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# AI Practitioner



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# Adaptable Leadership

A Strengths-based Approach to  
Challenging Environments and Difficult Choices

**Wendy Campbell**  
**Anne Radford**

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## Inside this issue

### Welcome to February 2014 issue of AI Practitioner

In this issue, *Adaptable Leadership: A Strengths-based Approach to Challenging Environments and Difficult Choices*, you will find nine articles exploring the challenges facing adaptable leaders navigating complexity by choosing to look at their challenging situations honestly and appreciatively.

Enrique J. Zaldivar's Feature Choice article "Authenticity and Accountability: Key

to An Appreciative Stance to Adaptable Leadership" combines AI and multicultural competency principles, emphasizing the importance of discovering our unique cultural lens for effective leadership.

Research Notes presents a review of an earlier AI Practitioner issue, *Appreciative Inquiry in Asia*. We hope it will inspire many to read the August 2013 issue anew or offer their own review of previous issues.

Newly published resources as well as the classics on leadership have been brought together in AI Resources by the new editorial team.

All good wishes as we start a new subscription year!

Anne Radford  
Editor, AI Practitioner

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# Adaptable Leadership

## A Strengths-based Approach to Challenging Environments and Difficult Choices

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# A Surgeon's Skills Become Business Skills

## A Continuing Journey into Adaptable Leadership

It is not often that one gifted in a field focused on individual achievement can create from within an inclusive form of leadership that empowers others. In this article, a surgeon appreciates the potential of the unique relational aspects of his practice in the operating room. He subsequently adapts them into a form of senior leadership that endures the stresses of chaotic times by guiding others toward the realization of their own potential in a collaborative environment.

Many of us in healthcare find it difficult to appreciate surgeons. They can seem overly directive, demanding and dominating, although some patients might appreciate such control. These peer perceptions may be why surgeons rarely gain senior leadership positions in American academic medicine. One exception is Dr. Paul R. G. Cunningham.

Paul completed his surgical residency in 1979, confident that he was at the top of his game technically but aware that he knew nothing about an additional passion: leading an organization.

He knew how he led in surgery. Reality was sensed in real time: what's occurring for this patient with this procedure right now? When "awake in that space" he could observe his internal reactions as the surgeon and leader. This led him to sense what was happening for others in the room, and invite them into his space to help adjust his perceptions. His "three-way sensing" thus became the foundation for his leadership approach.

When Paul arrived at the Brody School of Medicine at East Carolina University in 2008, the school had survived a bruising leadership crisis but was still threatened by financial stress. The usual rules, regulations and expectations from multiple sectors were challenge enough, but there was also a downturn in the economy and growing uncertainty over reforms in American healthcare. Survival thinking dominated personal and institutional interactions. Jealousies, anxieties, paranoia and other attendant energies flourished. Planning efforts often devolved to retreat, paralysis and denial. Quick results and immediate closure were stated expectations.



Three-way sensing in surgery

Many in Paul's situation would "take charge", but why begin what he had avoided in surgery? Paul chose the role of a shepherd: watchful, guiding, supporting; visible when necessary and otherwise opening the space for the gifts of others. Whereas it can be tempting for senior leaders to personally tackle every challenge, Paul found it more effective to allow others "with the appetite" into the space between problems and solutions.

A nurse who once practiced with him recalled "Dr. Cunningham never acted like a surgeon!" In surgery, the surgeon rules; in academia it can seem like no one does. When applied in academic medicine this three-way sensing is less like working in a quiet operating room and more like standing in a busy intersection with cars, trucks, mopeds and pedestrians speeding in every direction. If willing to stand quietly in the midst, asking questions and listening for answers, one's picture of events sharpens dynamically and adaptation beckons.

How does this three-way sensing really work?

### Sensing the reality of events in real time

*The financial stress mentioned above involved our faculty medical practice, the source of the majority of the school's funding. Paul quickly hired a financial manager with the appetite for our challenges. He then applied his own efforts to change that merited more of his time: shifting the internal conversation to one of sufficiency and aspiration.*

Situational assessment in the midst of chaos and turmoil approaches high art, and requires the ability to see emotions and anxieties as symptoms suggesting other core issues. Doing so in real time for many means working against the clock, but with Paul it means being curious and attentive in the moment – usually in public – and avoiding preconceptions. It can also mean quick responses that strategically create small improvements which positively influence the longer term challenges. Such skills gain additional time and space to see what's truly urgent versus what deserves more time.

