Leadership Development in Dental Education: Report on the ADEA Leadership Institute, 2000–08


Abstract: This report describes participants’ assessment of their experiences in the American Dental Education Association (ADEA) Leadership Institute program. The ADEA Leadership Institute is designed for mid-career faculty members who desire to attain administrative roles within their own or other institutions or enhance their effectiveness in these roles. This year-long program, conducted in four phases, is ADEA’s flagship career enhancement program and provides dental educators with perspectives about oral health policy and legislation, organization and financing of higher education, the dental school’s role within the parent institution, financial management, legal issues, recruiting faculty, and opportunities to acquire and practice skills associated with effective leadership. ADEA Leadership Institute Fellows also explore team-building, personality preferences, leadership styles, emotional intelligence, stress management, work-life balance, strategies for leading change, and giving and receiving feedback, as well as engaging in self- and peer assessment throughout the year. Each year up to twenty-one fellows are selected to participate in the institute in a competitive application process. In 2009, 149 fellows who participated in the institute from 2000 to 2008 were invited to take part in a survey to establish their profiles and academic leadership roles, determine their perceptions of the benefits from the institute curriculum, and elicit their suggestions for improvement. The survey response rate was 73 percent (n=109). Ninety-nine percent of respondents gave an overall positive assessment of their experiences. The most beneficial experiences, according to respondents, included networking with the program participants, advisors, and instructors (78 percent); self-discovery through self-assessments and evaluations (44 percent); and a 360° feedback process to provide additional reflection about areas for improvement (17 percent). Least beneficial experiences identified by survey respondents included sessions devoted to oral health legislation (33 percent), group projects (28 percent), and mentorship received during the institute year (12 percent). In the final part of the survey, participants provided suggestions for improvements and new areas for program planners to consider. Additions to the current curriculum (30 percent)—such as how to recruit and retain faculty—and advanced leadership training (15 percent)—including behavioral change theory—topped the improvement list. The results of this study indicate that the ADEA Leadership Institute is fulfilling its mission. Fellows are advancing in their careers and assuming administrative leadership roles within their home institutions while making scholarly contributions to the literature and undertaking leadership positions in ADEA.

For over a decade, the American Dental Education Association (ADEA) has addressed leadership development through formal educational programming. In 1994, the association, at the time named the American Association of Dental Schools (AADS), initiated the AADS Summer Program for its members. The five-day program continued to develop leaders in dental education through 1999, ceasing when grant support from its major source of funding expired. Approximately 120 dental and allied dental faculty members participated in the AADS Summer Program. In 2003, ADEA launched the ADEA Allied Dental Faculty Leadership Program. Just over 100 allied dental faculty members have participated in this five-day leadership development experience. The association began the ADEA Leadership Institute in
1999, and the year 2009 marked the tenth anniversary of ADEA’s most ambitious leadership development initiative.

The mission of the ADEA Leadership Institute is to develop the nation’s most promising faculty at academic dental institutions to assume leadership positions in academic dentistry and higher education. Each year up to twenty-one participants, designated as ADEA Leadership Institute Fellows, are selected to attend the institute in a competitive application process. With the 2009–10 class, 191 dental school faculty members and administrators from over fifty dental, allied dental, and advanced dental education programs and institutions will have completed the institute.

### Overview of the ADEA Leadership Institute

Figure 1 depicts the institute’s year-long program in four phases along with key topics from the curriculum. In addition, fellows participate in a

<table>
<thead>
<tr>
<th>Phase</th>
<th>Focus</th>
<th>Key Topics</th>
</tr>
</thead>
</table>
| I     | Personal and Interpersonal Competencies for Leadership | • Leadership development and theories of leadership  
 • Team-building  
 • Personality preferences and leadership  
 • Peer assessment  
 • Transformational and transactional leadership  
 • Mentoring  
 • Personal leadership  
 • Stress management  
 • Organizational structure and management  
 • Giving and receiving feedback |
| II    | Legislative Workshop | • Graduate medical education  
 • Strategies for congressional visits  
 • Access to oral health care  
 • National Health Service Corps  
 • Budget, appropriations, and authorization processes  
 • Dental and craniofacial research opportunities  
 • Visits to Capitol Hill to interact with legislators  
 • Trends in dental education |
| III   | Administrative Competencies for Leadership | • The role of the dental school or program in the parent institution  
 • Job search and interviewing  
 • Budgeting and financial management  
 • Legal issues in academic leadership  
 • Strategic planning |
| IV    | Faculty Development Workshop | • Fellows contribute to a full-day development program. Themes and format vary from year to year. |

*Figure 1. The four phases of the ADEA Leadership Institute*
half-day orientation at the ADEA Annual Session & Exhibition. While most of the curriculum has remained relatively constant since the institute’s inception, changes are made from year to year based on participant feedback. This description of the curriculum is based on the most recent three years of the institute. The curriculum has been influenced by a variety of factors, including two studies that delineated competencies for successful leadership in dental education based on profiles of dental school deans, literature on leadership development, the format and content of other successful leadership programs, and the lead author’s experience in creating and conducting leadership growth experiences in higher education for nearly two decades. The curriculum is built on a model of competency defined by knowledge, skills, and attitudes, including values. As described below, the ADEA Leadership Institute addresses each of these areas.

Nomination. Participation in the ADEA Leadership Institute is based on a competitive application process. A faculty member must be nominated to participate as an ADEA Leadership Institute Fellow by his or her dean, program director, or equivalent administrative leader at an ADEA member institution. A nominee must have demonstrated leadership at the institution, in the community, or through research. Evidence of leadership may include outstanding success in past and current positions; a clear track record of increasing administrative responsibilities; experience with additional responsibilities such as chairing committees, advising student groups, or mentoring students and faculty; and development of local, regional, or national faculty development workshops or community outreach programs. A nominee must have a record of scholarly contributions to dental education through teaching or research. Three advisors, who are senior positional leaders in dental education, serve as the selection committee for each class.

Orientation. Before the ADEA Leadership Institute formally begins, new fellows participate in a half-day orientation at the ADEA Annual Session & Exhibition. After this and before Phase I, fellows complete preparatory work (e.g., personality and leadership assessments, reading assignments, and meetings with their deans) and receive their peer group assignments for projects and interviews. In preparation for the orientation, fellows are placed into peer groups: groups of seven individuals who work together as a team on various projects and other activities throughout the year. Each peer group is assigned an advisor, usually a dental school dean or an executive associate dean, who works with the group throughout the year.

