

AMCHP 2009 ANNUAL CONFERENCE

Leadership Skills for Systems Development and Transformation

February 20 - 27, 2009

ELIZABETH WAETZIG: There were lots of people who signed up for this. There were like 48 people. And my partner and I, over the phone, looked at each other and said, "How are we gonna do role plays and interaction for 48 people?" Well, we're not. So, we have created this based on a bigger number of people. But I think as we go through it, what I'm hoping is that we have opportunities for dialogue I – you want me to move over? So, you can see that. Okay. I tend to wander so please don't hesitate to tell me to move out of your away. I'm happy to do that. So, I really do want this to be a dialogue because this is a kind of session that if we don't engage with each other, you won't get what you came to get out of it. And quite frankly I know this stuff. So, if I can't help you raise some awareness, do some reflecting, think about some skills and I can't promise you that you will go out of here with a whole set of new skills. And it takes years for some people to improve their skills in some of these areas and it's a long process. But my hope is just that you might think about some areas in which further skill building might be a worthwhile venture for you. Okay. So, that's a piece of how we're starting.

So, we arranged this or thought about this for a much larger group or a smaller group in some ways that's a really good thing. The other change is that I was supposed to be doing this with my partner Suganya Sockalingham who is very, very ill. She got back from India last week and with a temperature of 104. And her temperature has not gone

down yet and she's been to the doctor and he has just said, "You can't fly." So, I said no problem, stay in bed. I don't want to catch what you have anyway, I'll manage. And so, some of this material is hers, we worked on this together. I think that we're in a place where we can go over it. Maybe not to the depth that we would have had she been here but I think we can manage. So, that's another unfortunate introductory piece but I'm happy that you're here and I think between all of us, we can really make this a rich experience.

I know that when I do these presentations I think I learn as much I impart and I'm hoping to as well today. So, and people are still trickling in so I'll continue my introductory song and dance a little bit longer. I want to tell you a little bit about Change Matrix. This is a company that Suganya, and Rachele Espiritu, and I formed a couple of years ago. We have all three been on the on the faculty at the Georgetown Center for Child and Human Development. Are you familiar with those folks? They're a TA center that provides training and technical assistance in culture competence, children with special health care needs, mental health and Rachele and I still are on the faculty, a small percentage of our time. But we realized that there was a lot of work out there to be done around systems change, leadership, conflict resolution, evaluation, cultural competence. That needed to be done all over the country and we could do it on a private basis.

So, we formed this company, this support change. And we really think about the challenge of change and transformation, I mean, you could probably put change as the word de jure, right? Politically speaking and in other ways. But you could also put

transformation in there. You could put evolution, there's lots of ways to think about that. We think about that as opportunity. An opportunity to create something new and God knows in these times of economic downturn, and budget shrinking, and health care changing so much and more changes to come. There's going to be a lot change whether we like it or not. And so, I guess our response to that is how do we seek it? How do we be proactive about it? How do we embrace it as an opportunity as something that can make us better? And so, that's what we at Change Matrix support, is those processes, that strategic thinking that goes into seeking and supporting, and being proactive about change.

Change is one of those words where we find ourselves on a continuum. There's some people who can't spend five minutes without change in their lives, without getting a little restless. And there are those of us who run screaming when the word changes most of us are somewhere on that continuum. But we do have varying intolerances for that sort of thing. All right, so, I want to talk a little – well, let's continue on with introductions now that people are beginning to trickle in.

So, we have a small enough group, we can actually get to know each other a little bit. Names, state, organization, role, and why do you what you do? That's some of the questions that we are hoping to hear from you. So, I can make sure that I'm responding appropriately and relevantly. Is that a word, relevantly? In a relevant way to you all. So, if we could just take a quick moment to find out who's in the room that would be great. Can we start over here?

DEBBIE GOLDEN: Sure. I'm Debbie Golden. I'm from Anchorage, Alaska. I work for the Alaska Department of Public Health.

ELIZABETH WAETZIG: Okay. Great. Welcome.

BOB COOK: I'm Bob Cook from Illinois. I work for the Title V Children Special Health Care Needs Program and I'm (inaudible) liaison on (inaudible).

ELIZABETH WAETZIG: Okay. Don't forget that last question. I let you slide by there. But what is it that you do what you do?

BOB COOK: Go ahead. You can go first.

DEBBIE GOLDEN: Give you a chance to think, well I didn't say, I'm a perinatal nurse consultant. And why I do what I do is because I feel like the perinatal is just such a right time to make changes for the long term. And so, I see that as my way to maybe make a difference.

ELIZABETH WAETZIG: Okay, thanks.

BOB COOK: And why I do what I do, I was hired as the first parent, I've been in the – in my position for 11 years and it was to bring the family perspective to a state agency which is change is very difficult in a state agency as apparently so.

ELIZABETH WAETZIG: Yeah. Yes. Okay. Thank you.

JACKIE RICHARDS: I'm Jackie Richards with Family Connection of South Carolina and my role is, I'm the Associate Director. I'm also a parent to a child with learning disability and ADHD. And why do I do it? Probably because my father who had traumatic brain injury and was legally blind, and so I grew up in a home with disabilities.

ELIZABETH WAETZIG: Okay, thank you.

NINA BAKER: I'm Nina Baker from Nebraska with PTI Nebraska (inaudible) Information. My role is as Health Information Coordinator for Family Health Information Center and why do I do it? I had a daughter with special health care needs. She has Down Syndrome. And she has cardiac problems and you talk about perinatal change, our whole family changed upon her birth because we didn't know what – how to handle her and what to do with a child that had the very special needs that she had and I really (inaudible) people helping us to know that and that's when I carried forward further.

ELIZABETH WAETZIG: Okay. Great. Thank you.

GERRI CLARK: Hi, I'm Gerri Clark from the Illinois Children Special Health Care Needs Program. Hi, Nina.

NINA BAKER: Hi, Gerri. Gerri used to work in Nebraska.

ELIZABETH WAETZIG: Excellent.

GERRI CLARK: I'm an Interim Director, now, and I do it. I guess I kind of grew up with children with special health care needs, because I had a sister (inaudible) disability. And I've just always been drawn to helping families.

ELIZABETH WAETZIG: Okay. Great. Thank you.

UNKNOWN SPEAKER: Hi, I'm (inaudible) from Hawaii and I'm a pediatrician and I wear multiple hats, because my gray hair attest to that. I teach pediatric residents, and I run a neurodevelopmental training program for leaders and then a consultant for Family Health Services Division and have leadership roles in that chapter. So, my passion I'm, kind, of a rural island person who just kind of grew saying my dad said, "It would be really good if you wanted to serve people."

ELIZABETH WAETZIG: Oh, that's nice.

UNKNOWN SPEAKER: And so, I at the level now in my career that I really see a systems change. I'm still doing direct service, you know, tracheostomies, but I'm at the systems level with the grassroots.

ELIZABETH WAETZIG: Great, thank you. Before we go to this side, I think we're gonna come back, and that's okay. It's a long way.

MARILYN KIRKSOME: My name is Marilyn Kirksome from Oregon. I'm the Director of the Department of Social Works and Special (inaudible). And I'm doing it for many reasons. I was associated with probably 20 years as the evaluator and I became the interval, of being a mom with a child. I'm happy with my 21 year old son and 16 year old son. And the program had made quite a fundamental shift in its organization and outreach including the service as my son was diagnosed with (inaudible) boy I could have used that program.

ELIZABETH WAETZIG: Yeah.

MARILYN KIRKSOME: So, we're, we've gone through many changes (inaudible) again. We felt that this (inaudible) don't move the proper part in doing this.

ELIZABETH WAETZIG: Okay. Great. Thank you. Thank you. All right, let's go back here.

JOHN HURLEY: My name is John Hurley. On my best days, my staff allows me to be the director of Children with Special Health Needs Program in Minnesota. I guess within the health department, why do I do it? Three responses. There are some days when I ask myself, why am I doing this? On most of the days, I either have the best job, or the second best job in the State Health Department of Minnesota under the premise of the commissioner has the best job. But she has to deal with problems that I don't. I'm also interested in systems improvement from a professional perspective and we have I think rare opportunities to do that.

ELIZABETH WAETZIG: Okay. Great. Thank you. Let's go back here.

JULIA BROGAN: Hi, I'm Julia Brogan, I'm a pediatrician and I work with various community coalitions (inaudible) and I'm here because I went to a lecture last week at (inaudible) assist in change for the benefit of mothers and babies.

ELIZABETH WAETZIG: Okay. Great. Thank you.

MARIA: I am Maria (inaudible), I'm also a pediatrician. And I come from San Juan, Puerto Rico. And we're working on a lot of complex chronic diseases and that's why I do it. I believe that there's no one person or entity that can deal with this. We have to all work together to solve – to try to help.

ELIZABETH WAETZIG: Okay. Great. Thank you. Let's go over here.

BARBARA TORRES: Hello. I'm Barbara Torres and we're Family Voices in Rhode Island. And were a family network and my role being I'm a support coordinator. And why I do what I do is, I have four kids and three of them with special needs. And it was so hard for me to navigate the system. So, I'm there to support families and help them navigate that system.

ELIZABETH WAETZIG: Great. Thank you.

MANDY MCCOOK: I'm Mandy McCook. I'm the Director of Prenatal Program at the Colorado Department of Prenatal Health and Environment. And I do this, because I believe that starting where the baby is born is the best place to start.

ELIZABETH WAETZIG: Okay. Great. Thank you.

