

## **Appendix 1. Questions asked during semi-structured interviews.**

1. What adjectives would you use to describe yourself?  
What personal and professional titles would you use?  
Do you identify yourself as underrepresented in medicine? If so, how?
2. What was your career trajectory?
3. What is or might be your leadership philosophy or style?
4. How has your FM training informed your leadership style?
5. What helped you get here?
6. Which mission (of service, research, teaching, clinical) most helped you succeed as a leader and how?
7. What development or programs were pivotal to your growth? Such as courses, workshops, fellowships, professional organizations?
8. What were the biggest barriers that you had and how did you overcome them?
9. What advice would you give to someone interested in advancing in leadership?
  - a. What groups did you join?
  - b. Where did you receive support or mentorship?
  - c. Are there any pitfalls you would share as cautionary advice to a young leader?
10. Is there anything you would have done differently?
11. What was your biggest lesson learned?

## Appendix 2. Examples of quotes supporting self-reported leadership style philosophy

Codes for leadership style	Examples of quotes
Love over fear	I lead with love. If you lead out of fear, you will go in the wrong direction and I have learned that if I feel like I'm making a decision out of a fear, a state of fear, that it's usually the wrong decision. But if I make a decision and it comes from a place of compassion and love, it is always the right decision and that's really with anything
Elevating others to come together	I feel like if I'm doing my job, I'm helping elevate those individuals so that they can come together and create something that they individually could not create.
Investing in team	I definitely think being transparent, really investing in the folks on my team is a very high priority.
Focus on culture and values	I think the fundamental issue is, why? Why do you want that? I push people on this all the time...If you are not really oriented to a servant based leadership that focuses on culture and values, if you just think this is part of your expected career trajectory and there's even a hint that this is about you and not about the organization, then it's doomed to failure and doomed to not being fun.
Trust, respect, integrity, honest	I think that I am a trusting and accepting person. I think that in my leadership role I am quite tolerant of a wide range of ways that people contribute to the organization.
Provide resources	I think one of the best philosophies of a leader is to hire the right people, give them the resources that they need and get out of their way.
Servant leader	I've traditionally described myself as a servant leader. My job is to make sure that things work for people that are trying to work for me.
Defined by the success of others below	My job is to create the environment for you to be successful. So if you're being successful, then I'm being successful.
Relationship focused	Family docs are relationship kind of people. We know how to do that and, so, over time,... I realized that the techniques that we use with our patients can be very helpful in negotiation.
Let people be people	Over the years, I've learned a more relationship focused style. I've learned that no one ever meets my crazy standards, including myself half of the time. So I just have to learn to let people be human.
Assume best intentions	I try to take it from the kindness and a positive regard perspective...trying to take that breath and really thinking about, they thought they were doing probably the right thing even if it wasn't.
Approachable	I think approachability is probably number one.

Leading by example	I think that what others are looking at is: am I truly leading by example or not? So, I cannot ask others to do something if I'm not doing it myself.
Be the mechanism	I feel like I want to get the expertise from the people I'm working with and I really try to create a structure and mechanisms and relationships that would allow that.
Recognize talent	I try to lead and get out of the way. So I work hard to recognize talent.
Promote development	I think the philosophy is, I feel like, when I have a learner or a mentee, I really want to help them become the physician that they want to be. And that might be different than what I want, right?
Counseling skills	The best preparation that I had...was being a family doctor. I never knew what was going to walk into the door, so I had to be prepared to be diverse in problems. I had to understand systems thinking to understand how to approach problems. Hell of a lot of counseling skills, just like you do in the exam room with patients.
Educate/negotiate	A lot of education just like we do with patients, and a lot of negotiation, just like you do with families or sometimes you do with specialists and yourself and families. So absolutely, the thing that prepared me to do that role was being a family doctor.
Variety of perspectives/inclusive	I definitely take an inclusive approach to leadership. So I really like to get a broad range of perspectives and types of people around the metaphorical table, engaged in whatever we're doing.
Egalitarian and non hierarchy, democratic style, consensus	I think I've always been a very, very, let's be a democratic of the people, by the people type of person.
Participatory	I try to be participatory and I aim for consensus. I remember many times defining consensus for people in a variety of meetings at many organizations, and always use this definition. Consensus means not necessarily agreeing with, but being willing to live with a decision.
Transparency	Being honest and transparent with what you are doing in order to keep everyone else on board with the decisions that are being made or how you need to proceed with things.
Say yes to any challenge	Never being afraid to say yes to something that you've never done before. When someone gives you a challenge and you don't know what to do, take it. The worst thing that you can do is you can say, hey I can't do it, I thought I could, but I can't.
Driven by the why	Very much driven by the why. I say this all the time. I talk about our vision and my favorite definition of the word vision is: how is the world going to be different because of the work that we're doing together?
Setting a vision	I tend to set out a vision or a goal, and then give people a lot of autonomy to allow them to accomplish that goal.
Making bold choices, be the decision maker	But one thing that I've been recommended by my seniors is to also not be like, bashful about just making decisions myself.