Phase I. Personal and Interpersonal Competencies for Leadership. Phase I is an intensive, five-day program covering theories of leadership, team-building, personality preferences and leadership styles, peer assessment, mentoring, emotional intelligence, stress management, work-life balance, organizational theory, strategies for leading change, and giving and receiving feedback. Prior to and during Phase I, fellows create career development plans including professional goals. Advisors meet individually with each fellow during Phase I to discuss his or her career plans.

Phase II. Legislative Advocacy Workshop. During the three-day second phase, fellows focus on public policy, working with the ADEA Center for Public Policy and Advocacy. Fellows receive a thorough introduction to critical issues in oral health, dental education, and higher education and are guided through meetings with their congressional representatives on Capitol Hill. Phase II sessions address budget, appropriations, and authorization processes; legislation about access to oral health care; support for dental and craniofacial research; federal student assistance programs; and graduate medical education, the Ryan White CARE Act, and the National Health Service Corps.

Phase III. Administrative Competencies for Leadership. Phase III promotes the development of administrative and management competencies necessary for leadership. Primary topics in this four-day phase include the position of the academic dental institution within the parent institution, negotiation, strategic planning, budgeting and financial management, risk management and legal issues, and conducting job searches and interviewing.

Phase IV. Integration. Fellows and their deans, program directors, and mentors celebrate with a commencement dinner the evening before the ADEA Annual Session & Exhibition begins. During the Annual Session, the fellows conduct a full-day faculty development workshop, known as the ADEA Signature Series, that is open to all ADEA members. Fellows are also formally recognized at a plenary session and interact with alumni through the ADEA Leadership Institute Alumni Association.

Between the Phases: Leadership Interviews and Critical Issue Position Paper. Beginning with a series of interviews with academic, dental, and legislative leaders (e.g., university president or provost, vice president for development, vice president for...
academic affairs, state legislator, and state leaders in organized dentistry), fellows seek to broaden their understanding of major issues facing their schools’ parent institutions while at the same time developing comprehension of how these issues influence dental education and oral health care. Working through their peer groups, the fellows select interviewees, develop interview questions, and determine roles for converting information into presentations of their findings in Phase II.

In addition to their interviews, each peer group investigates and writes a position paper on a critical issue facing dental education. Through this process, fellows acquire a thorough understanding of an oral health care issue and explore the associated educational ramifications; develop an appreciation of the perspectives of the academic dental institution, the parent university, and the external environment (e.g., organized dentistry, state legislature) related to this issue; gain experience in functioning as a team; and prepare and submit a manuscript for publication.

Dr. Larry Breeding, a 2001 graduate of the ADEA Leadership Institute, conducted the first follow-up study of ADEA Leadership Institute alumni as a part of an ADEA/William J. Gies Fellowship in 2003. Participants from the 2000, 2001, and 2002 ADEA Leadership Institute classes responded to this survey. While the survey contributed to improvements in the curriculum, the results were not published. The 2008 ADEA Deans’ Conference, the theme of which was “Who Will Lead Dental Education?,” served as impetus for the current study. Organizers of the conference requested that the lead author present information describing the curriculum model, outcomes, and deans’ roles associated with the ADEA Leadership Institute. Initial findings were presented at the 2008 ADEA Deans’ Conference. For the purposes of this report, additional analysis has been conducted.

**Methodology: ADEA Leadership Institute Alumni Survey (2000–08)**

The current outcomes survey instrument was informed by Breeding’s 2003 study and designed by the Academy for Academic Leadership. The survey utilized an online format—a template programmed by survey software provider SurveyMonkey.com—and employed a combination of forced choices, multiple allowable answers, and open-ended reporting. The instrument was divided into four parts, each corresponding to one of the survey’s objectives:

- **Objective 1: Develop a profile of ADEA Leadership Institute Fellows.** In the first portion of the survey, twenty-five questions were used to build the fellows’ profiles. Items of inquiry included demographics, the parent institutions that employed them, their degrees and primary discipline, the year they graduated from the institute, the reason they applied to the institute, and questions to ascertain fellows’ perception of their progress in their academic careers after graduating from the ADEA Leadership Institute. Other questions in this section of the survey elicited data that will be used in the future to develop a profile of fellows as they entered the program, which will facilitate longitudinal tracking.

- **Objective 2: Ascertain what leadership roles fellows have played or are now playing subsequent to their ADEA Leadership Institute participation.** Part Two contained five questions that enabled the fellows to report their leadership activities subsequent to their participation in the institute, including leadership positions in ADEA, other national organizations, and their parent institution, dental school, or academic dentistry program.

- **Objective 3: Determine perceptions of the benefits of the ADEA Leadership Institute.** Thirteen questions in the third section assessed the fellows’ perceptions of the institute curriculum, from their overall evaluation—and whether they would recommend the institute to others—to their interactions with their dean/mentor, ADEA Leadership Institute advisor, and peers in the program.

- **Objective 4: Identify areas for improvement in the institute and its alumni association.** The final part provided fellows with the opportunity to respond to six questions about the most valuable and least valuable experiences in the program, ideas for improvement of the institute, and suggestions for improvements for the alumni association.

In September 2008, the seven members of the ADEA Leadership Institute Alumni Association Board and the two ADEA Leadership Institute advisors pilot-tested the questionnaire. Their feedback was incorporated into the survey, and it was prepared for distribution.

The Academy for Academic Leadership provided the final version electronically to 149 fellows—all of the fellows whose contact information
on file remained valid—in October 2008. These fellows comprised the eight graduating classes, from 2000 to 2008 (the institute did not convene in 2003). The lead author sent an e-mail message to each fellow, informing the recipients of the objectives of the survey, the due date for responses, and the intended usage of the data. Recipients were told that providing names was optional and that no individuals would be identified in any subsequent publications or presentations and no answer would be directly attributed to a specific fellow. The URL address and survey identifier included in this e-mail directed respondents to the ADEA Leadership Institute Alumni Survey on the SurveyMonkey.com website. The lead author requested all recipients to respond within two weeks. A follow-up reminder was sent after one week.