### Knowing internally how one is reacting as a leader

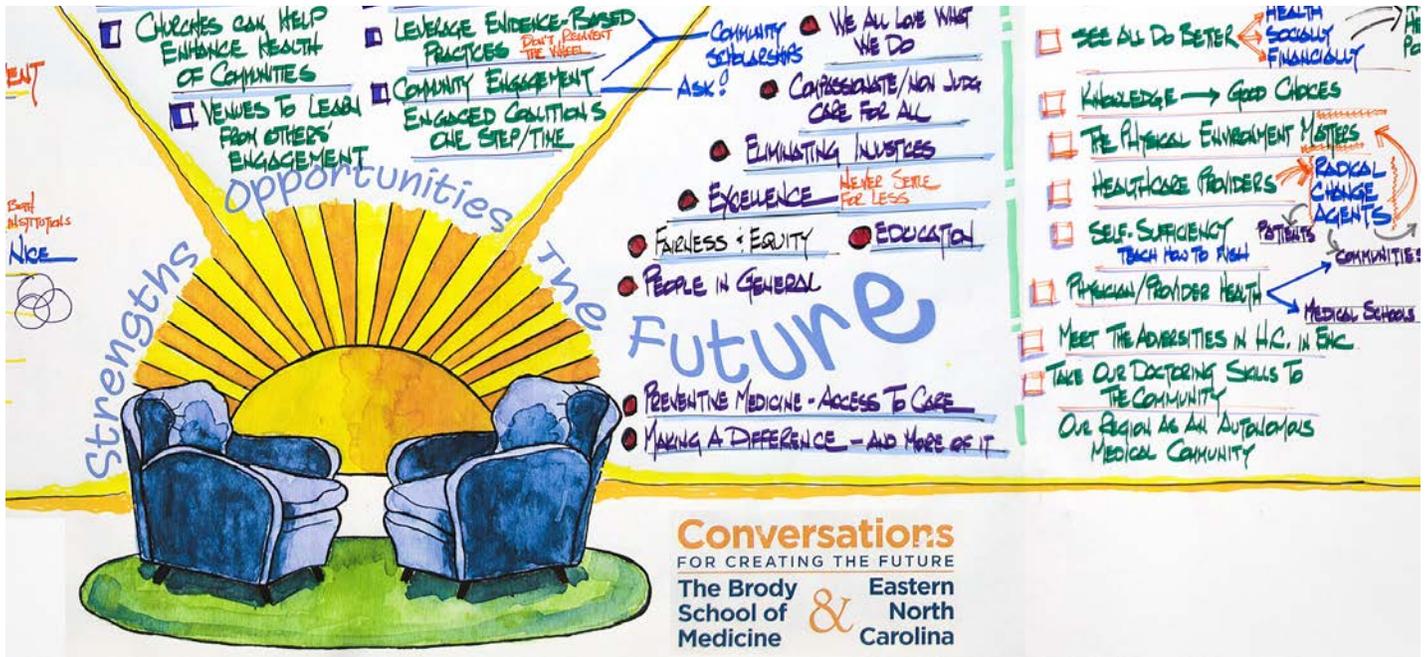
*Recently a team struggling with a sensitive initiative challenged Paul to articulate his vision for its future. He and Bruce Flye created an enormous image entitled A Dynamic Ecosystem, a sketch-quality drawing of provocative propositions that intentionally works only with Paul giving a guided tour to individuals or small groups.*

*Listeners confront the reality of this surprising image, respond reflectively, guided by his questions, and together all refine their perceptions and create new understanding.*

It has been said that most leaders will not put forth their vision of the future for fear of the shame of being shown wrong. Rather than protecting his feelings Paul learned to "be awake to" his internal reactions and hold them where they were

If willing to stand quietly in the midst, asking questions and listening for answers, one's picture of events sharpens dynamically and adaptation beckons.





Excerpt: Conversations for creating the future at Brody School of Medicine

small. In the end, he found that creating a positive image of the future with others is a better way to go.

In conclusion, Paul's seemingly effortless adaptation is really mature evidence of a convergence of abilities, skills and practices. This journey has been across geographic boundaries, countries and professional cultures. Learning to adapt and create opportunity have been essential behaviors that have also been enjoyed as personal success. Now, these values have been externalized and expanded beyond his personal needs. He has recognized that others respond in a favorable and productive manner when allowed to explore their own boundaries, collectively, and in a safe environment. This journey of discovery continues.

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## Purpose of AI Practitioner

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