shils Entrepreneurial Education Fund Award.

Because of its pre-eminence in the field of women's leadership education, ELAM received a five-year grant in 2001 from The Robert Wood Johnson Foundation to conduct an in-depth evaluation of the program's effectiveness and develop theory about educating women for leadership. Additional funding for this research project was provided by the Mayo Medical School and Mayo Clinic Rochester, the University of Michigan, Vanderbilt University, Wright State University, and the Jessie Ball duPont Fund. Numerous papers, presentations, and posters have been generated as a result of this project (http://www.drexelmed.edu/Home/OtherPrograms/ExecutiveLeadershipinAcademicMedicine/Newsand Publications/StaffArticles.aspx). Results from the individual studies sponsored through this research project suggest that ELAM successfully prepares women to move forward into increasingly more challenging leadership roles.

ELAM is supported by program fees, grants, gifts, and in-kind contributions from ELAM classes, foundations, corporations, and individual donors, notably Patricia Kind, who established partial endowment for the program in memory of her mother, Mrs. Hedwig Pfaltz van Ameringen. ELAM also receives contributions from the ELAM Alliance, a consortium of independent consultants working in

academic medicine and higher education committed to the advancement and success of women in leadership positions.

The ELAM Program's Forum on Emerging Issues

The Forum on Emerging Issues is the capstone event of the ELAM spring session as well as the fellowship year, when Fellows are joined by senior delegates from their home institutions, most often the Deans, along with invited guests (see Appendix A for list of this year's participants). Each year, the ELAM Forum explores an innovative concept or methodology that has direct application to leading and managing an academic health center. The Forum's interactive format enables participants to explore potential applications of the new concept in a collegial and creative environment. For detailed information on previous forum topics please visit the ELAM website:

(http://www.drexelmed.edu/Home/OtherPrograms/ExecutiveLeadershipinAcademicMedicine/Forum.as px)

Past Forum Topics

Building Diverse and Inclusive Communities in Academic Health Centers (2008)

Faculty in academic health centers must participate in solving the problem of health disparities because they are the training ground for future scientists and clinicians who must grapple with these problems. Led by Jeannette South-Paul, Harry Gibbs, and Robert Like. Underwritten by the University of California Irvine and the University of Colorado Denver.

Positive Deviance (2007)

Positive Deviance, unlike traditional "needs based" or problem-solving approaches, seeks to mobilize the organizational community to identify and amplify positive problem-solving practices that already exist. Led by Jerry and Monique Sternin. Underwritten by the University of Alabama at Birmingham School of Medicine and West Virginia University School of Medicine.

Tapping the Full Power of the Alpha Leader (2006)

Led by Kate Ludeman and Eddie Erlandson of Worth Ethic and underwritten by the University of Iowa Carver College of Medicine, the University of Medicine and Dentistry of New Jersey/New Jersey Medical School, and the University of Ottawa Faculty of Medicine.

Transformational Philanthropy (2005)

Led by fundraising expert **Karen E. Osborne**, President of the Osborne Group, Inc. and underwritten by the **University of Texas M.D. Anderson Cancer Center**.

Uncovering and Overturning the 'Immunity to Change': Personal Learning and Professional Development (2004)

Led by Harvard's Meehan Professor of Adult Learning and Professional Development, **Robert Kegan** and underwritten by the **University of Texas Medical Branch at Galveston**.

Energizing Change in Organizations: An Introduction to Appreciative Inquiry (2003)

Led by **Penelope R. Williamson,** Associate Professor of Medicine at Johns Hopkins University School of Medicine and **Anthony L. Suchman**, Practicing Internist and Organizational consultant, and underwritten by the **University of Utah School of Medicine**.

Building the Leadership Engine for Academic Health Centers (2002)

Led by **Noel M. Tichy**, Professor of Organizational Behavior and Human Resource Management at the University of Michigan Business School and Director of its Global Leadership Program and underwritten by the **University of Michigan's Medical School, School of Dentistry, and Office of the Provost.**

Innovative Thinking and Creativity Tools to Improve Academic Health Centers (2001)

Led by **Paul Pisek**, an internationally recognized consultant on improvement and innovation for today's complex organizations and developer of the concept of DirectedCreativityTM and underwritten by the **University of Michigan's Medical School, School of Dentistry, and Office of the Provost**.