Results

Objective 1: Profile of Fellows

A total of 109 ADEA Leadership Institute Fellows submitted completed surveys for a 73 percent response rate (109/149). Where a response was not required by the survey instrument, some respondents skipped the question entirely or skipped items within the question, yielding an actual number of responses between 103 and 109 for any given question. Table 1 shows the response rate from each class. The Class of 2005 comprised the largest number of respondents, with nineteen of the 109 survey participants identifying themselves as members of this class.

All respondents reported they were full-time faculty members employed in dental education at the time they participated in the institute, and the majority were tenured (Table 2). The average age of all respondents in the year they graduated from the institute was forty-seven years of age, the median age was forty-eight, and, while the population of those replying was multi-modal, the largest mode was fifty-one years of age. Age of respondents during their fellowship year is shown in Figure 2. Associate professors constituted the majority of survey respondents, with full professors and assistant professors making up most of the remainder (Figure 3).

Respondents identified more than fifty universities, medical centers, and community colleges as their place of current employment. Several respondents indicated that they were now in private practice or were retired. Eighty-three percent of respondents held D.D.S./D.M.D. degrees; nearly 60 percent reported an M.S. or certificate in a dental specialty area. Eighteen percent (twenty) of respondents indicated that they held a Ph.D. While the primary discipline/field of study of respondents varied widely, the top four by percentage were as follows: general dentistry—27 percent (twenty-nine); prosthodontics—12 percent (thirteen); periodontics—12 percent (thirteen); and dental hygiene—11 percent (twelve).

Just over half of the respondents were male, and the large majority of both males and females were white/Caucasian (Table 3). Respondents were requested to indicate their academic rank when they participated in the institute and their current academic rank. The number reporting their current rank as associate professor or assistant professor fell by 16 percent, and the number of professors increased by this same percentage. Figure 3 shows these position changes. In a separate survey item, twelve individuals (11 percent) indicated that they had achieved tenure since participating in the institute.

Table 1. Survey respondents’ year of graduation from the ADEA Leadership Institute, by number and percentage of total respondents

<table>
<thead>
<tr>
<th>Class</th>
<th>Survey Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class 1: 2000</td>
<td>9 (8%)</td>
</tr>
<tr>
<td>Class 2: 2001</td>
<td>12 (11%)</td>
</tr>
<tr>
<td>Class 3: 2002</td>
<td>10 (9%)</td>
</tr>
<tr>
<td>Class 4: 2004</td>
<td>15 (14%)</td>
</tr>
<tr>
<td>Class 5: 2005</td>
<td>19 (17%)</td>
</tr>
<tr>
<td>Class 6: 2006</td>
<td>16 (15%)</td>
</tr>
<tr>
<td>Class 7: 2007</td>
<td>15 (14%)</td>
</tr>
<tr>
<td>Class 8: 2008</td>
<td>2 (2%)</td>
</tr>
</tbody>
</table>

Note: There was no institute in 2003. Percentages may not add up to 100% due to rounding.

Table 2. Survey respondents by academic status and rank at their time of fellowship, by number and percentage of total respondents

<table>
<thead>
<tr>
<th>Academic Status</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time</td>
<td>100%</td>
<td>109</td>
</tr>
<tr>
<td>Employed in dental education</td>
<td>100%</td>
<td>109</td>
</tr>
<tr>
<td>Tenured</td>
<td>56%</td>
<td>61</td>
</tr>
<tr>
<td>Untenured</td>
<td>34%</td>
<td>37</td>
</tr>
<tr>
<td>Other</td>
<td>10%</td>
<td>11</td>
</tr>
</tbody>
</table>

Note: Five respondents answering Other to the academic rank question specified Clinical Associate Professor—these were moved from the Other category to Associate Professor to derive the percentages in this table.
Figure 2. Survey respondents by age, by number and percentage of total respondents

Figure 3. Survey respondents by current academic rank and rank at their time of fellowship, by number and percentage of total respondents

Note: Percentages may not add up to 100% due to rounding. Where respondents answered Other, for example, by specifying Clinical Associate Professor, these were moved from the Other category to Associate Professor to derive the percentages in the figure.
Figure 4 compares administrative experience before and after participation in the institute. Forty-seven percent of respondents reported that they had experienced substantial (four years or more) administrative experience after the institute. Approximately 33 percent of survey respondents reported substantial administrative experience prior to the institute. The increase in administrative responsibilities experienced by many fellows is consistent with the career ambitions of the respondents that are displayed in Table 4. Notably, 52 percent of respondents identified the positions of dean or associate dean as their ultimate career goal.

**Objective 2: Post-Institute Leadership Activities**

Twenty-five percent of respondents reported they had engaged in additional formal leadership training since completing the ADEA Leadership Institute. Examples include leadership programs through their parent university, the Hedwig van Ameringen Executive Leadership in Academic Medicine (ELAM) Program for Women, and the Signature Series at the ADEA Annual Session and Exhibition. Additionally, forty-seven respondents (43 percent) reported they have held or currently hold leadership positions within ADEA. ADEA leadership responsibilities among fellows ranged from class representative and board member in the ADEA Leadership Institute Alumni Association, to officers in ADEA Sections, to ADEA Council vice presidents serving on the ADEA Board of Directors. The fellows also reported leadership activities in other organizations. Fifty-four percent listed leadership roles in other national organizations, including

<table>
<thead>
<tr>
<th>Table 3. Survey respondent demographics by gender, race, and ethnicity, by number and percentage of total respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demographic Category</td>
</tr>
<tr>
<td>Male</td>
</tr>
<tr>
<td>Female</td>
</tr>
<tr>
<td>White/Caucasian</td>
</tr>
<tr>
<td>Hispanic</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>African American</td>
</tr>
</tbody>
</table>

*Note: Percentages may not add up to 100% due to rounding.*

![Figure 4](Image)
one who served as the president of a major dental specialty association, and others who served on the Commission on Dental Accreditation (CODA), the American Dental Association (ADA) Council on Dental Education and Licensure (CDEL), the ADA Council on Scientific Affairs, and the Joint Commission on National Dental Examinations. Almost three-quarters of respondents reported that they currently hold a position of responsibility within their own dental school, from deans of dental schools to program directors and department chairs.