Leading not managing	I focus a lot on leadership as leading people versus management which is managing things.
Pacesetter	I'm a little bit of a pacesetter. It's essentially: "hey, I'm going to work hard and show people how to do this" and then hope others adopt that similar attitude or trade.

**Appendix 3: Examples of quotes for representing how family medicine has shaped the approach to leadership**

Code	Examples
Population health approach	We're family docs because that's truly how you make people and populations healthier. If that's where everything is coming from, then you're going to get good people who want to be part of your team and want to do what you're doing and want to lean in and engage.
Seeks resources to answer problems	if you have a problem, do you know where to go to get that problem fixed?
Patient centeredness	I think also being very kind of patient or learner centered like centered on the needs of that as opposed to a structure philosophy.
People oriented	I think a lot of leaders focus a lot on the things first, financial skills, legal skills, whatever. I'm much more interested in leadership of people and building a very positive, supportive, aspirational culture and recruiting to that culture and leading with those values that are about people and about trust and about respect and about integrity and doing the right thing.
Approachable	We really are probably the most approachable, one of the most approachable physician types you call us that, that exists.
People skills	My job is to make sure that things work for people that are trying to work for me.
Desire to stay connected and involved	It's your desire to stay connected. It's your desire to stay involved. It's your desire to kind of step up and say: "I will accept this challenge and I will take this rule forward", and happy to kind of help out.
Interprofessional experience perspective	I think I often recognize like if something needs to be done, you know, just because there is a project that needs to be completed, maybe I'm not the best one to speak up first about it or maybe I'm not the right one to take it on right now.
Motivational Interviewing	In other words, when somebody's resistant, you know what's the underlying reason and what are they willing to do and how can we find common ground? It's almost like motivational interviewing.
Listening to every voice/listening skills	I listen to every voice. I care very much about making sure the janitor that's sweeping the floor in front of my office feels heard and I'd know him.
Engaged with everyone	I'll do town halls for our faculty and staff. A lot of times I'll open up with something funny or something personal...Usually it's either something where I'm making fun of myself or laughing about something that's happened, but it tends to be something like that, where I'm sharing something that's personal as a way of getting everyone sort of lightening the mood.

