Diversity, Equity, Inclusion, and Justice

Networking in Academic Medicine: Keeping an Eye on Equity

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There is little doubt that networking is pivotal to career advancement in academic medicine. Powerful networks are the fertile soil that allow seeds of talent to grow to their full potential. Relationships developed through networking can provide access to new information, important opportunities, resources, and enhanced visibility,[1,2] all of which can alter career trajectories.

With increased attention to equity in academic medicine, it is essential to recognize the effects of networking on career development and advancement. How do students, residents, fellows, and faculty currently access the benefits of networking? How do we ensure equity in access, in the context of a shortage of coaches, mentors, sponsors, and role models? In this article we consider potential strategies to improve access to networking.

Networking and Graduate Medical Education

Networks are the social environment in which academic physicians can find coaches, mentors, and sponsors (FIGURE). The social capital within networks leads to accessing opportunities, which may be difficult to attain and leverage in the absence of a network.[3] Networks play an important role in career success and may facilitate expedited trajectories to higher status and influence.[4,5]

Networking is the action or behavior of navigating this social environment. Trainees have different networking abilities based on past experience (eg, career prior to medicine or MBA during medical school) and personality traits. In our experience, trainees often have a negative view of networking, as transactional or manipulative, and a threat to a merit-based value system. In addition, due to power differentials, trainees may feel intimidated by more senior leaders and not reach for or respond to networking opportunities. Training programs have not been intentional or systematic in preparing residents to recognize the importance of networking.

Apart from the value of effective networking for an individual's career growth, networking is valuable for departments, institutions, and organizations at every level. Networking within and outside one's area of expertise can be a source of innovation, by moving away from myopic approaches and allowing for cross-functional experiences and boundary-crossing collaborations. Institutions benefit as their members broaden their networks to achieve specific career goals because it expands their impact and reputation. Powerful networks build and sustain elite institutions. Thus, organizations benefit from facilitating networking among their members.

Potential Networking Pitfalls

With the literature clearly highlighting the importance of networking, what is there to be concerned about, if anything? The literature tells us that typically, and usually unconsciously, networking tends to be "narcissistic" (we are naturally drawn to people who are like us in important ways) and "lazy" (it takes time and effort to get to know people from different circles than our own), leading to "inbred networks."[6]

Despite the benefits of networking to careers and organizations, there are risks, many of which are subtle. These are in the areas of unequal access to networking opportunities, including academic collaborations, networking hiring, work visibility, and career advancement. Networking as a career enhancing strategy tends to serve some better than others. Studies have highlighted that there are "inequalities in the networks of people with different social identities, such as age, race, ethnicity, social class, and gender."[7]

The business and academic literature notes that gender, socioeconomic background, extraversion, self-esteem, and attitudes toward workplace politics are related to the networking behaviors of individuals, and the benefits of networking on career development hence favor some more than others.[8]

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Editor's Note: The online version of this article contains practical steps to reduce bias and broaden networking circles.