ANDY: Hi, I'm Andy (inaudible) I work for and with Title V Children Special Health Care Needs Program in Iowa. On the leadership team trained as a physician and picked Public Health intentionally right out of the, right after the MD, right after I walked across the stage. But I think within Public Health somehow I don't know if it's karmic or what but I think MCH picked me and I've been there for about 25 years.

ELIZABETH WAETZIG: A lasting relationship. That's good.

ANDY: What can I say, they're the only one.

ELIZABETH WAETZIG: There you go.

UNKNOWN SPEAKER: Beautiful.

ELIZABETH WAETZIG: That's good. Thanks. Thanks, let's go over here.

CONNIE WILLIAMS: I'm Connie Williams. I'm a Health Service Coordinator from Philadelphia. I work for the Philadelphia School District. We hire, we had like 300 nurses that goes with the (inaudible) school district. And I'm very much active about (inaudible) I was doing that work. I'm working with a lot of the same – with health department and the partnership – all the different partnerships and I really think that a lot of the wellness prevention stuff, is you keep saying it, but we really need to do it. And I'm actually starting to feel like after like 30 years that some of the stuff is actually, you know, is actually happening. And so, the reason I do it is because I think that realistically for everybody to be healthy. And to be the best we can be, it's – that's we're going to have to really change and, you know, put some other things that we ignore. What the people call idealistic. We don't have to put those places. And working for the school district, you know, working with children is like the best way to change the future I think.

ELIZABETH WAETZIG: Okay. Great. Thank you.

MARK LAW: I'm Mark Law. I live in Omaha, Nebraska. I work for an organization called CityMatCH which is a membership organization of city and county health departments and urban localities. We're based actually at the University of Nebraska Medical Center. And I'm the Organizational Effectiveness Manager and liaison for the CityMatCH Board of Directors. And I can relate, I actually had been with CityMatCH now eight years. But when I came into it I didn't know anything about Public Health. My background was in management and organizations. To have now been there this long and to understand the importance of the work that all of you do and all of our members do kind of drives me to continue to do the work that we do.

ELIZABETH WAETZIG: Great. Thank you.

BRENDA THOMPSON: Brenda Thompson also at CityMatCH. And we always love it when someone else goes first. And I don't have to explain who we are. So, we are a partner organization with AMCHP also. So, we are state level and part of the MCH folks. And I'm the Project Coordinator there and I do it because it's just, it's wonderful to be able to help local health departments do their jobs. It's very gratifying when we get feedback that you helped somebody do something that they want to do.

ELIZABETH WAETZIG: Great. Thank you. We have one person who snuck in the back.

UNKNOWN SPEAKER: Hi.

ELIZABETH WAETZIG: Hi.

UNKNOWN SPEAKER: Hi. My name is (inaudible) Peterson (inaudible) and I am relatively new, all of two months in the position as Assitant Director for the MCH Program (inaudible).

ELIZABETH WAETZIG: Okay. And why do you do what you do?

UNKNOWN SPEAKER: I was drawn to it and I am finding out everyday why I'm doing it. I love working with people and I love making a difference in their communties.

ELIZABETH WAETZIG: Okay. That's great. So, here's what I heard. Oh, by the way, I guess I should answer these questions first. My Name is Liz Waetzig and I am from the State of California. I live outside of L.A. I worked both at Georgetown and with my company Change Matrix. And my role is to support organizations who are going through a change process in many different ways, coaching, training, strategic planning and why do I do it, my mother is a pediatrician, my daughter has some special needs and I'm a lawyer. Okay, get your lawyer jokes out now. But lawyers think strategically. They think logically. They think about how to move from point A to point B. And oftentimes lawyers already know what point B should be and their job is to figure out how to get there. Now, doesn't that sound like systems change just a little bit? Yeah, it does. It's amazing how these thought processes can change or can affect you.

So, how many of you would consider yourselves leaders? All those hands went up, good. That you really wouldn't be here if you didn't, right? How many of you went to the session this morning on leadership? Okay. It just gives me an idea of how much to focus on some things that might be overlapping or not. And feel free to say at some point. You know, we heard a lot about that this morning. Could we move on? That's fine. I'm happy to hear that and want to make this again receptive to you or relevant to you all. And the reason I asked you about leaders is, if you take off, because the other thing I heard was that there's a lot of people in here who do this work either, because they had kids who have had needs and had been moved to help other people through the system or they are providers at a certain point and they want to help people through the system. And, you know, when I think about leadership per se, we think about the leaders who come in and say, "Here I am, here's my name, here's my role therefore I am a leader." And you don't get to know a whole lot of other things about them.

In fact, I was going to ask you a whole lot of other questions that I didn't. What is the systems change that's critical? What are some of the ingredients necessary in your organization to support that transformation? How will you being a transformative leader move this systems change forward? We would've gotten some different answers probably some more details around that but there's something that – there's something that these questions leave out. Can anybody imagine what that is? And you touched on it with that why do you do what you do? We don't hear a lot of who leaders are as people. We hear about who leaders are as their role, as their mission, as the things that they intend to do, but I was just reading a book the other – on the plane, actually coming

out here about leadership. And there is the leader of – there's a technology company. And he came in to make great change. His job was to come in and transform the organization. And he came in and he sat and talked with people about his vision. He sat in their offices. He talked about what was important to him and how he saw the system moving forward. And then he went about doing his job and expected everybody to just fall in line behind him.

So, if you ask those three questions – four questions name, state, organization and role, do you have a sense of people's leadership in the room as you listen to that? You got a little more sense and then why do you do it? Now, I was gonna go on and say okay let's talk about what your favorite food is? Where you last went on vacation or where you'd like to go on vacation and what you're reading right now? What would that give us?

UNKNOWN SPEAKER: The issue for me being a senior person is, you can't ask people how long you've been doing it and what your age is? Because that's a huge generational issue and (inaudible).

ELIZABETH WAETZIG: Yeah. Absolutely, but just knowing that about you I know you a little better now. I know what you're, kind of, thinking about. Anyway, this guy in this story took all these folks out to dinner and they were – they all didn't know where they were going and they were a little freaked out by the fact that they were invited to go to dinner with the boss. That can mean a couple of things and some of them are very bad. But it ended up being just a social event and he told – he talked to them about his kids,

about how he grew up, what he hoped for in his life beyond work and something happened at work, right? There was a little bit of trust built up. So, there's lots of philosophies around leadership. And one of them that's held out in corporate American maybe not so much in the world that we live in. Around kids with special health care needs, but I think there is some sense of this, welcome by the way. There is some sense of this that we have to hold ourselves back. We have to – we can't disclose things about ourselves. If we get to personal then we're to close and maybe we can't make some hard decisions.

So, I first want to start this afternoon off by suggesting that leadership is not just about a role. It's not just about the skill set. It's about who we are. It's about our values. It's about the way that we engender trust and part of doing that is to be disclosing about who we are. We are more than our role. And that why we do it question gets us on the path to. I mean, we'll get to this a little bit later but this is the crux of – it's a thread that runs throughout the entire time that we're gonna spend together.

So, here's a little look at our – you know what, I'm going to use that. That's better. Here's a little look of what we're going to talk about today. And I know that mediation and facilitation were, sort of, sprinkled throughout this description. And I don't want to ignore that. There's not a lot of slides on that, but I am actually – I am absolutely going to reference conflict and the skills to manage conflict because guess what? As we're transforming, as we're changing – anybody experiencing conflict? So, we will talk about that because that is absolutely a critical part of transformation but – so, the way that we

had organized this talk, Suganya and I, is that we want to get a sense of the context within which transformation occurs. And how is it that you can be as leaders mindful of what that conflict or that context is? How do you assess it? How do you label it? How do you think about it? And how does that leads you down the path of wanting to know other information? And thinking about the kinds of interventions that you as leaders might use to either create or sustain change because by the way, the creation part, that's the fun part. That's the easy part, the sustaining part not so much. That's the conflict piece, okay?

So, we look at the context first. And then we look at the personal work of becoming a leader, because as we said earlier, leadership is not about a coat that put on. It's not a skill set that you acquire. It's about figuring out what skills you have, who you are, what you value? How do you translate? How do you communicate some of that? How do you engage other people in that work? You can't do that just deciding that I'm gonna try on facilitation to do this. It really is a part of who we are as human beings. So, I want to make sure that those two pieces get intertwined.

Next, leadership is not a solitary act. You'll probably hear me say that about six times this afternoon. You can't do it alone. You can't lead change alone. So, how do we create our interactions with others in a way that is productive? In a way that creates relationships and alliances that help us move through change. And then, there's the opportunity to lead in groups. If you are an authorized leader or if you're a leader even an unauthorized leader who's gotten to the point where you have followers, isn't that a

nice thing. And by the way, the definition of leader is not necessary that you have followers. So, but when you're leading a group there are skills that you need their processes that you need to think about. There are interventions that you can take advantage of that manage those group dynamics. Because you know the dynamics of these things that happen within groups, these little conflicts or a conversation, I mean, groups, they take on lives of their own. And so, leaders have to be knowledgeable about what's going on within those groups. And they need to have some skills, some ability to figure out what to do about that. How do you step in? How do you – as a member or as an authorized leader, how do you help those groups move forward? That's really where those facilitation and mediation skills can be quite helpful.