Team player	I think it's a give and take really. So I think, to be a good family physician you have to know how to play as a team and what a team does and what patient centeredness is really all about.
Give and take	I think it's been a give and take that my leadership informed my family doctoring.
Breadth of training	I think your training in family medicine positions you for incredible opportunity.
Comprehensive approach	I think that is because our comprehensive approach to care is transferable to any environment, to any setting, to any leadership opportunity, I think, that exists.
Took on opportunities	I think everything has been fairly intentional and as opportunities came along, I sort of applied and got it.
Continues to keep changing and growing	if I reflect back, me as a leader, as a Chief Resident is very different from me being a leader now and in the various different roles that I now have and certainly that that leadership style has changed. So, I think it continues to keep changing...growing.
Eager to participate and learn	Just being eager to participate in things and learn more. I think that that was probably part of the reason that I was even approached about [a position].
Chief resident	The leadership position as chief residents really that have been formative.
Compassion	I think that my family medicine background has just helped me be a more engaged and compassionate leader. We just care about each other. We care about our colleagues; we care about our students, our residents; we care about our staff members in the space of family medicine.
Align with others	I immediately aligned myself with the best educators .
Comfort with broad or unexpected issues	I think family physicians have the potential to be awesome academic leaders, even beyond department leadership, because of our training, because of our comfort with uncertainty, because of our comfort with a broad range of issues.
Comfort with uncertainty	I think we're comfortable with pace and uncertainty and I think we have a strong sense of ourselves, as professionals that helps a lot.
Comfort with working in the gray	We feel really comfortable with gray. We don't always have the answers right away. We're not black and white, but in some areas we may be, but for the most part we're comfortable with gray
Working in any environment	I think we should be leading everything just because we have the breadth of knowledge, the comprehensive approach...
Admit to not know everything	We're not embarrassed to say I don't know, we're not just missing you as a patient. We're actually saying let's figure this out...I think that philosophy helped me a lot in terms of me being very comfortable with who I am and I'm very comfortable with dealing with uncertainty,

n/a

I really feel that a leader is born, you know, people have some inherent characteristics that become leaders. Like, you can't, in my opinion, if I reflect back, you can't prepare a leader.

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**Appendix 4. Examples of professional development experiences**

<b>Type of Professional Development Experience</b>	<b>Examples of Professional Development Experience</b>
Professional Coaching	Hired a professional coach
Professional Development Programs	<p>American Association of Medical Colleges (AAMC) (Leadership Education and Development Certificate, Organizational Leadership in Academic Medicine for New Associate Deans and Department Chairs)</p> <p>Society of Teachers of Family Medicine (STFM) (Bishop Fellowship, Medical Student Educators' Development Institute)</p> <p>Association of Departments of Family Medicine (ADFM LEADS Fellowship)</p> <p>Center for Creative Leadership</p> <p>American Academy of Family Physicians (AAFP) (Chief Resident Leadership Development Program)</p> <p>American College of Physicians (Guided Fellowship Program)</p> <p>National Institute for Program Director Development</p> <p>Harvard Macy</p> <p>Centers for Disease Control and Prevention (Epidemiology Intelligence Service)</p> <p>Faculty Development Fellowship</p> <p>Internal and/or institutional faculty and leadership development programs</p> <p>Other fellowships (for aspiring deans, in behavioral science)</p>
Membership on Professional Committees	<p>STFM taskforce member</p> <p>Hospital board or taskforce member</p>
Self-Study	<p>Books</p> <p>LCME self-study</p>
Membership in Professional Organizations	<p>STFM</p> <p>AAFP, including state-chapters</p> <p>AAMC</p> <p>American College of Graduate Medical Education (ACGME)</p> <p>National Academy of Medicine</p>

**Appendix 5: Examples of quotes supporting what traits and skills have contributed to leadership trajectory**

<b>“Contributor”</b>	<b>Representative Quotes (Examples)</b>
Grit	I think I've always had grit. I, growing up in a disadvantaged home with little means, honestly, I had to work extra hard. In school I always wanted to be the high achiever. I always knew I wanted to go to college, and I really knew I wanted to be a doctor from the time I was very young.
Drive to be and do better	Everyone can be the best in the world. So it's not a one person thing, but if you're gonna do something make certain that it's 100% effort 100% of the time, and if it can't be, you have to step back and do the introspective work to figure out why it isn't and maybe it's because you chose the wrong thing, or maybe it's because there's another issue that needs to be resolved before you can come back and dedicate, and you need to deal with that.
Observant	I think, again, being an introvert has been very helpful to me, to basically be more of an observer.
Willing to take feedback	And always being willing to take feedback and make changes. You know, I mentioned I was probably too authoritarian and too demanding early on in my career and that kind of feedback is not easy to take. But being willing to hear it and change, is what enabled me then to go further.
Skill Mastery	I try and achieve mastery. And by mastery, I really do mean getting to that place where it becomes second nature, where you are the expert, and you're effortlessly gliding through your material. So number one is I've always had that attitude. So for me mastery was... What really took off when I began doing the research and the ground work around competency based education and that became the thing I was known for in family medicine. And I am certain I can say this, I was as informed about everything going on in that world as anyone in academic medicine, any specialty. And I know that because I didn't just speak to family docs. I was speaking to specialists across all fields.
Political Exposure	But my father believed that politics only should exist or the criteria by which you would judge politics or government was how well it could care for the least of the people, the most vulnerable of the people and that was the test and that the only reason for its existence was really to care for the least because in any society the people with the most would tend to do fine.
Luck	A lot of luck, I think. A lot of willingness to be flexible. Like I mentioned, I had no “you and me” plans. And then a very senior person who stepped down was like, he kind of told me that, “you're our number one choice after we asked these other three people and there's nobody else”.