Objective 3: Perceptions of Benefits

All but one of 104 responding fellows (99 percent) gave a positive assessment of their institute experiences (five respondents skipped the question, and one indicated a “neither negative nor positive” experience). Likewise, all but one individual (99 percent) indicated they would recommend the institute to others. Of the 103 with a positive experience, eighty-one (79 percent) rated their experience as “highly positive.” Representative comments that accompanied these ratings included the following:

• “I can honestly say that I would not be as effective in my current positions had I not participated in the Leadership Institute. The respect I have gained by both my dental and dental hygiene colleagues is very rewarding. I have grown considerably and truly value the experiences I gained.”
• “The mountain-top experience of interacting with and learning from leaders as well as colleagues from around the country was priceless. It was exceptional to have been a participant in the ADEA Leadership Institute, and the self-reflective components complimented the leadership personal interactions.”
• “[I] highly value these experiences and recommend it to anyone interested in leadership positions in dental education or professional dentistry.”

Respondents also were asked to assess the importance of the program to their advancement and provide evaluations of specific portions of the curriculum. Responses to these questions are displayed in Table 5. Seventy-two percent (seventy-five respondents) indicated that the ADEA Leadership Institute had been important or very important to their career advancement. Table 5 also shows the fellows’ ratings of each institute phase, components of the institute (such as interacting with an advisor), and the peer group project. Ratings were selected from four options: unimportant to somewhat important, neither important or unimportant, important to very important, and not applicable. Phase I (personal and interpersonal competencies for leadership) and Phase III (administrative competencies for leadership) were rated as important/very important by 96 percent and 92 percent of respondents, respectively. Phase III (policy and legislative workshop) was rated as important/very important by 73 percent, and Phase IV (Signature Series, ADEA Annual Session activities) was rated as important/very important by 63 percent. For program components, interacting with other fellows received the highest rating (97 percent rated it as rated as important/very important), followed by becoming part of a fellows network (84 percent important/very important), interacting with an institute advisor (72 percent important/very important), and interacting with the individual’s dean/

Table 4. Ultimate career goal of survey respondents, by number and percentage of total respondents

<table>
<thead>
<tr>
<th>Ultimate Career Goal</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Associate/assistant dean</td>
<td>34% (37)</td>
</tr>
<tr>
<td>Dean</td>
<td>18% (20)</td>
</tr>
<tr>
<td>Department chair or head</td>
<td>6% (7)</td>
</tr>
<tr>
<td>Associate/assistant vice president or provost</td>
<td>6% (6)</td>
</tr>
<tr>
<td>Program director</td>
<td>6% (6)</td>
</tr>
<tr>
<td>Vice president or provost</td>
<td>5% (5)</td>
</tr>
<tr>
<td>Chief executive officer: president or chancellor</td>
<td>4% (4)</td>
</tr>
<tr>
<td>Faculty member</td>
<td>4% (4)</td>
</tr>
<tr>
<td>Not applicable: I plan to move (or have already moved out of dental education)</td>
<td>4% (4)</td>
</tr>
<tr>
<td>Other</td>
<td>15% (16)</td>
</tr>
</tbody>
</table>

Note: Fifty percent of respondents answering “Other” specified they did not know their ultimate career goal. The remaining 50 percent wanted to remain in their present position or specified a choice other than those listed. Percentages may not add up to 100% due to rounding.
Table 5. Evaluation of program importance (by number and percentage of total respondents)

<table>
<thead>
<tr>
<th>Area</th>
<th>Unimportant to Somewhat Important</th>
<th>Neither Important nor Unimportant</th>
<th>Important to Very Important</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>How important has the ADEA Leadership Institute been to your advancement?</td>
<td>4% (4)</td>
<td>24% (25)</td>
<td>72% (75)</td>
<td>0</td>
</tr>
<tr>
<td>How important were the following phases?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phase I (Personal and Interpersonal Competencies for Leadership)</td>
<td>2% (2)</td>
<td>1% (1)</td>
<td>96% (101)</td>
<td>0</td>
</tr>
<tr>
<td>Phase II (Policy and Legislative Workshop)</td>
<td>8% (8)</td>
<td>15% (16)</td>
<td>73% (76)</td>
<td>4% (4)</td>
</tr>
<tr>
<td>Phase III (Administrative Competencies for Leadership)</td>
<td>1% (1)</td>
<td>4% (4)</td>
<td>92% (95)</td>
<td>4% (4)</td>
</tr>
<tr>
<td>Phase IV (Signature Series, Annual Session activities)</td>
<td>9% (9)</td>
<td>21% (22)</td>
<td>63% (66)</td>
<td>7% (7)</td>
</tr>
<tr>
<td>How important were the following components?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interacting with my dean/sponsor</td>
<td>20% (20)</td>
<td>10% (10)</td>
<td>68% (70)</td>
<td>3% (4)</td>
</tr>
<tr>
<td>Interacting with my institute advisor</td>
<td>11% (11)</td>
<td>14% (15)</td>
<td>72% (74)</td>
<td>4% (4)</td>
</tr>
<tr>
<td>Interacting with other fellows during the institute</td>
<td>1% (1)</td>
<td>2% (2)</td>
<td>97% (101)</td>
<td>0</td>
</tr>
<tr>
<td>Becoming part of the network of fellows</td>
<td>8% (8)</td>
<td>9% (9)</td>
<td>84% (87)</td>
<td>0</td>
</tr>
<tr>
<td>Other components</td>
<td>8% (8)</td>
<td>16% (17)</td>
<td>54% (56)</td>
<td>22% (23)</td>
</tr>
<tr>
<td>How important was the class project?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Classes 1–3 (2000–02): individual project</td>
<td>37% (11)</td>
<td>3% (1)</td>
<td>60% (18)</td>
<td>0</td>
</tr>
<tr>
<td>Classes 4–6 (2004–06): group project, position paper based on interviews</td>
<td>10% (5)</td>
<td>20% (10)</td>
<td>69% (34)</td>
<td>0</td>
</tr>
<tr>
<td>Classes 7–8 (2007–08): group project, position paper, and interviews addressed independently</td>
<td>7% (2)</td>
<td>14% (4)</td>
<td>79% (33)</td>
<td>0</td>
</tr>
</tbody>
</table>

Note: Percentages may not add up to 100% due to rounding.