Balanced Scorecard: Strategy and Performance for Academic Health Centers (2000)

Led by **Stephen Rimar**, a recognized leader in the application of the Balanced Scorecard approach to academic medicine and then Vice-Chairman of the Department of Anesthesiology and Medical Director of the Faculty Practice Plan at the Yale University School of Medicine. Underwritten by the **Colgate-Palmolive Company**.

Exploring Complex AHC Systems Using Computer Simulation (1999)

Guided by **Bruce Gresh**, who designed the simulation, participants played out the effects of implementing management decisions in a complex system. Underwritten by the **Colgate-Palmolive Company**.

Planning, Learning and Rehearsing the Future for Academic Health Centers: Success in the Face of... (1998)

Led by **Paul Batalden**, Director, Health Care Improvement Leadership Development, Center for Evaluative Clinical Sciences, Dartmouth Medical School. Underwritten by a grant from the **Josiah Macy**, **Jr. Foundation**.

Creating A Learning Organization: For Renewal of Academic Medicine (1997)

Peter Senge's Five Disciplines was applied to academic health center systems.

Academic Medical Centers 2010: An Organizational Odyssey (1996)

Using future search methodology, this Forum explored the optimal governance structures and leadership styles that will be essential for the future.

The 2009 ELAM Forum on Emerging Issues

Social Networks - A Key to Improved Institutional Performance

Presented by Karen Stephenson, Ph.D.

Dr. Karen Stephenson, hailed in *Business 2.0* as "The Organization Woman," is a corporate anthropologist and lauded as a pioneer and "a leader in the growing field of social-network business consultants." Among the dozens of national and global corporations and organizations with which Stephenson has worked are: pharmaceuticals Amgen, Genentech and Pfizer; the medical schools of Harvard and UCLA; and the National Institutes of Health. Her web-based firm NetForm was recognized as one of the top 100 leading innovation companies by *CIO* in 2001. Stephenson has been acknowledged internationally for her pioneering work in detecting, diagnosing and designing human networks to solve a variety of complex problems that have been featured in *The Economist, Fast Company, Financial Times. Forbes, The Guardian, Wall Street Journal*, the *Washington Post*, and *Wired*.

Stephenson earned her bachelor's degree (in chemistry and art) from Austin College (TX), her master's in anthropology from the University of Utah, and her Ph.D., also in anthropology, from Harvard. She has held academic positions at UCLA's Anderson Graduate School of Management; Graduate School of Design, Harvard University; and the Rotterdam School of Management, Erasmus University. She has held fellowships at the Sloan School of MIT; the National Institute for Mental Health, NIH; Imperial College Management School, University of London; and Bryn Mawr College (as the inaugural Katharine Houghton Hepburn Fellow). She serves on the advisory boards of several educational associations.

Facilitated by Nancy Aronson, Ph.D. and Ferne Kuhn, M.Ed.

Dr. Nancy Aronson has consulted to education, healthcare, business, and community organizations. She is recognized for her innovative work in implementing collaborative processes for managing change, including strategic planning, process improvement, and organization redesign. She pioneered the early work in shared decision making in education in Pennsylvania, bringing practical methods for engaging faculty and other stakeholders in school improvement and strategic planning.

Dr. Aronson has extensive experience in designing and facilitating large-scale change efforts. Projects have addressed a variety of needs such as patient care redesign, supply chain implementation, and repositioning a nonprofit organization in its community. Integral to all of this work is supporting and coaching leaders. A sample of clients include: The W.K. Kellogg Foundation, Kansas State Department of Education, University of Southern California, Georgetown University School of Nursing and Health Studies, Harrisburg School District, The Learning Exchange, Inova Health System, Points of Light Foundation, Detroit Edison, Downingtown Area School District, Lower Merion School District. Dr. Aronson also facilitated at the Presidents' Summit for America's Future in Philadelphia.