Adaptability	And I think it was less about who has the most knowledge and skills and institutional memory and more of maybe who is on the opposite end of that. You know, I need to develop people who is most 'developable'. And so maybe that's what my appeal was, is that I had that adaptability.
Saying "yes" to opportunity	When people ask me for advice about career stuff, my advice is always to take advantage of the opportunities you are presented.
Always doing a good job	Always doing a good job, you know. Fulfilling my commitments. You know, if I said I was going to do something, I would do it. It may have taken longer than planned, but I would get it done and that also led to my being given other opportunities.
Active Mentee	I realize like no people are really busy and you have to like, come to people and come to them and say, 'hey, I'd like some advice' and as scary as that was, I got better mentors once I started doing that. I certainly had people who just like said, 'here let me mentor you'. And that was really important early on. But I think learning about how to do that, that was really important, particularly as I got... had more leadership opportunities and needed to develop more as a leader. I think in my career, it was really important to learn about how to be an active mentee.
Networking outside of FM	So I've been interdisciplinary or multidisciplinary. Try to embrace that, both for personal skills as well as for the benefit to the organization.
Networking inside FM	I didn't ever have a single mentor, but I certainly met people in similar roles or who had been before me who I could email or talk with or see at a conference. Some of them later became invitees to my department of my college as a visiting professor, sometimes for personal consultation, but often to benefit the college or the department because sometimes an external voice is more effective than an internal voice and change
Academic Fellowship	I did a two year academic fellowship that included a Master of Science of Public Health and I met weekly with a master medical educator, a PhD MED educator, who had literally written the book on adult learning theory and teaching. That was really my entry point into both academic medicine and my leadership career. Had that fellowship not happened, I'd probably be a practicing clinician somewhere.
Mentor/Sponsorship	Something that I might have never thought about looking at, but sponsorship in the setting of hard work, in the setting of ambition, in the setting of initiative, motivation, it's really important. I think those are the things that really help get anybody started, being someone's apprentice. Being on projects, when the more senior faculty let the junior faculty lead, those kinds of things

Professional Organizations	I learned a lot on the job, I learned a lot through STFM and other people and ADFM when I was a department chair. Those organizations and going to those meetings helped immensely. I didn't ever have a single mentor, but I certainly met people in similar roles or who had been before me who I could email or talk with or see at a conference.
Student government	Actually getting involved with the government... I actually like being at the table to help students and things we stood for. I maintained staying in student government for my four years and during medical school as well. I didn't think about it at the time, but I was picking up those skills during that time of the leading groups and leading for a cause and being involved with faculty at an early stage and the administrators and I think that really helped to create that skill set that I really needed so to speak as well. It also set up opportunities as well.
Clinical Leadership	Co-directorship and that seemed to work out, do your work in that clinic for you to take care. That opportunity, I really feel fortunate in the sense of being in the right place at the right time and having the right people around you to provide those opportunities. If I needed any help to learn some things I also found myself very lucky to be amongst people who believed in our potential but also provided those opportunities to increase your skill set. So whether it's going to a grant writing workshop to understand how to increase your skills on that or writing contracts or writing policy, my community health clinic that I worked for for about 8 years, provided them
Exposure to influential people	I was raised by my grandmother because both of my parents worked and she was probably the biggest influence for me in going into medicine. She was a herbalista, herbalist, and had her own patient clientele at home and I helped her with her herbal remedies and that's for the thing when I was a kid. The reason I'm telling you that is because again, that influenced me and again of learning more about my Latino community sort of thing and learning about traditional healing and then as a family physician, how I integrated that
Exposure to minority communities	So when we moved to DC, they intentionally moved to a community where we were the minority family and you know, really kind of felt like that was an experience that they felt. They wanted to be seen as living with people and among people and not trying to be segregated away from people.
Breadth of Experience	I think having a broad breadth of experiences as a chair and in the military and then in the civilian world, in my first job out of the military in Vermont, really put me in a great position.
Quality Improvement background	Doing QI actually got me, again, a lot of visibility on the university level on the health system level and enabled me to make connections. The network has been the other big tool in being able to advance.