And actually I have to say at this point that one of the reasons we came to this idea that mediation and facilitation skills and conflict management was such a part of this, is that I've been actually working in conflict resolution. That's the law part of my background in health care and in areas with kids with special needs for a really long time. And one of the things that I've noticed is when you have a seminar in conflict resolution, everybody says that they need it and no one wants to come. Everybody will say, "Yes, I'm experiencing conflict and it's horrible. Make it go away." But they don't want to come and they don't want to deal with it either in their institution or even in their own skill sets, in their own ways of being. Because conflict is an inherently negative thing. It's no fun, right?

Now, I would look at conflict as one of those opportunities for growth. Those opportunities to be dynamic and move forward but that's, it's taking, you know, 15 years of a career to figure that out. So, you know, I've decided that conflict management is one of those inherent skills that leaders need. So, now I'm folding conflict resolution or conflict management underneath the leadership banner. And here's the other piece of it from a leadership point of view. As a leader, what do you do when there is conflict around you, when people that you are leading are in conflict? What's your tendency?

UNKNOWN SPEAKER: Mediate.

ELIZABETH WAETZIG: Mediate. How do you do that?

UNKNOWN SPEAKER: I bring the people together and listen in an objective, fair manner and then try to help be a translator across those lines.

ELIZABETH WAETZIG: Have you had some training as a mediator by any chance?
Yeah. I'm right there with you.

UNKNOWN SPEAKER: Well, no I have not. I was an evaluator for most of my career and I think that that hones your listening skills, to clarify what's important in programs to be studied and often those are not the same between the program (inaudible).

ELIZABETH WAETZIG: Right. Right. Well, and what I appreciate about what you just said is that, first of all you're probably unusual and the mediation piece, because in the leaders that I've encountered the two typical responses are I'm going to ignore it and pretend like it doesn't exist. Or more commonly, I'm going to solve your problem for you, because that's my job as the leader. My job is to solve your problem to make it go away so that you can move forward. And that's not terribly empowering typically and it's usually not solved if you take that approach. I mean, and it's very much like parenting and that, you know, when my 11 and 13 year old girls are going at it, I have lots of choices the expedient choice is to say, "Okay, this is how we're splitting this up. You do this and you do that then you'll trade." It's easier that way, right?

UNKNOWN SPEAKER: Exactly.

ELIZABETH WAETZIG: And then it goes away but it doesn't. It's a lot harder to engage them in this problem solving process. So, we're gonna talk about that, because I really have learned and I really do believe that the best leaders have good solid mediation skills and that for some people they're really innate. And some people can see the translation from evaluation to problem solving.

UNKNOWN SPEAKER: I just like to say, I don't like doing it.

ELIZABETH WAETZIG: Yeah.

UNKNOWN SPEAKER: I had a really bad time.

ELIZABETH WAETZIG: Yeah. Well, as a leader too you have this mix of things going on. I mean, you really can't be a neutral mediator if you're a leader. You can't be because you're an interested party. So, you – so, it's almost harder to put aside what your interests are. What's important to you as you engage folks in that process of coming to a solution that they own. I mean, think about walking that tight rope for a minute. So, that is a thread that hopefully will go throughout but it really belongs in the leadership of a group piece. And we need to get through those other pieces before we get there. So, that's I think how today's gonna go.

And we have opportunities for breaks. I'm really happy to take them as you need them. I know that our folks our video folks would really like me to take a break after an hour. And I'll try to do that for a little while. You're not allowed to go to the front desk though because you'll never find your way back. So, let's think a little bit about the context for transformation at first. Boy, could there be a more turbulent time in health care? No. What's going on in your world? Just a couple of shoutouts. What's going on? What's the context that is leading you down this path towards transformation? What are the ingredients in that? From what you can see.

UNKNOWN SPEAKER: Uncertainty.

ELIZABETH WAETZIG: Uncertainty.

UNKNOWN SPEAKER: Budget cuts.

ELIZABETH WAETZIG: Budget cuts, oh. Budget cuts, yeah. Yeah. So, budget cuts mean something though. What happens when budgets get cut?

UNKNOWN SPEAKER: Programs get cut.

ELIZABETH WAETZIG: Programs get cut. You have to do more with less.

UNKNOWN SPEAKER: Competition increases.

ELIZABETH WAETZIG: Competition increases between...

UNKNOWN SPEAKER: More responsibility for each person.

ELIZABETH WAETZIG: Yeah. Okay.

UNKNOWN SPEAKER: People leave, those students are being reassigned to other things.

ELIZABETH WAETZIG: Okay. So, you had one job now you have four jobs? Yep. And say more about that competition. Who's the competition between?

UNKNOWN SPEAKER: Just jockeying for resources and, you know, who's gonna get what when there is some relief and how we're going to recover and stay and what's in your priorities that's going to be in front of our legislators.

ELIZABETH WAETZIG: Mm – hmm. And you know competition for resources is probably one of the biggest of causes of conflict that we see. If you've heard the term siloed, fragmented, turf wars those are the things that, I mean, you would think especially around kids with health care – special health care needs or kids with disabilities or children in general. That we could all sit on the same side of the table and figure how to move forward because it's for the kids, right? It doesn't happen though. And it's almost, it's more shocking sometimes that it doesn't happen then when it doesn't happen in corporate America, because we assume we make some assumptions about their different culture then our human resources or our human services culture. So, it's almost like it takes us by surprise and yet to recognize that that's going on means that you can begin to think about interventions. You can begin to think about how to manage that. Okay.

So , what is systems change? Here's a quick definition. This is from the Colorado Department of Public Health. So, we're trying to improve the capacity of the public health system to work with lots of sectors as there is competition for resources piece. There's a dichotomy going on there. We have to work in public health with lots of

sectors, it's endemic in public health that you work across sectors to improve the health status of all people in a community. Well all people, are they all the same?

UNKNOWN SPEAKER: No.

ELIZABETH WAETZIG: No. They've got different ethnicities. You've got different socio – economic status. You've got different demographics and different neighborhoods. So, it becomes a very complex endeavor to create systems change. All within, under the guise of, all with the goal of improving the capacity of that public health system. Okay.

So, here's a little drawing of what transformation a.k.a. systems change can look like. So, we're going – oh, I can try this. I love this whole gadget. So, old status quo, when was that the old status quo? Is there anybody ever remember when there was an old status quo? Yes. I don't know who drew this but, you know, I'm not so sure there was ever an old status quo. Well, let's just say, you know, there were times that felt a little more certain, okay? And you can see that even in those times it's goes up and down through time and then something happens and that foreign element is probably from what – from our perspective at the moment this enormous budgetary economic situation that we find ourselves in. So, something is happening and it's making us look again at our systems and we have to look and say, wait a second. We need to change the way that we do things. It is not okay to do things the way we've been doing them. Does anybody feel in this room that it is okay to continue the way we've been doing things? Okay. So, foreign element is introduced and all of a sudden what do we have here?

UNKNOWN SPEAKER: Chaos.

ELIZABETH WAETZIG: Chaos, conflict, fear, disagreements about how to move forward. So, and the fear and uncertainties probably the biggest cause of that chaos. Hopefully after we've hit bottom somebody comes up with a radical idea to transform or somebodies. I mean, at some point you can't exist at this level and people know it. So, they're going to come up with something that, that is maybe radical maybe outside the box. Maybe more creative than we've ever done before. Maybe it's just incremental. And yet, it's going to – look at the distance between here and here.

So, this is the area in which leadership is absolutely critical. If you don't have leadership, you dissolve at this point. You can't move forward without good leadership. To get you to this new status quo and guess what that new status quo is going to look like that one pretty darn soon. So, just imagine that this cycle is going to continue as you, as you are leaders within systems. Okay. So, these are other questions that you might want to think about. I'm not going to go over them, because again it's a lot but I want to, I wanted to include some sense of resource within this Power Point. Just think about the why, the when, and who's these are things that we're going to talk about throughout this session too. What are the things that we need to consider the who, the when, what does it going to take to get there? Okay. That's all part of our context. Okay.

So, let's talk about the different kinds of challenges. I don't know if you are familiar with Getting to Maybe. Great book, talks about different ways to identify challenges because as we said before being able to assess what's going on is important, okay. So, it's a simple challenge. It's like following a recipe. You know, you know what you're going for. You know you want that cake at the end of the recipe and the steps are provided to you. It's what Heifetz, Ron Heifetz would call. Anybody familiar with Ron Heifetz his work, Leadership Without Easy Answers. It's what he would call a technical challenge. You know what the outcome is. It's easily identifiable. You know, what the steps are to get there. There easily identifiable. You can replicate it. Anybody think about simple challenge that they face.

UNKNOWN SPEAKER: Parking (inaudible).

ELIZABETH WAETZIG: Say more about that. You know how to get in the parking garage? You know where you suppose to park?

UNKNOWN SPEAKER: What happened in Philadelphia was they consolidated all the offices like the school district and it's like a business model. So, they sold off a lot of the building and stuff and then they put everybody in one office not realizing it's a city where do you park.

ELIZABETH WAETZIG: Are you sure that's a simple challenge? It's like office space. It should be easy but, you know, you should be able to get a chart and put everybody on. It's not that easy. There's politics going on there. Yeah.

UNKNOWN SPEAKER: So, anyway, so people had to figure out other ways where to park it.

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: You know, get there and so I figured out that I need to walk to get exercise and (inaudible). So, I just parked far and I moved.

