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What Is Leadership?

Donald J. Klingborg ■ Dale A. Moore ■ Sonya Varea-Hammond

ABSTRACT

The demand for more effective leadership is heard throughout the health professions. Modern concepts of leadership differ from the traditional definition of a charismatic individual leader. Historically, leadership has been vested in positions, while today leadership is seen as a role one moves continuously into and out of, depending on the circumstance. Leadership ideas have evolved so that newer characteristics of leaders include being a team builder; possessing creative and strategic thinking skills; demonstrating honesty and integrity; and having the ability to motivate others to action. This article discusses some of the history of leadership, current thoughts on attributes of effective leaders, and the differences and similarities between leaders and managers; identifies selected teachable leadership tools; and describes various styles and purposes of existing leadership programs.

INTRODUCTION

Like love, leadership is universally desired but difficult to define explicitly. The concept of “leadership,” as used today, made its way into the general literature across the last century and has only recently become of increasing interest for the health sciences. The idea of a charismatic individual leader, capable of recruiting followers to his or her path, has given way to team-based problem solving. Today, organizational goals are pursued by people who move rapidly between leading and following roles. This team model accomplishes two critical goals: better decisions are made because leaders are listening to and considering the diversity of input from co-workers with different experiences and insights, and there is improved acceptance of the group decision through consensus building as a result of the collaborative process, thereby fostering compliance.¹⁻³ Effective leadership requires insight and self-awareness, organization, ongoing communication and reinforcement, the ability to catalyze a shared future vision, and successful recruitment of followers motivated to action.⁴ Effective leaders do not possess a defined thematic list of personal traits^{5,6} but, rather, deliver both high performance in addressing organizational task issues and consideration for individuals with concern for interpersonal relations.^{7,8}

Demands for more leadership, and more effective leadership, are frequently heard at all levels in the health professions today, including in medicine, nursing, public health, and veterinary medicine.^{9,10} While references to leadership in veterinary medicine are sparse and reflect a range of concepts and purposes, the number of books, articles, and courses focused on leadership has exploded over the last two decades.

Leadership in the health sciences has a major gender bias: men have a higher probability of attaining leadership positions, and women are underrepresented in higher medical administrative positions despite their growing workforce parity and projected future majority. Physicians in public health, and in those specialties with a higher

proportion of female physicians, have more identified female leaders.¹¹

LEADERSHIP HISTORY

From the late 1800s to about 1930, leadership theories emphasized control and centralization of power. The “Great Man” theory, which suggests that leaders are born and not made, supported the existence of some mysterious qualities vested in select individuals and frequently passed between generations. This model faded from popularity in the 1930s and 1940s as “trait” theories appeared that attempted to identify specific traits qualifying an individual for leadership. Stogdill identified six trait groupings associated with leadership, including capacity, achievement, responsibility, participation, status, and situation, but concluded that these traits did not sufficiently explain leadership: “A person does not become a leader by virtue of the possession of some combination of traits.”⁵

The late 1940s brought more psychoanalytical theories that explored why individuals are motivated to lead, or to follow a particular leader, with an increased focus on the role of groups and organizations. Investigators in the 1960s emphasized how people are influenced toward shared goals. “Exchange theories” looked at understanding the social exchanges between individuals and the group, including rewards, status, and esteem. Situational leadership theory^{12,13} proposed that the social situation and subordinates’ characteristics influence the leader characteristics necessary to be successful. House¹⁴ identified four important behaviors attributed to the leader—directive (task-oriented), achievement-oriented, supportive, and participative—and two situational variables: the subordinate’s personal characteristics and any environmental demands, such as the organization’s rules and procedures.

In the 1970s there was a shift away from social psychology and toward organizational behavior and management science. Leadership and management roles became generally confused and integrated, and “attribution theories” emerged

to look at how followers attribute certain qualities to leaders. "Transformation" became a term describing leadership, and "transactional" was associated with management.¹⁵

Since the 1980s, the leadership literature has become overwhelming in size and scope, often recycling concepts such as the "Great Man" and "social" and "organizational behavior" thinking, but with a twist toward "influence," "transformational," "servant," and "collaborative" structures. Leaders have become more responsible to their followers, with a more spiritual or value- or principle-based relationship between leaders and followers. "Vision" was introduced as a new leadership characteristic, and "managing the dream" or "vision" has become the responsibility of the leader.^{15,16}

Today, functional leadership is seen not as a permanent position but, rather, as a temporary service role, with individuals moving in and out of leadership responsibility as situations change. An individual can play both leadership and follower roles simultaneously, based on circumstances, their interest, and their expertise.