**Appendix 6: Examples of quotes supporting the missions that have contributed to success in leadership**

<b>Mission attributed to leadership success</b>	<b>Representative Quotes (Examples)</b>
Service	I am a servant leader. I look for opportunities of service and early in my career I volunteered for everything. I mean if there was a committee opening about... I volunteered for everything. I wanted to be involved in everything and so I think that really for my promotion packet, when you look at it in writing, it's a lot of service, a significant amount of service...
Research	So if you look at the missions and you have to make a pyramid out of them, you could argue about what goes on the top and that kind of thing, but the foundation of the pyramid in my mind is always research and I think that research should drive our educational missions, our clinical mission, our community work
Teaching	Teaching and education was critical and by building a strong clinical program that took great care of the patients and that the hospital system really understood how important it was.
Clinical	When you are, when you strive to be a great clinician, and especially in family medicine, where you're led into people's lives in a way that no other professional lets you in, I think, you start to realize that... When somebody else's life is in your hands, that's a big deal. And when you experience the responsibility, not the burden, the responsibility that goes with that and you appreciate the impact that you have, those lessons are transferable to everywhere in life.

## Appendix 7: Examples of quotes for the biggest barriers or challenges to career advancement

Subtheme	Representative Quotes
Lack of family members in medicine	Not having family mentorship in higher education, not really having that voice that could say and guide you while you're trying to find your way, I think that's a barrier.
Imposter syndrome	So I think that there are barriers there that are partially real and partially in my head for sure. The whole idea of like fake it till you make it. I think that that's hard for women, it's hard for family docs. I mean, we know everyone in the world has impostor syndrome
System barriers	I think the biggest barriers were the high degree to which certain parts of the department or certain parts of the school, certain staff members, certain faculty members were just dug in and unwilling to change.
Not knowing what I didn't know	Early in my career, it was just not knowing and not knowing what I didn't know. I think one of the hard parts when your first Gen, and I imagine this first Gen of medicine, in addition to first Gen of college, it's a culture shock and not knowing.
Competing family, personal, and professional obligations;	So, my number one barrier was really that we were location locked, meaning I had to find opportunities where my husband was stationed in the Navy
Being Latino; Minority tax; Race	Yeah, the barriers I overcame was just being Latino. I mean, first, when people found out, I was always challenged. I was always, oh, you got it just because of affirmative action, you got it just because you were Latino sort of thing. That's even before people even know the merits.
Natural disasters	Everything in New Orleans is still either before Katrina or after Katrina, even now that it's almost 20 years later. It was a mixed bag. It was very difficult, but it was also in many ways an opportunity because two years after Katrina, I was so frustrated and burned out that it precipitated a sabbatical and I ended up working for a year and, during my sabbatical, with the state Department of Health and Hospitals, which exposed me to more advocacy, a policy type of stuff and another set of connections.

Gender; Perceptions of effective style as a woman leader

[institution] is an all-white, male institution when it comes to leaders, it's a cultural thing. Things are changing, but you have to be persistent, and at what your desires are. You sometimes just have to prove yourself that you are worth the opportunity that is at your door... When there are ... three white males and they're looking at a female who is not white...you can be easily overlooked. So, you really have to create your place and your worth... to prove yourself.