ELIZABETH WAETZIG: All right. For you that was a simple challenge and it was simply resolved. That's nice. That's nice. Simple challenges happen everyday and really with leaders. The goal is you don't collaborate with that you just do it. You just take care of it. Those are simple, easily replicable and people know why you're doing and what you're doing. So, that's not too hard. Let's talk a little bit about complicated challenges for a moment. You know, when you think about some of the technological things that we've accomplished as a culture, I mean, they're vast. And sending a rockets to the moon is one of them. Putting a satellite up is another one. There's a high degree of expertise that is required there. That cake is all of a sudden become multiple steps, lots of sort analyzing and assessing and intervening along the way. And, yeah, even though there are lots of steps and they're difficult sometimes there's still a recipe. There's still a

pattern. It's replicable. You can do it over again following the steps that had been laid out.

And sometimes we get a little confused as leaders between the complicated challenges and the complex challenges. In complex challenges there are no rules. There is no pattern to follow, okay? It's based – you can't separate the different parts from the whole. You can't tease them out, but you can see the relationship between them or you need to be able to see the relationship. You don't know what the outcome is going to be. It's not easily identifiable and it is what Ron Heifetz would call an adaptive challenge because things have to adapt and then behaviors might have to change and values might have to change and he uses a wonderful example of – I don't know I'm not even going to ask how old people are in the room, but I'm wondering if you remember when computers became an integral part of the way that we work. And there's the before the computer the PC and after the PC, right?

So, before the PC we had things like, you know, administrative assistance we had people to answer the phone for us, you know, documents were typed and all of a sudden these PC's came in and we were promised that they were going to make our lives easier. They were going to make our worlds more efficient and even if we didn't think that we are getting them anyway, so, you might as well figure out how to use it. And so, there's a technical answer to that problem if the adaptation, the integration of computers and there's an adaptive challenge. Can anybody identify the technical piece? How do you use the darn thing? Technical pieces I don't know how to use it, technical

answer is lets get trained, right? Can anybody think of what the adaptive piece was there?

UNKNOWN SPEAKER: What do you do with it.

ELIZABETH WAETZIG: Yeah.

UNKNOWN SPEAKER: It's change communication processes.

ELIZABETH WAETZIG: Yeah. It's changed the way that we work. It's changed the way that we view our own competency. Who's good at computers? It's not those of us with lots of experience by enlarge. There are some very early adapters out there who were terrific but by enlarge it's the older more experienced folks are not the most facile with the technology. So, it's not just about the computer. It's about what the computer symbolizes in terms of competency and identity and the way that we work together, okay. So, that's the adaptive challenge piece. And that's what I think is so interesting about this complex challenge.

I also think about parenting is a wonderful metaphor for this. You got one kid, your oldest kid, you do the things that you're supposed to do. You read the books and they, you know, some of them work and some of them don't. Then the second kid comes along and you figure you've got some knowledge now. You kind of understand what to do about that pacifier and well, you know, what they're different aren't they? That

second kid is not like the first kid. And the rules for the first kid don't apply to the second kid, right? And it's based upon lots of things not just the kid, but your relationship with that child. Your relationship with your partner. The relationship between those two children. I mean, all of a sudden it becomes a lot more complex. So, take that metaphor and apply it to your work situation. Anybody want to think about a challenge that maybe they thought was complicated that's really complex.

UNKNOWN SPEAKER: Center for families because the first in South Carolina where, you know, we've always been, we're very community driven but we're going to actually have a place to do workshops and bring specialist together in our center now and we've got a great playroom. It's just sounded like a wonderful dream, but you know, we're, you know, poor economy and trying to get resources for this donated and, you know, the change with staff and we have our autism support group in there and the parents were still too loud the children drew, you know. So, it's never – it's like the parenting thing you just envision it to be one way and it's a daily changing and shifting and...

ELIZABETH WAETZIG: I think what you highlighted is a sort of a balance of short, short view and long view. What is it that we're hoping for? What do we need to deal with in the short term to get there and I think that balance is a word that I think about a lot in complex challenges. What's going on for the individuals? What's going on for the whole community? What's going on in some of the relationships that are out there? What's going on for the culture of the organization? What's the short term gain? What's the big picture? It's all a balance and being able to anticipate and live in the moment is tough.

And yet, that's what leaders have to do, is look at what's going on right now, but also anticipate what's down the road. Anybody do yoga out there? It's become my metaphor for everything in life. Because it's all balance. It's all about balance.

So, what do leaders do to be successful in a complex world and with complex challenges. First of all, you have to be able to think about, okay, I'm looking at the challenge in the face. I'm looking at a situation. I'm looking at an environment. Is it simple? Is it complicated or is it complex? Is there a recipe to follow? Have I faced this before? And will the recipe that I followed before will that apply this time? Are they variables, so identical that it make sense and do other people see it as simple complicated or complex?

Transformation my friends is typically complex. If you're doing systems change you're not going to be able to follow a recipe. I know I do a lot of training in technical assistance out there and the first question I usually hear from a client, he wants consultation is, what do they do in this state over here? Or I heard that so and so in Minnesota was doing this really cool program. Could we do that? Like, what do you have the same people? Do you have the same resources? Do you have the same leaders? Do you have the same outcomes? It can't follow a recipe. And well, we can learn from some of the things that they have done. You can't just plop it in a different place.

Mediation is actually another – there's another great example for that and I think I don't know how much you want to know about the field of mediation, but it has been looked at by several people as a replacement for adversarial processes. And so, we all assumed that because it's collaborative as opposed to adversarial we can just plop it in a system and everybody will want to use it. Well first of all people don't know what it is. So, they don't use this. Second of all, it's not what they know. It's not their typical way of doing things. So, you know, what's the work that has to go on to integrate something new into a system. Do you have question?

UNKNOWN SPEAKER: Yeah. That's a really interesting point in our business we're always being offered and encouraged to follow best practices, I mean, AMCHP has got a whole best practice thing and the idea behind that is that the experiences and practices and programs of other states or communities have some adaptive potential for those who learn about them. And I think there's truth to that, but there's also a dynamic that seems to be a little bit more personally or ego trip in which says, we want to have our own program and maybe some resistance to adapt a program that really could be with high fidelity even.

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: So I hear what you're saying, but I don't know if I'd buy it completely.

ELIZABETH WAETZIG: I'll tell you about the experience that actually that I think underscores your point. When I was in Montgomery County Maryland I created a child welfare mediation program and, you know, we – Montgomery County, for anybody who lives in the Washington Metro Area, Montgomery County is sort of the bully of Maryland, you know, they have the most resources and whatever. So, we went and created this program, lots of conflict. We got it going. We're very excited about it and then Prince George's County called up and said, "Well, we're kind of interested in what you're doing over there." So, I went over and I started talking about what we've done in Montgomery County and I got a lot of push back. Well, you know, we're not Montgomery County. We don't do things the way they do. So, what ended up happening is I took a step back and said, "Okay, well let's talk about what Prince George's County needs? Let's talk about what's important to you all. Tell me about your population. Tell me about why you want this kind of a program? What you're hoping to get out of it. And let's tailor it. Let's take some of the lessons learned and tailor it so it makes sense for your population. So, the word that you used was adaptive potential I think, a phrase? Was it a adaptive potential? Something liked that. I liked it a lot because what it says, what it says to a community is there are some things worth talking about. It may give you the right questions to ask. My experience at Montgomery an Prince George's did for me as a consultant was I learned these are the questions that I need to ask a community that's interested in this type of program. And it helped me develop – and the programs actually ended up looking very different. You know, Montgomery County started their program right when kids got into foster care. Prince George's decided that It needed to wait a little bit and their issue was more permanency planning. So, how was that going

to look. So, what we did was take the best of one program and adapt it given the needs of that community. So, I definitely don't disagree with you. I think it's just a matter of tailoring. And I don't know if I said too much about that but there you go. Let's move on.

All right, so understanding that transformation is typically complex and that relationships are what make up that complexity a lot of times and we're going to talk a little bit about, a lot about relationships and alliances and how to build those up as leaders as we get into the interaction piece. I think what good leaders also do in transformation is they recognize complex challenges and they seek complex solutions to that. It is so tempting to take the quick fix or take what looks expedient and I know of too many good programs that were imposed upon a community without the due diligence of the planning and the engaging and the thinking through how it would look and the tailoring and those programs didn't end up succeeding and it was because those other complexities were not attended to. Okay. So, we have to engage individuals where they are and where the system is to help everybody move forward in a complex challenge, okay.

So, let's talk sort about leadership broadly and I know many of you went to the session this morning and I don't want to be too duplicative, but there are some things that we wanted to talk about leadership generically. Anybody want to tell me who they think is a good leader and why? It doesn't have to be in your organization. It can be anybody. You can go into the history you can talk about somebody currently. When you think of the word leader, when you think of a leader, who comes to your mind and why is that?

UNKNOWN SPEAKER: I say parents because parents have been through so much and there are times that, you know, they're leaders. So, (inaudible).

ELIZABETH WAETZIG: So, there's a passion based on experience that makes them want to support other people and that's a leadership quality, right? Did you have somebody?

UNKNOWN SPEAKER: I was going to say someone that I think continually provides trust and confidence and provides inspiration.

ELIZABETH WAETZIG: Trust, confidence and inspiration. There's a safety in that isn't there? As you help groups move forward through uncertain times being able to trust them and hope that they are certain about what they're doing. Did you have somebody in the back, no? Okay. Anybody read Team of Rivals by Doris Kearns Goodwin about Abraham Lincoln. He's my new favorite hero. He's my new favorite leader. And one of the reasons I resonated with that book, so much and resonate with him I knew you guys have been Lincoln'd out. I mean, there's been a lot of Lincoln going on but one of the reasons I love this book is because she really talks about how he brought together people who didn't agree with him. He knew they were his competitors in the 1860 primary to be president. And they didn't like him, because he wasn't supposed to win. So, they're like who is this guy and how did he beat the governor of New York State? I was the heir apparent said, Seward. So, what Lincoln did though is he pulled all these

great minds together not only did he listen to them and why they disagreed, He was able to work collaboratively with them to answer one of our nation's greatest challenges.