Objective 4: Areas for Improvement

Open-ended questions on the survey solicited fellows’ responses about their leadership roles concurrent with and since their fellowship year, the most valuable and least valuable experiences in the program, ideas for improvement of the institute, and additional suggestions for the alumni association and program overall. Qualitative analysis of this narrative input utilized the framework developed by Miles and Huberman and reflected by the National Science Foundation to reduce and display survey data as well as draw and verify conclusions.10,11 The rate of response ranged from 47 percent for the question “How could ADEA improve the Leadership Institute?” to 94 percent for “Please provide any additional comments or suggestions about the ADEA Leadership Institute, including comments about how the ADEA Leadership Institute Alumni Association could be of more benefit to you,” though nearly thirty of the latter statements were purely laudatory or noted that the respondent did not have any additional comments. Three independent reviews of the responses were compared to each other to produce the summary that appears in Appendix B.
In response to questions about the most valuable and least valuable experiences of their fellowship year, several themes were identified. These are explicated more fully in Appendix B, but Tables 6 and 7 summarize the key points. A total of 100 fellows supplied “most valuable experience” citations, and fifty-seven provided “least valuable experience” comments. As might be expected, however, sessions that appealed greatly to some held less value for others. Thus, fraternity among the fellows ranked as the most valuable experience, yet team-building exercises were also cited as being among the least valuable for others. The group project was praised and criticized by nearly the same number of individuals (thirteen and sixteen respectively). Overall, the open-ended narrative comments suggest that a majority benefited from the networking and fellowship with their peers, advisors, and instructors, and over half of the respondents enjoyed learning about themselves through self-assessments and feedback tools. A third of the respondents cited the legislative session in Phase II as a lesser valued experience in the program. However, nine other fellows identified the legislative workshop as among the most valuable experiences.

Table 8 provides another way to assess the legacy of the ADEA Leadership Institute experience, by examining the effect of the program on long-term career aspirations. More than half of the respondents reported that the experience confirmed their decision to pursue an administrative leadership position. The rigors of academic leadership suggested by the institute curriculum also convinced some fellows that they did not desire additional administrative responsibilities. In fact, many of the respondents who selected the “Other” choice commented they were considering limiting their aspirations to a position of lower authority or decided to change career directions. For example, one participant commented, “Convinced me I did not want to go into administration above chair—possibly assistant/associate dean level.” Another respondent reported, “I’m not as sure that I want to pursue administrative advancement. The nice thing is I feel comfortable knowing that I don’t have to do it if it isn’t right for me. The fellowship gave me the knowledge and personal insight to help with my future career decisions.”

Future Directions for the ADEA Leadership Institute

The final portion of the survey sought to identify unmet needs and future potential training for fellows and determine the likelihood they will participate in the ADEA Leadership Institute Alumni Association activities. This section of the survey also invited participants to comment on any aspects of
the ADEA Leadership Institute and its alumni association. Table 9 summarizes the areas where fellows would like additional training. The responses indicate that training about monetary issues—finance, budgeting, fundraising—is a perceived need among them.

Table 10 shows responses to the question “How could ADEA improve the Leadership Institute?” These responses ranged from specific coursework additions to general statements about the need to involve deans in the program to a greater extent, with very few respondents recommending the same or even similar concepts. Appendix B describes the many themes that were elicited by this question.

The final item of the questionnaire invited respondents to provide additional comments. Not surprisingly, some of these ideas echoed the improvement suggestions summarized in Table 10. However, others raised entirely new areas for consideration. Primary among these new ideas, as shown in Table 11, were two means of enabling fellows to stay in touch while absorbing new leadership concepts and exchanging lessons learned: via a regularly scheduled newsletter and through a website with blog, chat room, message board, or other means of maintaining and expanding a social network. A more basic, frequent suggestion concerned the alumni association. Some respondents expressed the need to learn more about the mission and work of the association, while others want the association to be much more visible within ADEA. Appendix B also provides details of the most frequent responses to the request for additional comments.

**Discussion**

The ADEA Leadership Institute plays a pivotal role in the association’s faculty development
initiatives. Not only is it ADEA’s most extensive professional development experience, consisting of approximately fourteen total days of onsite programming plus substantial project work between phases, the institute is the association’s primary means of developing current and future administrative leaders. The ADEA Leadership Institute is aimed at experienced rather than early career faculty. In 2008, Haden et al. reported that tenured associate professors in dental schools indicated statistically higher levels of career dissatisfaction than their colleagues. The authors of that study suggested that dental schools should create more or better professional development opportunities for mid-career dental faculty. In this study of the ADEA Leadership Institute alumni, more than half of respondents easily fit the profile of

Table 9. Areas where fellows believe they need more training—up to three selections, by number and percentage of total respondents

<table>
<thead>
<tr>
<th>Areas</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial/budget management</td>
<td>52% (53)</td>
</tr>
<tr>
<td>Fundraising</td>
<td>42% (43)</td>
</tr>
<tr>
<td>Interaction with parent university (senior administration)</td>
<td>32% (33)</td>
</tr>
<tr>
<td>Personnel management (faculty)</td>
<td>21% (22)</td>
</tr>
<tr>
<td>Time management</td>
<td>19% (20)</td>
</tr>
<tr>
<td>Research programs</td>
<td>19% (20)</td>
</tr>
<tr>
<td>Technology applications</td>
<td>18% (18)</td>
</tr>
<tr>
<td>Personnel management (staff)</td>
<td>15% (15)</td>
</tr>
<tr>
<td>Curriculum (including accreditation if applicable)</td>
<td>15% (15)</td>
</tr>
<tr>
<td>Interaction with other schools and groups at parent institution</td>
<td>9% (9)</td>
</tr>
<tr>
<td>Interaction with alumni/former students</td>
<td>9% (9)</td>
</tr>
<tr>
<td>Other</td>
<td>8% (8)</td>
</tr>
<tr>
<td>Interaction with the practicing community</td>
<td>6% (6)</td>
</tr>
<tr>
<td>Clinics/patient care (students)</td>
<td>4% (4)</td>
</tr>
<tr>
<td>Student relations</td>
<td>3% (3)</td>
</tr>
</tbody>
</table>

Note: Percentages do not add up to 100% due to multiple allowable responses.