Dr. Aronson is a member of the Future Search Alliance and an Appreciative Inquiry Professional Group. She is an adjunct professor at Philadelphia College of Osteopathic Medicine where she teaches courses on Organizational Systems and Appreciative Inquiry in the Organization Development Leadership Program. Dr. Aronson has a B.S. from Cortland State University and a M.Ed. and Ph.D. from Temple University

Ferne F. Kuhn, M.Ed, is Principal of the Kuhn Consulting Group (KCG), located in suburban Philadelphia. KCG, a management consulting firm, specializes in consulting that addresses organizational, management and interpersonal challenges — all from a systems perspective, encouraging and building collaborative work relationships. In partnership with her clients, she plans and facilitates large group meetings that advance collaboration and alignment of organizational goals and objectives with multiple stakeholders. Her clients have included Drexel University's ELAM Program, Women's Way, the Forum of Executive Women and the U.S. Department of Justice's Executive Leadership Training for Women Program. A graduate of the University of Pennsylvania, she received her Master's in Education from Temple University where she majored in adult education and development. She recently completed a five-year international research project focusing on women and leadership.

Background: Forum on Social Network Analysis

Beginning in January 2008, the ELAM Program initiated a research project to consider the social network of the ELAM alumnae. As a program dedicated to advancing the leadership of women, ELAM is particularly interested in how graduates interact and support each other in the years following program completion. It was recognized that with an alumnae network of well over 500 women — many of them highly placed in academic health — information about the strengths and weakness of their network will provide valuable information for us as an organization, while also making an important contribution to research available on how women learn leadership.

Concurrent to the launch of the research study was the decision to focus the 2009 Forum around the concept of social networks. ELAM's research partner and **2009 Senior Scholar Karen Stephenson, Ph.D.**, has made her reputation using social network analysis to strengthen corporations and government agencies worldwide. The tool of social network analysis was perceived as having direct applicability to ELAM fellows, their deans, and their institutions.

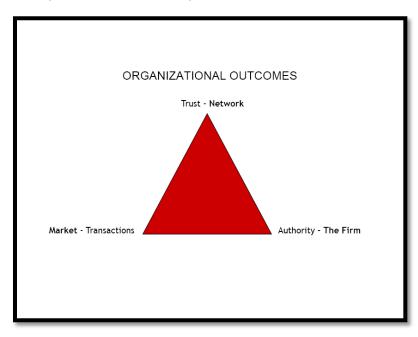
The ELAM Forum on Emerging issues is designed to meet several goals simultaneously: to introduce fellows and their deans or dean's designee to a major topic of interest to academic health centers; to provide an opportunity for engaging and interactive learning; to begin laying the foundation for development of new take-home knowledge and skills; and to provide ELAM fellows with the opportunity to interact directly with their dean or designee.

This year the Forum was unique as it also included the opportunity for current ELAM fellows and their deans or designees to comment on preliminary findings from the ELAM-based study of social networks and to suggest ways that ELAM could use social network processes to strengthen the alumnae network.

Overview of Social Network Analysis

Social Networking and Social Networks. No discussion of social networks can be conducted without first differentiating Social Networks from Social Networking. Social Networking is the making of individual connections, whether at professional meetings or via electronic networking sites such as LinkedIn® or Facebook®. In contrast, the social network is a dynamic web of multiple interactions and exists on multiple levels. It explains how individual networks are connected and interact within an organization(s), a community(ies), or a group(s) of people. A solid understanding of the social network within an organization can ensure that it is aligned with organizational objectives, which will in turn greatly facilitate effective operations and governance.

Types of interactions. Based on the previous work of economists, political scientists and her own research, Dr. Stephenson observes that there are three major types of interactions in most organizations. The first two are easy to observe. One type is the **transaction** and is most easily conceptualized as the marketplace, an environment where the commodities (information) needed to



address the task at hand are traded in full view of all interested parties. Another type of interaction is based on **authority**; these interactions are linear and top-down. They often are the manifestations of a hierarchical structure and are also easy to see. The third type of interaction is based on **trust**. Trust based interactions are the bedrock of the social network. Together, the interface among these three types of interactions determines organizational outcomes.