So, he was stood fast in his vision but he was also steady in his need for understanding where other people were coming from. So, when I think about leadership that book just comes to my mind. Leadership, it's a combination of a whole bunch of things. I mean, it is very hard actually to define what leaders do and who they are and what makes a good leader. I believe that there are probably maybe one percent of leaders who were just leaders because that's the way they're born. I feel the same way about mediators and you maybe one of them. Some mediators just are born with those innate skills to pull the disparate voices together and help manage that dialogue and get to a place of agreement or consensus. That's an innate skill for about one percent of people. And I think there are probably are some folks on the other end of the spectrum that no matter how much they learn and how much they try and how good their intentions are it's just not going to happen. It's just not where they are. Most people can learn the stuff. The vast majority of people can learn skills, behaviors, can think about values and it just requires a measure of self reflection. It requires a measure of self assessments so that you know where you are as a human being within this work, within this work, within the work of transformation.

I believe that, to use your word again, leadership is an adaptive skill. It's an adaptive way of being and it requires that not only are you self reflective, but you know how to look at an environment and think about how it's moving and changing and that you're

deliberate about how to intervene in that. And then leadership, I think to your point I'm sorry I forgot your name in the back...

JOHN HURLEY: John.

ELIZABETH WAETZIG: John. I think to John's point it mobilizes people it expands their capacity. It really helps them think together, grow together, learn together and then move forward together. So, leadership again it's not a solitary act. And you can't make someone see your vision. You can't make them do anything, but you can engage with them in a process that gets people moving forward together. Okay.

A couple of things here that I think are really interesting. There has to be a need for leadership. There has to be a context. It's a journey. The bottom part I think is the most significant part of the slide. Leadership happens in a moment. It is a journey and yes it is an entire symphony. You can't just conduct nothing, right? So, that metaphor I think actually works well. Okay.

Now, I guess we're 10 minutes before you want to take a break. I'm just trying to take, take stock in the time.

So, leadership, it's a verb. It's not a noun. It's not a thing. It's an action. It's a set of behaviors. It's a set of skills. It's not a position and I think we think about leaders as congress people we elect leaders. Leaders are appointed into a role. Leaders have

titles not necessarily. Leaders are observable, because of how they conduct themselves. Because of the examples that they set and it's definitely defined by what we do not who we are. Not what position, what role we're in. Okay.

So, transformative leadership, so, there's day to day leadership and then there's that leadership that's required when a system is undergoing transformation. Okay. It starts with, you have to have your own vision of what you think should happen, right? And this is another one of those of balance things. We're going to talk about shared vision later but to start with your own vision it's hard to be a leader if you don't have a sense of what you're leading toward. So, being able to think about all those complexities and put together that puzzle and be able to articulate the possibilities that's actually a pretty, pretty big skill, isn't it?

To be able to anticipate and articulate and communicate with possible out there. What is my vision? And how can I create a sense of the future that's exciting that engages people that motivates them to want to be a part of it even if they have questions. It's possible that a leader can develop, and we're going to talk about, different ways that leaders can develop shared visions. It's possible that they can develop them up on this level and then help them trickle down. I won't say too much about that yet because I think there's a range of opportunities there. I think the important piece of this though is really that this is the opportunity for leaders to build upon what's important to them, what they see, what they anticipate and help engage people in the work of building that consensus so that they can move forward together. Okay.

Okay, so let's get into this personal work for a second. Do you all have piece of paper? And something to write with? I was supposed to have a flip chart and I don't. So, I'm going to have to sort of help you imagine what I'm hoping you'll do for a second. Can you draw a circle in the middle of a piece of paper? There's another pad up here if anybody needs one. Does anybody need? And I've got more. Okay. So, draw a circle on the middle of that piece paper and on the left side for a moment I want to just have you shout out some trends that you see in health care. What are some things that you see going on in either health care, maternal and child health or public health, what's going on? What are some trends going on that you see? Okay. So, there's an increase use in electronic records. Real movements towards that. What else?

UNKNOWN SPEAKER: More partnerships.

ELIZABETH WAETZIG: More partnerships. Okay. Increase in partnerships.

UNKNOWN SPEAKER: Getting away from individualized services like home visiting.

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: And focusing on Needs Assessment and in public health. The public health nurse role in looking at the bigger picture as opposed to direct services.

ELIZABETH WAETZIG: So, there's two trends there. Decrease in direct services to individuals and an increase in sort of an attention to community needs and how to manage those with personnel?

UNKNOWN SPEAKER: Right.

ELIZABETH WAETZIG: What else?

UNKNOWN SPEAKER: Loss of Rural providers.

ELIZABETH WAETZIG: There's a decrease in providers in the rural area. Okay. What else?

UNKNOWN SPEAKER: Escalating costs.

ELIZABETH WAETZIG: Oh, yes. Costs are really increasing across the board. What else?

UNKNOWN SPEAKER: Lower reimbursements.

ELIZABETH WAETZIG: Lower reimbursements. So, costs are going up and what you're taking in is going down. Okay. So, that culminates in a decrease in resources.

UNKNOWN SPEAKER: More science base.

ELIZABETH WAETZIG: More science base. Okay, there's an increase and looking for evidence base practice, science base practices. Yep, John?

JOHN HURLEY: I'm trying to think of the better first word but I'll use the word conflict, but I'm open to a more appropriate word. Conflict between procedural medicine and primary care.

ELIZABETH WAETZIG: Okay. So, can you help me understand that a little bit better. Oh, I think I understand. You're talking about secondary or tertiary care that emphasis on procedures as opposed to primary care preventative care, okay. So, an increasing disparity of focus between procedures and prevention primary care. The trends you see going on.

UNKNOWN SPEAKER: In our field we see (inaudible) longer with more complex conditions, so we've been successful (inaudible).

ELIZABETH WAETZIG: Yep. Yep. Okay. So, there's an increase in people living longer with special needs, but also an increase in need. Yep. Okay. All right. So, I think as we – if we try to sum that up we're seeing an increase in needs and an increase in focus on ways to meet those needs using community based approaches. There's a decrease in

resources which it also sounds like there's a little bit of a decrease in focus on both individual care and preventative. Does that sort of sum up what we heard?

By the way that was just a facilitation skill and I want to try to model some of this stuff as we go forward. Taking the pieces and putting them together helps groups to move forward. Okay. All right, so the next question I'm going to ask you on the right side of that piece of paper is if you had to think about the values of your profession, the values of your work, what do you value in your work as a health care provider, as a family advocate, as somebody who does public health? What are the values that you see that are part of your work? Ethics might be another way to say that.

AMCHP 2009 ANNUAL CONFERENCE

Leadership Skills for Systems Development and Transformation

February 20-27, 2009

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: Cultural Relevance.

ELIZABETH WAETZIG: Cultural Relevance, okay. What else? Anything else?

UNKNOWN SPEAKER: There is a movement that every one has the right to – is shouldn't be a privilege like being able to get basic health care, should be right – we shouldn't be just a privilege?

ELIZABETH WAETZIG: So, in...

UNKNOWN SPEAKER: It's more movement in that direction.

ELIZABETH WAETZIG: Right. So in your world you're seeing that health care as an entitlement is a value in your organization – okay. That's good. Yep.

UNKNOWN SPEAKER: Cost containment.

ELIZABETH WAETZIG: Cost containment – being efficient, right? Is a value.

Anybody else? Okay, so in that circle, we have on the left side – or on one side, we have trends in health care. On the other side we have, sort of, these system values that I wanted to ask you about. And then in the circle I want you to take a moment and put your own personal values in there. What are some of the things that you can identify that guide you in your decision making that you hold in high value in your own life? Let's take a moment and do that quietly.

And actually, as you're doing that maybe both go ahead and take a break, for about five or ten minutes, for two reasons: one they need to change the tape; two you've been sitting for an hour and the third reason is they didn't give me flip chart and I need one. So, I think we are going to take ten minutes and see if we can't get someone to bring flip chart down here. Thanks. I will, I will she makes me the most amazing clothes.

UNKNOWN SPEAKER: Didn't you ask your mother did...

ELIZABETH WAETZIG: My mother, my pediatrician mother she sews and I go home and ransack her closet every time I go home.

UNKNOWN SPEAKER: Wow.

ELIZABETH WAETZIG: Yeah, it inspires me not to change shape, so I can keep stealing her clothes.

UNKNOWN SPEAKER: (inaudible)

ELIZABETH WAETZIG: I will tell (inaudible)

UNKNOWN SPEAKER: (inaudible)

ELIZABETH WAETZIG: I know, I know. Because snaps are such that supposed to be able to gather this, but I don't, because you're right, you can see right through to the taping.

UNKNOWN SPEAKER: This is true, right?

ELIZABETH WAETZIG: Oh, right, it's true.

UNKNOWN SPEAKER: Like a crossover (inaudible)

ELIZABETH WAETZIG: No, it's true she's right. – Well, you know, – But you see don't you see me now more as leader because you know more about me?

UNKNOWN SPEAKER: Yeah, like you steal your mother's clothes.