Table 10. The top five suggestions for improving the ADEA Leadership Institute, by number and percentage of total respondents

<table>
<thead>
<tr>
<th>Suggestions for Improvement</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Additions to current curriculum</td>
<td>30% (14)</td>
</tr>
<tr>
<td>Additional leadership training</td>
<td>15% (7)</td>
</tr>
<tr>
<td>Get deans more involved</td>
<td>10% (5)</td>
</tr>
<tr>
<td>Allocate more time to plan and complete group paper</td>
<td>5% (2)</td>
</tr>
<tr>
<td>Host the phases in hub-airport cities for ease of travel</td>
<td>5% (2)</td>
</tr>
</tbody>
</table>

Note: Percentages do not add up to 100% due to multiple allowable responses.

Table 11. The top five additional comments about the ADEA Leadership Institute and Alumni Association, by number and percentage of total respondents

<table>
<thead>
<tr>
<th>Additional Comments</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advanced leadership training for alumni</td>
<td>23% (18)</td>
</tr>
<tr>
<td>Alumni association should be more active and visible</td>
<td>14% (11)</td>
</tr>
<tr>
<td>A regular newsletter for additional leadership guidance and program and alumni updates</td>
<td>13% (10)</td>
</tr>
<tr>
<td>ADEA/alumni association should provide career development</td>
<td>8% (6)</td>
</tr>
<tr>
<td>Provide website/blog/chat room so alumni can continue to network and share</td>
<td>8% (6)</td>
</tr>
</tbody>
</table>

Note: Percentages do not add up to 100% due to multiple allowable responses.
mid-career faculty. While the survey gives no indication about the work satisfaction of the fellows, the institute addresses the unique needs of mid-career faculty who desire to improve their leadership skills and assume further administrative responsibilities.

Each year ADEA receives more applications than available positions for admission to the ADEA Leadership Institute. Its size has remained relatively small, capped at twenty-one, to foster the camaraderie and interactive nature of the onsite phases that fellows rate so highly. The popularity of the institute has increased over the years due in part to the favorable recommendations of alumni. Given its mission and relatively rigorous expectations of applicants’ qualifications, the ADEA Leadership Institute, in contrast to the AADS Summer Program, does not provide easy access for early-career faculty or some clinical-track faculty. With large numbers of faculty members at the assistant professor rank departing dental education for private practice, a need likely exists for career development experiences for junior faculty.13 The ADEA Leadership Institute Alumni Association is beginning to address this need through a series of Lunch and Learn programs addressing leadership issues at the 2010 ADEA Annual Session. Ideally, this initial effort by the alumni association should lead to a more comprehensive and organized effort by ADEA Leadership Institute Fellows to mentor and develop new faculty.

From its roots in the AADS Summer Program to its current form, the ADEA Leadership Institute continues to evolve. Changes have occurred in response to the changing academic environment, but many more modifications have taken place as a result of fellows’ evaluations of their experience. During the first three years of the ADEA Leadership Institute, projects were pursued by each individual at his or her home institution. There was little interaction among fellows between phases, and often projects focused on narrow issues or unique school problems that had little to do with leadership. Much greater interaction occurs among the fellows between phases since the group projects were introduced. Nearly eight out of ten of those participating in the survey cited the development of camaraderie with their peers and instructors as among the most valuable experiences of their fellowship year.

Team-building, peer-to-peer feedback and coaching, networking, and group learning reinforce all aspects of the formal curriculum. The survey indicates that it is the informal or tacit curriculum created by the interaction of the fellows that is essential to the overall experience. Observations by several of the respondents suggest that when peer groups do not function well together, the individual fellow’s overall experience is diminished significantly. Group problems, when they occur, are usually first manifest in difficulty completing the group projects. In spite of occasional challenges and the extensive time commitment required by the between-phase projects, estimated to be between forty and sixty hours for most fellows, the benefits in fostering camaraderie, teamwork, and group learning outweigh any negative aspects.

Likewise, important changes have taken place in Phase II. The Legislative Advocacy Workshop was introduced in the institute in 2002. Within the past two years, Phase II has incorporated more roleplays and additional preparation time, so that fellows feel better prepared for the Phase II application experience of meeting with legislators on Capitol Hill. Since the addition of the legislative workshop to the institute, ADEA Leadership Institute Fellows have made nearly 500 visits to legislative offices on Capitol Hill to advocate for oral health and related dental education issues. Many alumni continue their advocacy efforts as a part of the ADEA Center for Public Policy and Advocacy’s network and fellowships. Advocacy, whether during or after the formal program, is leadership in action.

The survey examined the experience of fellows in relation to their deans or mentors at their home institutions. While 66 percent rated that experience as good to excellent, one-third of alumni indicated that the experience was poor or only adequate. Opportunities to apply leadership concepts and skills within a fellow’s home environment are critical to the translation of these capacities into routine use and to the capacity to share newly acquired skills with colleagues. To that end, the support of the dean in specific ways that reinforce the onsite experiences (e.g., at the home institution) of fellows is vital to the overall success of the program.

Prior to addressing the ADEA Deans’ Conference in 2008 to present preliminary survey findings, the lead author interviewed by telephone eight deans who have nominated faculty for the institute on a regular basis since it began in 1999. The purpose of these interviews was to discover how they supported the fellow during his or her fellowship year. In general, support included regular meetings, new responsibilities for application of learning, and greater involvement of the fellow in the parent university. Table 12 summarizes these supporting activities. These types
of activities should be woven into the experience of all ADEA Leadership Institute Fellows during their fellowship year.

Conclusion

Is the ADEA Leadership Institute accomplishing its mission? The present study sought only to solicit information from alumni about their careers and opinions about their ADEA Leadership Institute experiences. There is no control group for comparison of career changes or other survey items. Perhaps such a study would prove useful, but the number of variables would likely present a significant challenge to conclusive evidence that the institute is the cause of one person’s advancement (or lack thereof). However, there are a number of definitive conclusions from the current study. Among them are the following:

- The majority of fellows see their institute experience as important to their career advancement; networking with other fellows is highly valued for learning and support.
- The fellowship year influenced long-term career aspirations of a significant majority of fellows.
- Fellows have made scholarly contributions to the literature as a consequence of the group project and resulting manuscripts developed during the institute.
- Alumni have assumed leadership positions in ADEA, at their home institutions, in organized dentistry, and in various policymaking bodies. Even without making a causal link from participation in the institute to these positions of leadership, the survey results indicate that the experience develops skills necessary to function in these positions.