Social network as compared to hierarchy. While the social network can be understood as

one of a triad of factors affecting organizational outcome, it can also be viewed against the backdrop of the organizational hierarchy. Most people are well acquainted with their work unit organizational chart and understand that work assignments and related communications should flow up and down the stems of the organizational chart. However, communication and work output rarely flow in such a seamless fashion. Lip service may be paid to the hierarchical structure, but it often does not accurately reflect how business is conducted. Depending on what needs doing or fixing, most institutional players know whom they need to go to, regardless of relative position in the organizational hierarchy. Social network analysis can be understood as an *explicit examination of the communications structures that really make business work.* Aligning social networks with the hierarchical structure leads to more effective operations or governance.

Social network archetypes. In her work, Dr. Stephenson has developed three separate archetypes, each of which plays a role in the social network. Dr. Stephenson determines the degree to which an individual functions in any of these roles through a mathematical analysis of the number and frequency of contacts within the network. As defined in the NetForm Training Manual (copyrighted 2006, 2007, 2008, 2009), the archetypes and their characteristics are:

- **Hubs** are directly connected to large numbers of individuals within a population. As such, they exhibit multi-tasking skills that, when combined with their interpersonal skills, make them pivotal in centralizing information flows within work groups. Open and inclusive, they reliably disseminate information.
- Gatekeepers are strategically connected to a few, rather than directly connected to many. You will
 find gatekeepers on critical pathways between organizational groups and key individuals. They are
 careful and selective regarding their information and contacts. As such, they can be instrumental in
 controlling the rate and substance of change.

Pulsetakers have a wide and deep reach into the organization, the result of their pattern of indirect
connections to a large portion of the population. Embedded within the culture, they serve in
invisible advisory roles. Subtle, they are keen observers and monitors of cultural health and work
from within to effect change.

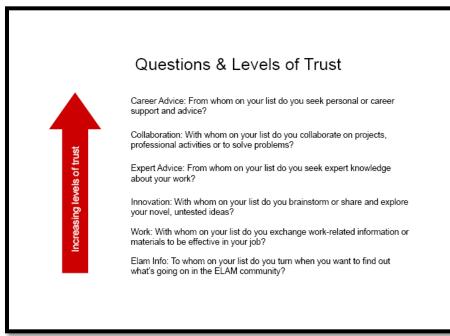
These dominant players function as *tipping points* within an organization. Enlisting their support and leveraging their role within the network can be very beneficial to an organization. Conversely, failing to recognize these people and the power of their network position can result in bottlenecks and obstructions. Moreover, the roles people play within the network are not static. A change in hierarchical position (a promotion or lateral move) will likely change the composition of an individual's network contacts as well as the role she plays within it.

Hubs: connected to the most people

Gatekeepers: connected to the right people

Pulsetakers: connected to the most people connected to the right people

Trust. The social network is composed of multiple networks operating simultaneously. These different networks are based on the level of trust that is required between individuals and include: learning or improvisational network, expert advice network, innovation network, social network, work network, decision-making network, and the strategy network. Individuals interact differently depending on the



particular network in which they are engaged. For example, two coworkers might be very comfortable interacting with each other as they determine the best way to complete a project (the work network) but much less comfortable discussing new ideas, especially ideas that go against the status quo (innovation network). Individuals may often play different roles within different networks; a scientist who functions as a hub in innovation

network (sharing ideas among and between contacts) may be a pulsetaker in the decision-making network.

Heterarchy. In presenting social network analysis, Dr. Stephenson also draws on the relatively new concept of heterarchy. She characterizes heterarchies as being composed of separate but interacting organizations. The member organizations are interconnected, interdependent, and collaborative — which certainly describes academic health centers with their various schools and hospitals. Within the context of social networks, members of the heterarchy have internal as well as overlapping networks. It

is Dr. Stephenson's contention that heterarchies will soon become the dominant mode of communication and interaction and that they will replace hierarchies as the organizational model.

Participant involvement. This overview elicited numerous questions, comments and clarifications. A selection of these are paraphrased and presented below. Dr. Stephenson's responses are in italics.