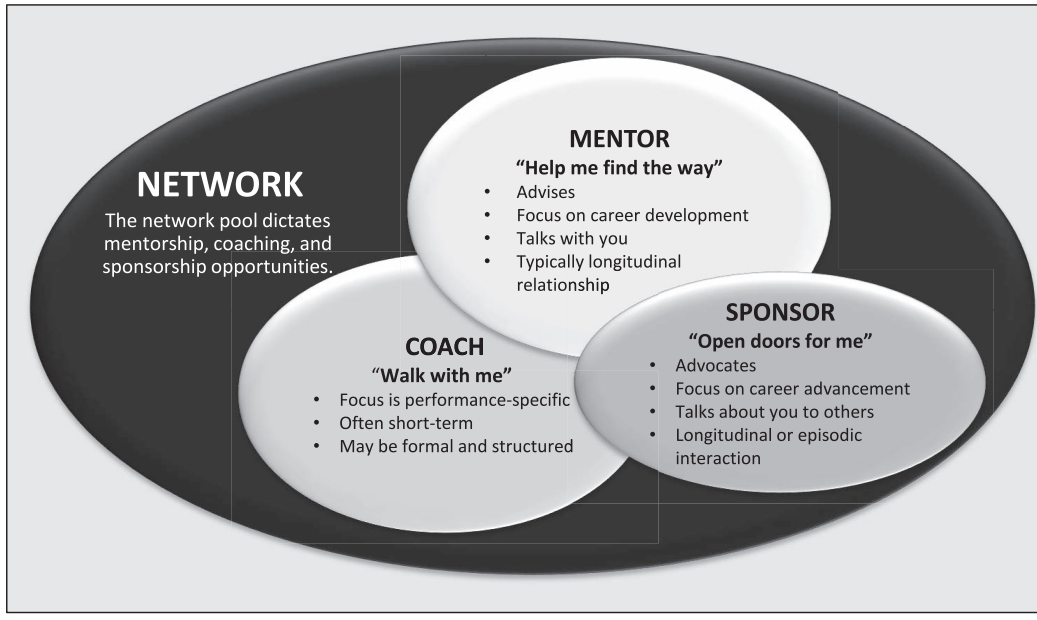

FIGURE
The Relationship Between Networking, Mentoring, Coaching, and Sponsorship

Also, business studies show that 20% of White employees have sponsors vs 5% for Black employees.[9] (Sponsors advance their protégés' careers by increasing their visibility and actively advocating for their protégés' career success.) Similarly, women tend to have less consistent access to networks.[10] As a result those who have access to powerful networks have a "leg up": the advantaged become more advantaged. To date, there has been little in the medical literature around this issue.

Steps to Broaden Networking Circles

It is imperative that institutions are aware of unequal access to networks and take steps to mitigate potential bias in opportunities for faculty and trainees. Mitigation steps can be taken by individuals, institutions, and training programs (see online supplementary data).

Individual Level

Faculty and resident education should recognize the power of networks and re-frame networking from a murky "business" transaction to a tool for collaboration within and beyond one's work circle. Additionally, trainees and faculty should be actively encouraged to pursue opportunities to broaden their networks, including leveraging existing resources like resident and underrepresented in medicine scholarships and pipeline programs in professional societies. Another networking opportunity is to schedule visiting speakers to meet with faculty and trainees, in small groups or individual meetings, following a talk. Individuals should be coached on how to prepare for these meetings, in order to enhance their networking skills. In particular, target the preparation and skills development for those who are traditionally under-networked and under-sponsored.

Program and Institutional Levels

First and foremost, *awareness of the unconscious bias introduced by networks and associated sponsorship opportunities* is an imperative initial step. However, this is not sufficient. Enhanced access to networks for women and those underrepresented in medicine is not going to happen spontaneously and thus requires intentional actions. Additionally, network inclusivity and associated sponsorship should be a strategic imperative, which pays particular attention to those traditionally less connected. Program directors and departmental and institutional leaders can be tasked with network inclusivity as program and departmental goals.

Participating in or creating networking and sponsorship programs, with regular measurement of inclusion and accomplishment metrics, is a practical next step. These can range from fairly straightforward to more sophisticated and complex multilayered programs. Examples of straightforward steps include ensuring that every trainee is assigned a faculty mentor, as well as equal and fair access to opportunities that come up during training, such as research and scholarship opportunities. Programs and leaders should encourage and reward faculty who participate

in existing programs like the American College of Cardiology's Internal Medicine Cardiology Program or a local mentor initiative through the office of diversity, equity, and inclusion. It is important to develop inclusion criteria for these programs, to ensure that they intentionally enhance diversity, equity, and inclusion objectives. Documenting and measuring sponsorship activities and the inclusivity of those activities can be a useful way to gauge outcomes. Examples may include nominations for awards, inclusion in writing collaborations and publications, communicating opportunities, and putting forward faculty and trainee names for new positions.

Leaders may need to be trained, with concrete examples, on effective ways to use these networking strategies. Examples may include:

- Task institutional or program leaders to host work-related events and reach out intentionally to those who have fewer connections.
- Set aside time in speaker or visiting professor schedules to meet with individual or small groups of residents or fellows, as well as faculty.
- Sponsor spaces and speakers to share stories of their career development through specific career sessions or women in medicine events.
- Invite individuals at different stages in their careers or with different areas of expertise to collaborate on the same project, to build connections and broaden networks.
- Recruit faculty with diverse networks, such as faculty not trained at the home institution or who come from different institutions than past recruits.

In summary, networking in academic medicine is a powerful tool. However, networking can also be a source of bias, leading to potential disparities and inequitable opportunities. Thus, it is essential that graduate medical education institutions address the "network gap" for those with reduced access. Intentionality in overcoming this bias by allowing equal access to networks and sponsorship opportunities, as well as democratizing access to people in powerful positions who are able to provide these opportunities, is imperative. Practical steps in closing the network gap include education and support at the individual level, in addition to systems-level education, programs, and data-driven accountability. Inclusivity is key.

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