It is fair to say that those who participate in the ADEA Leadership Institute come into the program as highly accomplished faculty and administrators. Many alumni have continued to move to positions of more responsibility. Ninety-nine percent of alumni who responded to the survey indicated that they would recommend the institute to others. In the end, perhaps it is the opinion of the fellows themselves that counts most toward understanding the extent to which the ADEA Leadership Institute is accomplishing its mission.

Acknowledgments

The ADEA Leadership Institute Fellows as well as the lead author and others who organize and conduct the institute have benefited tremendously from the sage counsel and participation of advisors. ADEA Leadership Institute advisors donate a significant amount of time as well as their expertise and experience to ensure the quality of the institute. These advisors, their institutional affiliation at the time of service, and their years of service are as follows: Dr. Marcia A. Boyd, University of British Columbia, 2001–02; Dr. Cecile A. Feldman, University of Medicine and Dentistry of New Jersey, 2007–10; Dr. Bruce S. Graham, University of Detroit Mercy and University of Illinois at Chicago, 1999–2004; Dr. Linda L. Hanlon, Forsyth Institute, 1999–2000; Dr. Marilyn S. Harrington, University of Texas Health Science Center at San Antonio, 2001–02; Dr. Denise K. Kassebaum, University of Colorado, 2003–05; Dr. William E. Kotowicz, University of Michigan, 2001–04; Dr. Wallace V. Mann, retired, formerly University of Louisville,1999–2001; Dr. Brad J. Potter, University of Colorado, 2006–10; Dr. Richard R. Ranney, retired, formerly University of Maryland, 2004–06; Dr. Sharon P. Turner, University of Kentucky, 2005–07; Dr. John N. Williams, University of Louisville and University of North Carolina at Chapel Hill, 2004–10; and Prof. Pamela Zarkowski, University of Detroit Mercy, who has served as an instructor in the institute since its inception.

Table 12. Deans’ supporting activities

- Meet with the fellow monthly for at least one hour to discuss progress in the institute, position papers, issues at the home institution, and career planning
- Identify a new permanent leadership position/role that the fellow to assume
- Encourage the fellow’s involvement in university-wide activities
- Assist in scheduling appointments for the fellow to interview university leaders
- Engage the fellow in mentoring junior faculty
- Assign the fellow to new leadership challenges (e.g., chairing committees or task forces)
- Allow the fellow to shadow the dean by attending various meetings (e.g., dean’s executive management group meetings) and activities that the fellow would not ordinarily attend
In addition to the advisors, the ADEA Leadership Institute has received funding from a number of partners since its inception. ADEA is grateful for the support of those sponsors, listed in Appendix C.

REFERENCES

APPENDIX A

Articles Published by ADEA Leadership Institute Fellows


APPENDIX B

Themes Identified in the Write-In Responses to the 2000–08 ADEA Leadership Institute Alumni Survey

Note: Percentages add up to more than 100% due to multiple allowable responses.

Most Valued Experiences

1. Networking and fellowship with the program participants, advisors, and instructors (respondents commenting on this theme: 78 percent)
   Typical Issues:
   - Meeting new people
   - Developing a network of educators that remains intact
   - Learning from others’ experiences (placing things in perspective)
   - Getting to know others who have similar struggles
   - Developing contacts with others in the home institution and community through the project
   - Sharing institute experiences with others at the home institution, including peer interactions with alumni
   - Connecting with leaders at other institutions

2. Self-discovery through self-assessments and evaluations (respondents commenting on this theme: 44 percent)
   Typical Issues:
   - Learning about oneself
   - Studying MBTI results
   - Determining areas for personal and professional growth
   - Engaging in personal assessment and introspection
   - Getting to know one’s weaknesses
   - Gaining self-confidence

3. The 360˚ feedback to provide additional reflection about areas for improvement (respondents commenting on this theme: 17 percent)
   Typical Issues:
   - Accepting friendly criticism without feeling threatened
   - Giving and receiving feedback about leadership styles, etc.
   - Learning to see oneself as others do
   - Receiving evaluations from one’s peers and administration

4. Coursework on leadership skills and styles (respondents commenting on this theme: 17 percent)
   Typical Issues:
   - Understanding better leadership approaches
   - Experiencing new and unfamiliar leadership training
   - Learning about reframing organizations
   - Understanding competencies necessary for leadership
   - Receiving overall training in principles of leadership

5. The group project (respondents commenting on this theme: 13 percent)
   Typical Issues:
   - Engaging in the process of research and creation of the position paper
   - Working on the position paper with teammates
   - Gaining insights about group work and collegiality
   - Understanding group dynamics while working on the position paper
6. Administrative competencies and components (respondents commenting on this theme: 12 percent)
   Typical Issues:
   • Gaining insight into various components of administration
   • Attaining confidence that one can change the work environment
   • Gaining insights into the details of dental school/institution administrative decision processes
   • Understanding more about dental administration and policy making

7. Learning about other institutions (respondents commenting on this theme: 9 percent)
   Typical Issues:
   • Meeting faculty and administrators from other schools
   • Understanding of issues at different schools

8. Participating in the legislative process (respondents commenting on this theme: 9 percent)
   Typical Issues:
   • Using lobbying skills in situations after participation in the institute
   • Understanding the legislative process

9. All phases (respondents commenting on this theme: 7 percent)
   Typical Issues:
   • Participating in each of the phases was valuable

10. Reading assignments (respondents commenting on this theme: 5 percent)
    Typical Issues:
    • Reading and discussing the assigned and recommended articles

Lesser Valued Experiences

1. Participating in the legislative process (respondents commenting on this theme: 33 percent)
   Typical Issues:
   • Having to digest a lot of information in a short time, with little time to practice prior to meeting with state representatives
   • Experiencing frustration while lobbying
   • Being ill prepared to advocate on Capitol Hill over issues not deeply understood

2. The group project (respondents commenting on this theme: 28 percent)
   Typical Issues:
   • Coping with the additional workload while continuing to fulfill faculty responsibilities
   • Scheduling interviews into already busy workdays
   • Managing problems associated with teammates working at different institutions
   • Dealing with group members who did not “pull their weight”
   • Spending time gathering data and writing a paper that did not get published
   • Coping with ill-defined project requirements and expectations