- How do you recognize your hubs, gatekeepers, and pulsetakers?
 Through social network analysis, which Dr. Stephenson believes should become increasingly recognized as an important aspect of any management plan, much as 360° assessment methods are becoming.
- How much of the role that an individual plays within the social network is determined by personality and how much of it is malleable? Social network analysis is still in its infancy and the interaction between personality and network role and/or position is still unclear. We do know that people will play different roles depending on the specific network and their position in it. This is why moving an individual out of his network and into a new position can have unintended consequences.
- How does an individual's role change as his/her career progresses? Once a hub, always a hub? In general, there is a tendency for individuals to move into the roles of gatekeeper and pulsetaker as they mature professionally.
- ELAM fellows have spent the past year preparing to move upward in leadership. How can we apply the theories of social network analysis to ourselves?

 Before taking on a new role, try to scan the social network to identify who occupies key roles (which may not be shown on the organizational chart). Once you occupy that new role, conduct another scan of the network because it will look different depending on your position in it.

Presentation of Preliminary Results: ELAM's Community of Practice

Supporting and sustaining women in leadership has been a part of the ELAM mission since its founding in 1995. In the intervening years, research and observation of ours and others have confirmed the important role that a strong community of practice plays in the development and sustenance of women leaders. However the specifics of how that community is structured were lacking.

In early 2008, the ELAM Program partnered with Dr. Karen Stephenson of NetForm to conduct an indepth study of the ELAM community of practice. We first developed questions appropriate to our study population and established the study parameters. In July 2008, we launched the study survey. At that time there were 519 women who had participated in the ELAM program with 463 of them consenting to participate in ELAM sponsored research. These 463 women were sent, via e-mail, the NetForm Survey. They were asked first to identify, from a total of 650 names (519 ELAM alumnae [ELUMs] plus 131 ELAM faculty members) those individuals with whom they had any contact. Once participants had narrowed down their personal contacts, they were asked to identify the frequency (daily, weekly, monthly, quarterly, yearly, and never) with which they had contact with each identified individual relative to seven different networks. The networks and the specific questions are detailed below:

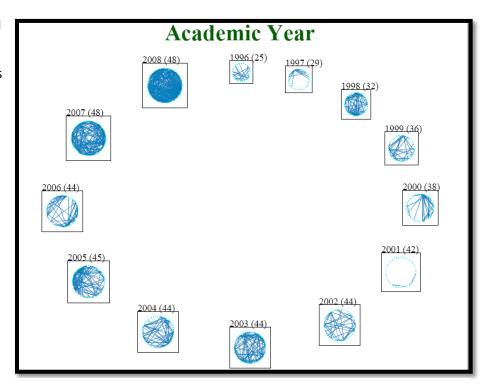
- **Collaboration Network**: With whom on your list do you collaborate on projects, professional activities or to solve problems?
- Expert Advice Network: From whom on your list do you seek expert knowledge about your work?

- **Innovation Network**: With whom on your list do you brainstorm or share and explore your novel, untested ideas?
- Career Advice Network: From whom on your list do you seek personal or career support and advice?
- **Work Network**: With whom on your list do you exchange work-related information or materials to be effective in your job?
- **Information about ELAM Network**: To whom on your list do you turn when you want to find out what's going on in the ELAM community?
- ELAM Strategy Network: With whom on your list do you discuss ELAM's global strategy or vision?

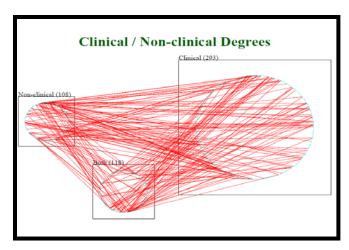
Maps of selected NetForm analysis findings were presented to Forum participants to: provide a case study that had relevance to them, solicit their hypotheses regarding the ELAM network "snapshots," and to generate ideas regarding how the ELAM community of practice could be further strengthened. Several of the maps presented, along with Dr. Stephenson's observations and comments, are reproduced below. Within the maps, each circle is composed of a ring of dots with each dot representing an individual belonging to that particular group. For the first map, each circle represents an ELAM class; the inaugural 1995-1996 class is located at 12 midnight, and the circle continues clockwise around to the 2007-2008 class. Lines inside the circles represent connections between members of a group (intra) and lines between circles represent connections across groups (inter). Unless indicated, only two-way links (connections where both members of the dyad indicated that they interact with each other) are shown.