ELIZABETH WAETZIG: Yeah. But I really can't sew like she can.

UNKNOWN SPEAKER: Because she got a great hands (inaudible)

ELIZABETH WAETZIG: Oh, yeah. she just retired in January from practicing medicine too. And I think as a developmentalist the community is so sad, because she's been there for 35 years. She knew why I shouldn't hang around with my friends. I mean, because she saw them all in her office. So she would know that they were not a good influence, but she could never tell me why. Now the truth comes out – remember that kid?

All right. So we were talking before the break about values. And I just wanted to look for a moment. This will not be on the power point because it's yours. I want you to look for a moment at the cross over between the trends in health care, the systems values that you noticed and your values. Now for just one moment I want to bring us to popular TV to illustrate this point. You guys all see; many people in this field do not watch TV, so forgive me for the analogy upfront. But I don't know if you've been flipping channels and have seen the commercials for The Apprentice.

UNKNOWN SPEAKER: Yes. (inaudible)

ELIZABETH WAETZIG: We're not supposed to be talking, I mean, this is a whole show about building corporate leaders, right? They're supposed to be talking about leaders that will run companies, I mean, these are supposed to be pretty high powered, pretty effective leaders – Donald Trump. He's got a lot of money, right? You would think he's a good leader, supposedly. Well, who knows if you knew Bernie and the Boys, but what's interesting to me is in those clips. We hear things like – you know what's going through my head right now is Joan Rivers saying, "You are despicable human being." Just think for a moment, cultural speaking, in the United States about how we look at leadership, and ask your self if there is a disparity between, how we think of ourselves as human beings, and how we think of ourselves as leaders. When I think, when folks think of themselves as human beings, they want to talk about how empathetic they are, how they care for their families, they're loyal. You know, there are a lot of good things. And then you think and then you watch them talk about how they're good leaders. I don't know about you, but I'm seeing a little disparity there.

So, when you look at the sheet that you filled out, Trends in Health Care System Values, Personal Values. The disparities might not be as glaring as they are on The Apprentice. I'm pretty sure they're not. But do you see some conflicts going on there between values. The trends tell us, what's going on? You know what, focus away from the individual on the community, there's some good pieces about that. And none of these values or many of these trends are not either black and white good or bad, but they come together in a way that is disparate

sometimes. And I think, when we think about leadership, when we think about who we are as individuals in leadership. It is very important that we assess our own personal values and we think about how they carry over into our organizational work, because you will be judged by whether your actions line up with your words, right?

So, I guess I could go back and ask you to look at that sheet, but I'm pretty sure that you're looking at it for yourselves. You know, what's disparate, what's not, what does that mean in the way that you lead folks. So, what are values?

Values are beliefs or standards, or qualities. They're what we think are worthwhile in our lives. For me, they are those things that guide us, okay. In leadership, personal, organizational, community beliefs, they're not all the same. The standards and qualities, but they do influence your work and interaction with others. And again, that sort of, that confluence of personal values and what you're trying to accomplish as a leader. And they come together and they influence the decisions you make about how to move forward, the way that you interact with other people. And people notice, when your values as a person, don't line up with the way that you're conducting yourself as a leader. And you lose credibility as a leader, if that's true. And that's not always the glaring, the Bernie Madoffs, the Donald Trumps, it's not always as glaring and that's almost a parody of what can happen. And when it's subtle it's more confusing and it can cause a little more conflict.

UNKNOWN SPEAKER: Can I ask you a question, a little bit...

ELIZABETH WAETZIG: Sure.

UNKNOWN SPEAKER: Do you think sometimes the way – when we talk about the disparity in leaders, people such as the Trumps and Bernie and all the boys and stuff, that they, that's not really them, that is the way that they have to let society see them in order to shield them from any, you know, of looking comment. You know what I'm saying, like, you know?

ELIZABETH WAETZIG: Mm-hmm. There's a perception of how they want to look to other people and their playing to that perception is that what you're saying?

UNKNOWN SPEAKER: Right.

ELIZABETH WAETZIG: Yep, that they think leader mean I have to be ruthless? I have to be aggressive? I have to be predatory? Those are not necessarily great qualities from where we sit as human beings, but those are things that they hold up as great leaders, I do think there's a disparity. Between what we can hold up sometimes as getting the job done, the efficiency and so how are you getting the job done. What does that mean for other people? Yeah, I do think we're playing to perceptions sometimes. I think that's why leaders are lonely. You know, if you

think about this for a moment, leaders don't have a lot of people that they can trust and talk to and get counsel from. And they're lonely, because they play to a perception. So, how can they, if they play to that perception. How can they then be honest with people.

Again, I know that there are differences between corporate America and human services. I also now though that we build up a culture in our country; in our society, around what we think certain roles are. What we think leaders are; what we think we should be doing as advocates; what we think we should be doing to manage conflict. We build up expectations, culturally speaking, and I think leadership is one of those things.

A value system, it's very personal, but it helps us make decisions. You know, I was talking with – again, this is a corporate example. So I apologize if it doesn't feel relevant, but I actually think it's very relevant for what we're talking about. I was talking with the president of Marriott International. So he goes out and he buys hotels for Marriott and he does all these deals. He was talking about the way that Hyatt, Hilton, and Marriott all. – Are you familiar with Bill Marriott? As a leader of Marriott corporation, it's a family owned business, basically. He started with his father and he's been running it for a long time and he's really built it into a hotel empire. And, you know, the way that they describe this world is very interesting, but basically what this gentleman said to me was. "I know when I go in to do a deal that there are certain things that I can unequivocally state are part

of the deal, because of the value system of our leader. Not of organization necessarily, but of our leader. So, I know that when somebody is negotiating hotel deal and part of the deal for them is that they want five percent under the table. I know unequivocally that I can say no. I don't have to think about it; I don't have to call anybody, because the value system of Bill Marriott and this corporation is so strong. It's almost like – to go back to family centered care for a moment. We to that stated piece, and one of the things that we've been working on with some of these systems is we all say we have this system of care values, these medical home values, right? Cultural competence, community based, family centered, youth guided, we've added in the last five years or so. We all talked about those values, I'm not sure we all know what they mean. And I'm not sure that they mean the same thing, for every site. So figuring out what that value means for your site, can clear up some of those. Well, how do we conduct ourselves then, if we're family centered? So, to me though, when I think about my values as a human being and my values as the leading this corporation, or a faculty member at Georgetown, there should be some consistency. And that's what leaders do, there is consistency between those.

More on values: subjective reactions to our world, they guide our options and behavior, you know, I think this is sort of interesting, they're developed very early in our lives. And I know very strong value in our family was "you have to take care of other people." You have a social responsibility to take care of other people, you can't just live for yourself. So, you know, I hear that mantra, you

have to be considerate of other people. I hear my dad telling at five, right, you know, through out my life. But and their resistant to change, they come out of our direct experiences, the people who are important to us, particularly our parents, and that early childhood, the early childhood folks in here. I'm guessing, are probably resonating with this.

All right, you know, at the second bullet actually, they defined what is right or wrong, actually I want to talk about that for a moment, because I'm not sure that they always tell us right from wrong, that feels too stark to me. Sometimes they just help us prioritize, they help us weight, which way we might go. This feels more important than this does. I don't know that, I think there's a lot of grey between right and wrong. But having a sense of what your values are gives us a feeling of prioritization, maybe. You know, how to get through something that feels complex or confusing. Yep.

UNKNOWN SPEAKER: In terms of exerting leadership and this is just empirical observation, I don't know what to be certain leaders or stuff, but it seems that in this place at this time, the leadership qualities of the definitive and in what is right and what is wrong seems to be very appealing to the followers of those leaders. And that nuance or a complexity or uncertainty – or even if that's how the world is, are not considered leadership qualities. And of course then there is a whole cascade of consequences that follows that.

ELIZABETH WAETZIG: Right. And for me that's about meaning, I mean, I think it's natural to look for people to say these are the values. Especially when you're talking about a leader in an organization, we value families, we value family centered care, I think the complexity comes in to – so how does that guide our decision making? When we're looking at resources – and I'm trying to come up with some disparate things off the top of my head, but when you're looking at maybe engagement versus efficiency. Do we engage people and enroll them in decision making, versus we just need to get things done. How do you square those two things based on values? And I think the real leadership comes in, in helping a whole organization adapt to both the disparity and how to get through that. It's again it's that balance piece. I know what my sense of values as a leader, but I also know that if I don't have the conversation with those that are in the organization it really doesn't matter what I think. Does it matter what my values are if I can't have the conversation and those values can't permeate the organization and help us move forward together, that's where the nuance comes in, that's where that complexity comes in. Yep.

UNKNOWN SPEAKER: Two expressions: “No money no mission.” I can actually see in our community. People who are just blinded by service, and didn't want to pay attention, but also having now to layer on a another layer of the business piece, was really challenging, like you said, what were we trained to do. I mean, I was trained to do medicine, I wasn't trained even to teach medicine. It's just as a leader, looking at how much time it takes turn quality, I mean, as you get older

you could get opportunities that looking all these younger potential leaders – as I try to quicken them in my program, how much there is still to learn, how do you jumpstart, what do you jumpstart?

ELIZABETH WAETZIG: Well, and I think what we may have provided here is a sense of that road map that you're talking about. In the first part of developing leadership is, really knowing who you are. And how you feel about and what you're values are. We're going to talk about self assessment a little bit with cultural competence too. How, who am I as a cultural being, what are my values and how does that help me define my leadership? And then it goes out, but if it doesn't start in first, then out is just a coat to put on. It's just a set of skills to try on, it's not who you are in that work, does that make sense? And does that answer or respond adequately to your comment?