3. Mentorship of advisor and dean (respondents commenting on this theme: 12 percent)
   Typical Issues:
   • Dealing with a dean who was not enthusiastic or interactive
   • Coping with lack of direction from the dean with regards to individual projects

4. Team-building exercises (respondents commenting on this theme: 7 percent)
   Typical Issues:
   • Failing to get to know fellows outside one’s assigned team
   • Spending time on team-building exercises that were not productive

5. Phase III activities, including the business of leading a dental school, legal issues, and the future of dental education (respondents commenting on this theme: 7 percent)
   Typical Issues:
   • Reflecting that previous training and on-the-job experiences made this session redundant
   • Feeling unimpressed by movie shown to illustrate lessons in Phase III
6. Individual lecturers (respondents commenting on this theme: 5 percent)
   Typical Issues:
   • Feeling unimpressed by the lecturer representing the corporate sector and his topic
   • Being disappointed in the presentation on funding dental education

Improving the ADEA Leadership Institute

1. Additions to current curriculum (respondents commenting on this theme: 30 percent)
   Typical Issues:
   • Discussing financial stability/management of dental education institutions
   • Spending more time on personal discovery
   • Exploring more role-playing in the negotiation session
   • Addressing faculty recruitment
   • Dealing with student debt
   • Improving faculty salaries
   • Increasing the emphasis on systems thinking
   • Developing logic models
   • Articulating competencies as outcomes of dental education
   • Discussing behavioral change theory
   • Developing interpersonal skills
   • Providing strategies for fundraising
   • Explaining in Phase I how to get the most out of the institute

2. Additional leadership training (respondents commenting on this theme: 15 percent)
   Typical Issues:
   • Establishing a 2–3 day alumni program much like midyear section meetings
   • Providing further networking opportunities among alumni during the ADEA annual advocacy day
   • Creating a post-fellowship phase to focus on individual fellows’ needs
   • Offering refresher courses on topics that institute alumni requested in this survey
   • Developing a follow-up program to the current institute

3. Get more deans involved and involve deans more (respondents commenting on this theme: 10 percent)
   Typical Issues:
   • Increasing the interactions with the fellows’ leaders/mentors at their parent institutions
   • Issuing more guidelines to deans/advisors at the parent institutions regarding expected interaction with the fellows

4. Allocate more time to plan and complete the group project (respondents commenting on this theme: 5 percent)
   Typical Issues:
   • Briefing groups earlier so groups can formulate and complete their projects
   • Getting group activities started earlier so that more careful planning up front and less rushing at the end can occur

5. Host the phases in hub-airport cities (respondents commenting on this theme: 5 percent)
   Typical Issues:
   • Moving the phases to locations where travel is easier and lodgings are less expensive

Additional Comments/Suggestions

1. Advanced leadership training for alumni (respondents commenting on this theme: 23 percent)
   Typical Issues:
   • Providing more training for mid-career faculty and offering an externship program for fellows to work with deans from other colleges for 1–2 weeks
   • Continuing the leadership program past the one-year fellowship
   • Overlapping the leadership development program with the American Association for Dental Research meeting
   • Bringing the alumni together for additional leadership training
   • Providing development programs leading to career goals in administration
   • Offering additional professional development courses through ADEA and the ADEA Leadership Institute Alumni Association

2. Alumni association should be more active and visible (respondents commenting on this theme: 14 percent)
   Typical Issues:
   • Explicating the function of the alumni association, its mission, and its membership benefits
3. A regular newsletter for additional leadership guidance and program and alumni updates (respondents commenting on this theme: 13 percent)
   Typical Issues:
   - Creating a newsletter focusing on topics that may be of interest to the institute alumni, to allow for interaction past the ADEA Annual Session
   - Sending references of good articles about leadership or dental education
   - Communicating more with alumni
   - Providing regular updates on activities of the institute and its alumni
   - Offering resources and recommendations for management textbooks for academic organizations

4. Provide career development (respondents commenting on this theme: 8 percent)
   Typical Issues:
   - Marketing, promoting, and advocating ADEA Leadership Institute alumni to institutions looking for leaders in administrative positions
   - Offering development programs leading to career goals in administration
   - Encouraging the deans to select the individuals they want to prepare for future opportunities and invest in their education and preparation
   - Providing more guidelines on how to move up to associate dean positions

5. Provide website/blog/chat room so alumni can continue to network and share (respondents commenting on this theme: 8 percent)
   Typical Issues:
   - Building an online forum for interaction throughout the year such as a social network website with blogs
   - Creating a blog focusing on topics of interest to the institute alumni
   - Starting a listserv for institute alumni announcements

6. Development of a mentor program (respondents commenting on this theme: 7 percent)
   Typical Issues:
   - Partnering someone in the current institute with an alumnus who could mentor the participant during the course of the program

7. Host an alumni reunion (respondents commenting on this theme: 7 percent)
   Typical Issues:
   - Bringing together alumni for a follow-up class with additional leadership information

8. More administrative leadership programs at the ADEA Annual Session and other times (respondents commenting on this theme: 5 percent)
   Typical Issues:
   - Continuing to provide leadership programs at the ADEA Annual Session
   - Focusing more programs on administrative leadership topics at the ADEA Annual Session as well as other times of the year

9. Offer distance-learning programs (respondents commenting on this theme: 5 percent)
   Typical Issues:
   - Offering seminars online
   - Providing leadership programs via webinars throughout the year so alumni don’t have to leave their institutions
   - Creating podcasts on various topics throughout the year, to include both live and recorded material, with a question-and-answer period

10. Creation of expanded personal networks with links to other institutions (respondents commenting on this theme: 5 percent)
    Typical Issues:
    - Providing opportunities to interact with institute alumni at different institutions
    - Offering information about what is going on at the various alumni institutions
    - Creating a means for alumni to expand their personal networks to other institutions

11. Directory/database of alumni (respondents commenting on this theme: 5 percent)
    Typical Issues:
    - Establishing a community of interest or network for alumni to network and consult one another for best practices
    - Maintaining and distributing a directory of alumni
APPENDIX C

Sponsors of the ADEA Leadership Institute

**Founding sponsors:**
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