Work Network by ELAM class year: inter-group, 2-way connections.

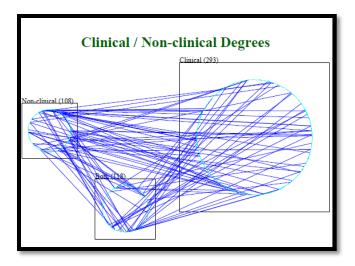
Connections within classes varied in density, with the most recent 2007-2008 class showing many intraclass connections and the 2000-2001 class showing few. While the maps indicate a not unexpected trend towards greater involvement with recent alumnae classes, the variability indicates that increasing time from graduation is not an absolute predictor of less involvement.



Work Network by ELAM class year: inter-group, 2-way connections



Work Network by degree category, two-way, inter-group links



Innovation Network by degree category, 2-way, inter group links

Work and Collaboration Networks by Degree: inter-group, two-way interconnections. Study participants were separated into three mutually exclusive groups: clinical (MD, DO, DDS, DVM, etc.), non-clinical (PhD, DrPH, etc.), and both (MD/PhD, MD/MPH, etc.). These maps indicate that there is a good network of communications across disciplinary lines, but that within the collaborative network – where a relatively high level of trust between individuals – the network is less dense.

Other mapping scenarios presented.

Forum participants were also presented with study maps showing how the community of practice was structured when considered by respondents' academic rank (associate professor, full professor, other), region of the country (northeastern, mid-western, southern, western), and Myers-Briggs® Type indicators (extravert and introvert). The network was robust across academic rank, geographic region, and MBTI extravert and introvert preference. In all cases, the links between groups appeared to be less dense in those networks requiring higher levels of trust, such as the career advice and personal support network.

Forum participants' observations and suggestions for strengthening the ELAM Community of Practice. Forum participants worked in small groups to identify the potential challenges presented to ELAM as a

result of information gained from the NetForm social network survey, as well as key opportunities and potential strategies that ELAM could use to improve the network. Several clear strategies for strengthening the overall network emerged, including: ELAM-sponsored or -organized alumnae events; the ability to identify weak and strong "connectors" and to intervene appropriately; and the potential to work with ELAM alumnae at the institutional level to promote the program and its goals on a school by school basis. A table summarizing the main themes and selected comments from this exercise is presented on the next page.

Challenges	
Theme	Selected Comments
Variable response rate between classes	Across classes not as robust as within classes
	Response rate appears to decline over time
	Difficulty in obtaining longitudinal data
Potential barriers between ELUMs	Silos
	Generational values
	Western US region has smaller numbers of
	participants since has fewer schools
Newness of social network analysis as tool	Is social network analysis validated?
	How does network link to critical outcomes?

Opportunities and Strategies			
Theme	Selected Comments		
Opportunity to strengthen entire network	Reunions – free/low cost at AAMC, ADEA, ASPH		
	Website to link ELUMs with similar interests (regroup into new learning communities?)		
	Webinars on skill building to maintain networks		
Ability to intervene and enhance network function	Analyze working and non-working groups Identify factors that build/impede/sustain networks and Learning Communities Intervene appropriately with weak and strong connectors		
Application of network to individual institutions	Identify factors of rapid building of trust in ELAM to translate to home institutions		
	Expand ELAM influence by establishing local institutional networks		

The Wider Use of Social Network Analysis

Forum participants' observations regarding application of social network analysis. Participants were asked to reach beyond the ELAM applications of Social Network Analysis (SNA) to consider how the technique might be useful in other settings. Again, participant thoughts regarding the application of network analysis fell into several overlapping categories shown in the table on the next page.