You know, because we talked a lot about personal values and I think we've, sort of, bleed on to the idea of an organizational value system, but what we haven't touched on is the fact that there are a lot of systems out there with different values and this is where the work gets really complex, and exciting, and challenging. There's a value system of the provider, right? We take care of people, I don't want to run a business; I don't really care what's efficient, I just want to take care of people, right? But then you have, and so you have the individual provider, but you also have the provider group, but wait a second we really are a business. We really, kind of, do have to, at least pay for things. And

we have to make a profit so we can pay salaries. I think that is one of the fundamental and very interesting complexities of health care. Are you a service or are you a business? Well, quite frankly, you're both. And how do those two things square? I think that's hard. You have a value system of a client, I have my family to take care of. I am loyal to my family – we hear this in education too. This is the person I'm advocating for. Then you overlay that with the provider or the professional group. I got 40 kids to think about. I have this finite amount of resources. And I have all these kids, which goes to your trend about, my individual focus to community focus. Is that a way to maximize resources which we heard over here about cost containment? But is that squaring with the family value of this child needs, so that they can be happy, healthy, contributing, meet their potential. Then you have the value agency and the community this is getting pretty complex isn't it? Yep.

UNKNOWN SPEAKER: How about (Inaudible)?

ELIZABETH WAETZIG: How about?

UNKNOWN SPEAKER: Well, just those kind of choices, I mean...

ELIZABETH WAETZIG: Oh, right.

UNKNOWN SPEAKER: (Inaudible) health care right now and people losing jobs to ...

ELIZABETH WAETZIG: Sure.

UNKNOWN SPEAKER: (Inaudible).

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: Gets down to a personal thing.

ELIZABETH WAETZIG: It does and I got to provide for my family and these people have to provide for our families. And this program is providing for families. Difficult stuff to square isn't it? Knowing where those values are and how those priorities are fueling that decision making though is the first piece; it's the first step of this.

So there's, there are times when the systems overlap. I would imagine that most of your systems had some overlap. And it usually is around the child, or the children, the clients of focus. You have some resonant values systems over intervening early prevention, promotion, using the resources for the most amount of people that sometimes squares at the agency and their provider, but maybe

not the client. And see I'm pointing to the screen, what good is that doing? So you might have some synergy here, but not here. I hate technology sometimes.

All right. So, the reason I asked for the flip chart is I want to do a little exercise here. Because sometimes when we think about values we do get stuck in good versus bad and I can get very judgmental about somebody else's values because I think their wrong, I think their misplaced. But there are a lots of values out there that are judgment neutral. You can't judge them they just are, right? So here's what I want to do real quick, get you thinking about, again, sort of, where you are in all of this? Lets see, do I draw the line straight according to – okay. Can you see? – Okay, it's okay, yep. If I do this.

UNKNOWN SPEAKER: Oh yeah, that's good.

ELIZABETH WAETZIG: It's okay it will come back on, all right. Fate. Personal control. Okay, my first direction is, don't over think this, okay. I just want you to react to this idea about how do you think things happen in life? Do they happen because of fate? And you can self define fate, or do they happen, because of personal control? I want you to put yourself on this continuum; this is the middle. Just decide where you are, instant reaction at where do you put yourself right here. I am going to go around the room. You can pass if you want to. But if everybody passes I'm going around again. Okay, when things happen to people,

do they happen because you have personal control over those things. Or do they happen because of fate?

UNKNOWN SPEAKER: Consequences, are the result of your actions?

ELIZABETH WAETZIG: Yeah, where would you put yourself on this continuum?

Would you say everything happens, because of personal control; everything happens, because of fate. I find myself in the middle or anywhere here.

UNKNOWN SPEAKER: In the middle.

ELIZABETH WAETZIG: In the middle, okay. How about you?

UNKNOWN SPEAKER: I'm a little bit back on fate.

ELIZABETH WAETZIG: How far back?

UNKNOWN SPEAKER: About right there.

ELIZABETH WAETZIG: Okay. – yep.

UNKNOWN SPEAKER: I'm half way between the middle and personal, yeah, but when I think is that I find I'm there, for other...

ELIZABETH WAETZIG: Okay, stop.

UNKNOWN SPEAKER: I'm on the fate side in between the two reactions.

ELIZABETH WAETZIG: Right here?

UNKNOWN SPEAKER: Right there about there halfway.

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: I'm with Jeff in Alaska.

ELIZABETH WAETZIG: You were in on Alaska?

UNKNOWN SPEAKER: I am that, but...

ELIZABETH WAETZIG: Okay stop.

UNKNOWN SPEAKER: I am in the middle.

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: (Inaudible).

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: I'm slightly to the left over three Xs...

ELIZABETH WAETZIG: Right here? – No this is great, this is exactly what I wanted.

UNKNOWN SPEAKER: I'm on the fate side – yeah.

ELIZABETH WAETZIG: Okay. All right.

UNKNOWN SPEAKER: I'm between the where's fate and between (inaudible) and this last one.

UNKNOWN SPEAKER: Go where your thumb in is.

UNKNOWN SPEAKER: Yeah, right there, sort of right in the next slide.

ELIZABETH WAETZIG: Right here? Okay – John.

JOHN: I am one millimeter to the right of the pulpit.

ELIZABETH WAETZIG: Okay – sad thing is I knew what he meant.

UNKNOWN SPEAKER: I'm there too.

ELIZABETH WAETZIG: You are there too, okay.

UNKNOWN SPEAKER: Right before to the (inaudible)

ELIZABETH WAETZIG: Right here?

UNKNOWN SPEAKER: Right in the middle.

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: To the left of the middle.

ELIZABETH WAETZIG: How far to the left?

UNKNOWN SPEAKER: About right there.

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: I'm enthusiastically passing.

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: But all will be revealed...

UNKNOWN SPEAKER: I'm accountably like, this one over (inaudible). No this the one.

ELIZABETH WAETZIG: Right here?

UNKNOWN SPEAKER: Yeah, you move back a little bit.

ELIZABETH WAETZIG: So, what do you think about that?

UNKNOWN SPEAKER: I actually got a comment on that.

ELIZABETH WAETZIG: Yeah.

UNKNOWN SPEAKER: I think parents who have children with special health care needs find themselves more often on the fate side, because we have totally no control in most cases of the fact that our children were either born or became this way.

ELIZABETH WAETZIG: So that experience that you went from what you've observed from parents. Parents of kids with special health care needs tends to draw ...

UNKNOWN SPEAKER: Meant most of my life has not been in my control.

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: Especially when it comes to interacting with the systems, like particularly education following closely by medical health. Had no control.

ELIZABETH WAETZIG: Yeah. Okay.

UNKNOWN SPEAKER: But my perspective is, sort of, the opposite (inaudible) fate is opportunities and so because I optimize on it doesn't mean that I have really had that first, it's just, but I take care of a kid with special health needs, right? I may actually overlap a little...

ELIZABETH WAETZIG: Who had some comment here?

UNKNOWN SPEAKER: (Inaudible) but once your children are born as a parent of two children with special health care needs, everything that becomes about

personal control. So you find yourself dealing with the things that fate handed you but also trying to control every aspect of your life.

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: I think that's why I put myself in the middle, because I know that fate is leaning to one side. Dealing me things that I have no control over, but what I have control over I'm going to optimize toward balance. So I want to be right there in the middle.

ELIZABETH WAETZIG: Yep, okay.

UNKNOWN SPEAKER: And so my advocacy skills and the things I work with how I communicate with doctors, teachers and service providers, keep me in the middle.

ELIZABETH WAETZIG: Yep.

UNKNOWN SPEAKER: Well becoming, the thing you - it's, kind of, upper hand, closer to that and it gets me out to expand a little more.

ELIZABETH WAETZIG: Yeah.

UNKNOWN SPEAKER: To try...

ELIZABETH WAETZIG: Now you can.

UNKNOWN SPEAKER: Ours to consult that idea on that side.

ELIZABETH WAETZIG: That's true, I'll let you follow up.

UNKNOWN SPEAKER: Because I do work so hard to and I do believe that I can work hard enough to control here what's available to be controlled. Most specifically in and around my son's life with cystic fibrosis up to a point. But just in general, however, for other people I think I'm much more, generous and kind. And forgiving knowing that in fact, life deals a lot of hard blows. I think that's just the way I cope. But I've also experienced societally is that I think other people think I had control with having the child's special health care needs, because I have felt their – whether it's pity, or a separation like (inaudible). That something must be wrong, it in it's so subtle it's barely accessible but it's there (inaudible).

ELIZABETH WAETZIG: Right, oh gosh, there's so many stories I want to tell right now. Deb did you want to follow up on that?

DEBBIE GOLDEN: Oh, mostly I was just joking, but I think the part of it as Marilyn said that applies to me is, sort of, the idea of having these, sort of,

expectations of myself, that I'm in charge of me to a greater extent than the middle but, yet, I recognize that that's, you know, I don't have that same expectation of other people. And but yet an interesting thing I think too is that, like you say, it's all a matter of how you define fate?

ELIZABETH WAETZIG: That's right.

DEBBIE GOLDEN: And how you define personal control, because one might define; what one might look at this, in terms of, not what happens to you, but how you to respond to what happens to you.

ELIZABETH WAETZIG: Right, that's right.

DEBBIE GOLDEN: And so, you know...