While there is widespread agreement that both leadership and management skills are necessary to effect change,

there is an element of confusion in the literature about where one starts and the other ends. A detailed outline of leadership and management characteristics is provided in Table 1. The table demonstrates differences in the scale, often summarized as "what should be done" versus "how to do it," and also clarifies that leadership and management attributes are overlapping, interdependent, and both necessary for effective leadership.

STYLES OF LEADERSHIP PROGRAMS

Leadership programs are extremely popular today, concentrating a wide range of purposes and learning objectives under the term "leadership." Leadership programs can be broadly lumped into three categories, with combinations of the three possible.

Buying into the Organization

Some programs lure their audience by recruiting those interested in leadership education, then present information designed to create support for the organization's goals, policies, and decisions. This approach assumes that from a common understanding, usually presented as

Table 1: Leadership vs. Management Matrix*¹⁷

| | Leadership | Management |
|-----------------|---|--|
| Definitions | The process-oriented, non-specific practices of <i>challenging the process, inspiring a shared vision, enabling others to act, modeling the way, and encouraging the heart</i> ¹⁰ | The implementation of those task-oriented duties that <i>facilitate, support, and direct the timely and efficient maintenance of operations</i> |
| Outcomes | <i>Determining what should be done:</i> systematic change, transformation, paradigm shifts, significant improvements or innovation, new and added value to or from the organization | <i>Getting it done, and done well:</i> Effective, efficient completion of work product, maintenance of operations with a focus on quality of the product |
| Characteristics | A critical thinker, a risk taker, a visionary. Innovative, courageous, creative, forward thinking, open to change, able to learn from and overcome failure. A team builder, a continuous learner, able to get along with people. Honest, dependable, competent, supportive, fair-minded, cooperative, respectful, motivating, values-driven, inspiring, resilient, patient, tenacious, credible, balanced, emotionally mature. | Efficient, detail oriented, a good delegator, organized, persistent, administrative. A team builder, a continuous learner, able to get along with people. Honest, dependable, competent, supportive, fair-minded, cooperative, respectful, motivating, values-driven, inspiring, resilient, patient, tenacious, credible, balanced, emotionally mature. |
| Scope | Focused on forward thinking and the long term. Strategic visioning and planning requiring insight, complex choices and decision making, creating a new order, facilitating movement toward an end goal. | Organizational focus, policy development and compliance, maintenance, support, and implementation of systems, incremental focused improvements. |
| Interaction | Motivates and inspires; builds potential in others; creates an environment that fosters learning, collaboration, and fluid teamwork and attracts high performers. Team building and effective functioning teams. | Focus on individual performance and work outcomes; maintains a productive work environment. Team building and effective functioning teams. |
| Impetus | Self-directed, situational, opportunistic, serendipitous; can be courageous in the face of uncertain outcomes. | Calendars, directives, scheduling, custom and culture, deadlines. |

*Adapted by S.V. Hammond, D.J. Klingborg, and C. MacNeil from a matrix by the Leading Edge Consulting Group <<http://www.leadingedge.net>>.

carefully selected and scripted fact-based but often incomplete descriptions of the organization's circumstances, will emerge unanimity of opinion and increased organizational support. The major goals are to raise awareness of the past, current, and future external and internal influences that affect the organization, to create support for the current directions and policies, or, in some cases, to recruit effort from the audience to the organization's activities focused on change. Development of individual leadership knowledge, skills, and attributes is of secondary importance in this style of program. Those organizations especially concerned with self-preservation commonly encourage ongoing relationships (e.g., alumni groups) to maintain the participant's association with the organization's structure and values.

Individual Growth

Other programs seek to expand and explore alternative issues and concepts, exposing the audience to ideas and problems that are generally peripheral to their area of expertise, in an effort to prepare a more balanced citizenry. These are focused on individual growth and may include broad or narrow exposures designed to push, pull, and stretch the audience to see selected issues in a larger context.

Leadership Toolbox

A third program type delivers a variety of specific leadership tools, including empowering individuals with knowledge, skills, and attitudes based on a greater understanding of themselves and others, creative problem solving, and strategic planning. The toolbox delivered in this kind of program creates more effective independent thinkers capable of getting things done and fostering change. The primary goal is to give learners effective intrapersonal and interpersonal process tools to use in the situations they encounter. The leadership attributes instilled have the potential to be an organizational nuisance as this audience assumes leadership roles that may not be consistent with the organization's direction or rate of preferred change.

Both the "Individual Growth" and "Leadership Toolbox" models have the potential to profoundly affect participants, and the "Leadership Toolbox" model is very suitable for training the leaders of the future in a manner consistent with the goals of professional schools.