Selected comments: Application of SNA *Identify and provide insight into donor interests *Demonstrate cohesiveness between institutions for funding agencies *Increase communication within hierarchies or other visible social constructs *Establish working link between academia and community to groups *Demystify biases and misconceptions in the community *Increase recruitment to clinical trials *Disseminate effective practices *Inform and identify misalignment in decision making *Identify people who can facilitate a change *Use for rapid "onboarding" of recruits *Formalizing mentorship *Improve interactions with wider community

Diverse case studies. Dr. Stephenson presented case studies from other organizations where she has conducted social network analysis using the NetForm methodology. She provided illustrations of use of the tool within an academic department and the community of Philadelphia. In both cases, the tool allowed for the visualization of network silos and the identification of kev connectors. Forum participants were particularly interested in the work within the community of Philadelphia; there were many parallels between how diverse sectors within Philadelphia interacted and the situation faced by academic health centers that have community outreach missions. Particularly striking in the Philadelphia study was the isolation of academia from the rest of the community.

Many participants highlighted this factor during the subsequent discussion session and commented on the potential of social network analysis to identify those individuals who could most effectively bridge the gap between "town and gown." The general conclusion was that social network analysis provided an alternate lens through which to view organizational dynamics. Further, they noted that it was a tool that could, with proper understanding, be used to improve organizational effectiveness and facilitate change. Moreover, a few of the academic health centers present reported on-going use of similar social network analyses.

Personal Leadership. As a conclusion to the forum, participants were asked to apply what they had learned to their personal development, the development of others, and to their unit or organization. Forum participants felt that understanding the social network prior to taking on a new position could be very useful. Additionally it was noted that social network analysis could be used to facilitate change and also as an effective way to work "under the radar."

The Power of the Social Network Paraphrased Comments from Forum

- * I can't help noticing how the social network maps resemble neural networks
- * I don't want to be a hub in a meeting because then I don't hear other people's ideas
- * I can use the network as a change unit
- * I can use the network as an "under the radar" tool
- * You don't need to disintegrate silos, just connect them!
- * Many universities have multiple schools. SNA could be good tool to increase collaboration with the university
- * Can someone who is deeply indoctrinated into the hierarchal system learn about networks? Yes!

The 2009 ELAM Forum on Emerging Issues Appendices

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* Note: Titles are as of the time of the Forum

ELAM 2009 Forum Attendee Directory

Deans & Designees

(* denotes ELAM Sustaining Member)

Nancy C. Andrews, M.D., Ph.D.

Vice Chancellor, Academic Affairs
Dean, School of Medicine
Professor of Pediatrics
Professor of Pharmacology and Cancer Biology
Duke University

Karen H. Antman, M.D.

Provost, Medical Campus
Dean, School of Medicine
Professor of Medicine and Pharmacology
Boston University

Steven Lee Berk, M.D. *

Vice President for Medical Affairs Dean, School of Medicine Texas Tech University Health Sciences Center

David J. Bjorkman, M.D., M.S.P.H., S.M. *

Executive Medical Director, University of Utah Medical Group Dean Professor of Internal Medicine

Professor of Internal Medicine
University of Utah School of Medicine

Steven M. Block, M.B., B.Ch.

Associate Dean for Faculty Services and Career Development

Wake Forest University School of Medicine

Paul Cleary, Ph.D.

Dean

Chair, Epidemiology and Public Health Yale School of Public Health

Richard D. Clover, M.D.

Associate Vice President for Health Affairs Dean, School of Public Health and Information Sciences

Chair, Department of Family and Community Medicine

University of Louisville

Pamela Bowes Davis, M.D., Ph.D.

Vice President for Medical Affairs
Dean, School of Medicine
Arline and Curtis Garvin Research Professor of
Pediatrics
Case Western Reserve University

Thomas A. Deutsch, M.D. *

Provost Senior Vice President, Medical Affairs Dean Rush University Medical Center

Thomas Feasby, M.D.

Dean

University of Calgary Faculty of Medicine

E. Ruth-Marie Fincher, M.D. *

Vice Dean of Academic Affairs Professor of Medicine Medical College of Georgia School of Medicine

Robert N. Golden, M.D.

Vice Chancellor for Medical Affairs
Dean, School of Medicine and Public Health
Robert Turell Professor in Medical Leadership
Professor of Psychiatry
University of Wisconsin at Madison

Henry Gremillion, D.D.S., M.A.G.D.

Dean

Louisiana State University School of Dentistry

Jeffrey K Griffith, Ph.D.

Executive Dean

University of New Mexico School of Medicine

Robert I. Grossman, M.D.

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