Leadership Tools

Individual empowerment includes providing a knowledge base, including explaining the need, defining leadership attributes, and showing the audience how they apply to them as individuals; creating opportunities for self-exploration and evaluation; and delivering practice experiences for assimilating and applying new tools in safe learning situations. Leaders need to know more about themselves, how they process information, barriers that prevent optimization of their decision making and interactions with others, and how to motivate themselves and others to action.⁴

Rational tools are among the easiest to teach, and members of the health professions usually possess and can quickly enhance these assets. The needs include creating a shared vision,¹⁸ understanding the mission, developing specific goals and objectives, and agreeing on an action plan to

pursue the objectives. Creative thinking,¹⁹ including going beyond emotions, facts, and critical thinking to including valuable ideas from others that might otherwise be discarded, thinking "outside of the box," and providing an organizational framework that captures and reports the key historical information, agrees on next steps, and identifies who is responsible and the time frame for them to complete their follow-up duties, is critical to fostering action and accomplishing preferred outcomes.

Understanding the misguided nature of living in a world of self-generating beliefs, inferred from personal experiences and observations and founded on highly selective "data" with cultural and personal filtering, which results in conclusions based on assumptions, is critical to preventing inappropriate actions based on the Ladder of Inference (Figure 1).²⁰

Similarly, enhancing dialogue over debate to seek mutual understanding and harmony and building trust and comfort result in a cooperative atmosphere and shared community. Deliberation naturally follows from this platform, with a weighing of costs, benefits, and consequences leading to consensus rather than majority rule or authoritative decision making.²⁰ Consensus means that everyone understands, supports, and is willing to implement a decision, even though it may not represent anyone's first choice. Conflict management and understanding the continuous interplay between people that can be considered an ongoing "negotiation" contribute toward better outcomes for all parties.²¹

Intrapersonal and interpersonal tools are more challenging for the learner, and frequently for the instructor. These include building self-awareness and the relationship between thoughts, feelings, and reactions; understanding others' feelings; appreciating differences; seeing conflict as a gift of information that can foster greater understanding on all sides; improved communications, including active listening, questioning, and paraphrasing for greater

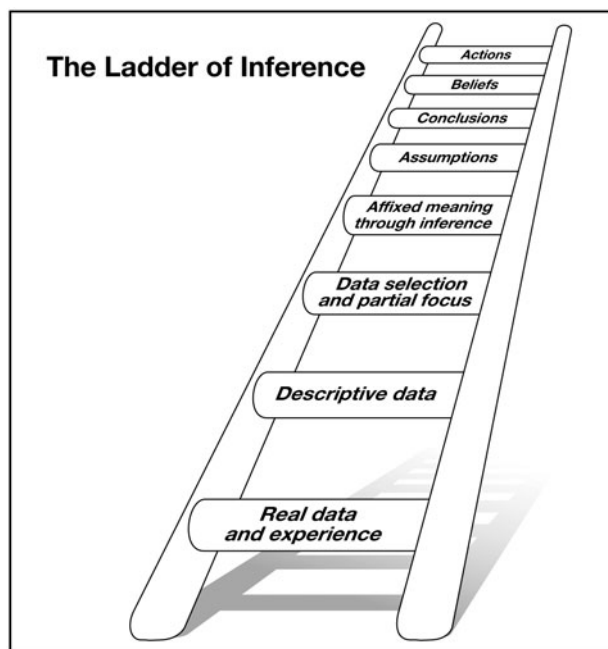


Figure 1: The ladder of inference

understanding; group dynamics; decision making; and knowing when to lead and when to follow.²²

Participating in leadership roles is not without personal cost, and resilience is an important tool to help leaders pick themselves back up after being emotionally and physically drained by their efforts. In the end, the tools developed should contribute to creating a vision, solving a problem, making a decision, creating understanding, and involving the parties affected. Providing leadership education has similar costs, including a self-introspection and discovery process that is personally challenging to the organizers and instructors, who must carefully define the learning objectives and curriculum for the course.

CONCLUSIONS

While language including the words “leader” and “leadership” and the study of influence are relatively recent phenomena, the popular models of leadership have been fluid throughout history. Time, place, need, and circumstance all have significant impacts on effective leadership styles. Today, the role of a leader or manager is continually changing, and the tools and expertise required for these two roles overlap and are generally inseparable. Both leaders and managers create order, develop shared goals, catalyze activity, and empower followers. Effective leaders need to be both good managers and good leaders.²³ Life is more complex, and the need for better decisions, along with acceptance and implementation of those decisions, is evident. Leadership education in veterinary medicine is effective, important, and worthy of the profession’s effort and investment.

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