ELIZABETH WAETZIG: That's right.

DEBBIE GOLDEN: There's different perspectives on it.

ELIZABETH WAETZIG: Absolutely, and you are beginning to dig into why this can be such an interesting dynamic when you're talking with other folks. The reason I say that is because not very many people spend their time thinking about how things happen to them. I mean this is not a conversation that I would

guess that many people have either with themselves or with other people. And yet what you have uncovered in this conversation is not only, how you feel and why you feel that way? But that other people feel differently and there's no judgment there. It just is.

And I could, the one story I will tell you is about: I was doing a mediation training, and mediators are very much into self determination. We practice mediation because we don't think people should be telling you what to do. You should be figuring it out for yourself. We'll help you, but you got to figure out what you want to do. And so self determination a.k.a. "personal control" is a high, high value for mediators. Okay, so we're doing mediation and child welfare – child welfare where parents are getting their kids taken away from them, because they haven't been able to care of them adequately. And as stated earlier, there is a tendency sometimes when life hands you a really crappy deck of cards, that it feels like things happen. So imagine being a mediator where you have to guide a conversation and you really believe in personal control, and the people for whom you are helping manage this conversation are not there. Yep.

UNKNOWN SPEAKER: Just an observation that I don't know psychologically is whether I'm this is going on in my head to confirm, filter of mine or whether it is mostly an empirical observation. One thing that struck me in this was that regardless of where you place your "X" on this continuum and as you talk through

and talk out why you did it. What you're finding is more, and more in common denominator with someone who's "X" might be far removed from you.

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: And I hate to say it always comes back to communication, but even...

ELIZABETH WAETZIG: It does.

UNKNOWN SPEAKER: ...this week at work, we had a significant conversation that basically that's the issue of who is accountable on certain new born blood spot conditions and organizationally it was a big deal, because, it sort of meant, well, I got to put some staff resources here. And all of them surrounded the phrase informatory diagnosis. And it really struck me, that you can have a group of professionals, some professionals, some of them where not clinicians, but even the clinicians themselves get into a point of thinking that they disagree more than they really did. But giving them the opportunity of sitting down and talking it through we found more common agreement than not.

ELIZABETH WAETZIG: Right, and I think we were headed in that direction in this conversation.

UNKNOWN SPEAKER: And my apologies if I...

ELIZABETH WAETZIG: Yep, it's okay – there are, people are unfortunately committed elsewhere, so we will trudge on. What we were coming was from what I was hearing from folks was that maybe we were talking about the fact that things happen. Maybe we can't control everything that happens, but maybe we can control our responses to that. And to a varying degree, because there are systems that you're involved with and there are other people in your lives. So even that response piece, you're going to find yourself on this continuum. And guess what, we don't get to change that. We just have to accept it and understand that that's a lens through which people see things and communicate.

So, as health care providers, as family advocates, as public health systems people, I think as leaders, we need to be aware of where we are, where other people might be and what implications does this type of thing have on a conversation. And in fact, there's a whole bunch of these continuums -- check that out, I mean, there's a whole list of things going on there, tradition and change, we talked about our comfort with change, our need for familiarity, hierarchy rank and status versus individual, not versus. And individual equality egalitarian, and you know, what's interesting is sometimes we would like to think of ourselves as somewhere on the continuum and yet our systems or our jobs, or whatever is forcing us into another part of the continuum, depending on the domain that we're in. So what we're finding out here, is that first of all, we don't

just jump on the continuum and stay there, we can change. And two: sometimes we are in one place in one part of our lives and in another place in another part of our lives. And not everybody is going to match.

So there's certain things here that I think are incredibly important when it comes to providing health care for folks. group welfare, individualism, and privacy, does that one affect your worlds? Enormously. Past orientation, future orientation, idealism, practicality, being orientation, versus an action orientation. There's quite a bit going on there isn't it? So this will be in your slides that I sent to you. And one of the things that you can do is take this and say, wait a second, so how do I feel about some of these things? Where do I see myself on these continuums? And what does that mean for me in the way that I lead, in the way that I listen, in the way that I interact, in the way that I move a group. Because some of this can affect pace – the pace at which a group can move. If you're all over the place on that continuum, then the pace might have to be slower. I think this could be one of the most powerful things we talk about today is this values continuum piece.

So we're moving on. All right, so now we are moving from values to individual leadership. How do we think of ourselves as leaders in this work? Then again, some of this stuff you might have already gotten. There a lots of leadership styles, some leaders are directive, actually, there are lots of parenting styles going on here too, right? So, are you directive, and I would say that most leaders are a combination of these things. So for me this is less a list about, who are

you? Are you educational versus motivational? And more about, here are lots of qualities which one do you need and when? When is it important to be directive? When it is to be motivational? When it is important to be participatory, educational, or creative or when do you combine those things? And if you have to think about what's natural for you, where would you place your self? What's a natural leadership place for you? What's the most unnatural and that's the place to really focus your attention. It's like they say when you exercise, you should do the things you like the least the most. Because it means you need to do it the most, right? I hate doing sit ups that's the thing I needed to do the most.

All right, lots of views of leadership and I'm going to go through these quickly, because again, where do you see yourself, and what is it that you might pick up on? Sometimes, and what do other people think? That's the other piece of this that I think is important. If you're leading a group of people where do they think leadership comes from? Because if you have a different idea than they do, you might have to a little bit of work on that relationship, sometimes people think that you're just born with it. That leaders are born and not made, okay, they're naturals. Sometimes people think that you can really study this stuff, you can immerse yourself in the literature. You can really practice and learn all these skills and become a more effective leader. Quite frankly, I think it's probably a combination.

Then there are those leaders who are courageous, wise, some would say obsessive, they can do things the military leaders, they can do things that we can't. They put themselves in the very front of the charge, because they're putting themselves out there as heroes. It's another view of what leaders are, in fact that's an early view of leadership. Use to immediate, if you think back in our history, the people that were the biggest leaders where those that were willing to go into the fight. And that's an early model for us. And this is another, sort of, military idea of leadership. We just, we follow orders, we have a role, we have an authorized role, it's a hierarchical view.

I love the social script view. You'll be asked when it's an appropriate time. You should exceptionally be grateful, not everybody is asked. Social scripts creates an expectations about whose likely to be asked. That's interesting. And then there's – wait did I go forward? Oh yes I did. A position, you have a position, you are director, you were the head of, you are in charge, you have a some responsibility and the responsibility you may feel and others may ascribe to you will affect you leadership.

If people expect to be a problem solver, because you are a leader how far will you go to meet that expectation? Or will you ever resist it to engage others in problem solving. And then there's the calling view. My father, who is an orthopedist, and he's deeply involved in bringing orthopedics overseas, as calling. And nothing else matters. He is called to do this work, he's going to do it

and there's nothing that's going to stop him and it isn't rational and it's very personal. And yet he's very effective, because this is his thing, he feels called. It's a very powerful component of leadership.

So, part of it is what do you think? What do you think gets you to leadership? Are you a born leader, do you want to be a leader, are you asked to be a leader, does society need you to be a leader and you're rising to the occasion? And as important, what do the other people around you think? Do they think because you have a title that you have to exercise leadership, and in a certain way. So, something to think about, what's your style? What's your view? What do you think about, how do leaders come into leadership from your perspective, that any of these particularly resonate with you from your field.

UNKNOWN SPEAKER: All right, I'm was just going to say that from a (inaudible) in a position where I'm a PTI, I've always felt that though I'm in a servant leadership position. I'm not sure I am a good leader but I'm back to that social thing ...

ELIZABETH WAETZIG: Social Script.

UNKNOWN SPEAKER: If you'll take that back a minute. I want to build leaders and so I'm always looking at that social script of, okay, that's your time that you, I

am going to ask early, ask many, ask often. Because if you don't get called and you fit in this. You're ready to do it, but nobody ever asks you...

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: You don't ever have a chance to come forward. Like, I'm going to ask as many people as I can, because we need more family leaders ...

ELIZABETH WAETZIG: Yep.

UNKNOWN SPEAKER: And so that's where I am in promoting leadership.

ELIZABETH WAETZIG: And you are a leader in doing that, because leaders build other leaders, that's what they do. You know, if you're a leader you don't build other leaders, then when you're gone there's nobody to come behind you what do you lead?

UNKNOWN SPEAKER: I wonder, I wonder when I was 28, how long am I going to do this?...

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: You don't know, but I just got to be there were parent leaders ahead of me that lead us to where we needed for my daughter. I know I got to pass that forward.

ELIZABETH WAETZIG: You know, it's interesting that you say that, because I'm just reading a book right now called The Leadership Legacy by Kouzes and Posner. I don't know if you're familiar with those two authors, but they wrote a whole leadership assessment called the Leadership Practices Inventory. They tried to define leadership they tried to think about, what is it that we're working for when we're leaders? And the common thread that they could pull out was that idea of legacy; that people lead to leave a legacy. And I found that very interesting and on the surface it sounds somewhat selfish. But then when you get into the way that affects your leadership, it's actually not, because the legacy your leaving is not just about you. It's about all the people and the systems change and the programs and the services it's everything you leave behind, it's really interesting concept.

UNKNOWN SPEAKER: Put me in place of a number of levels earlier on in my profession career in social services was to get to the title of becoming a director, you want to have a child with a disability...

ELIZABETH WAETZIG: Yeah.

UNKNOWN SPEAKER: And although I had a lot of schooling I didn't know what it was like.

ELIZABETH WAETZIG: Yeah, sure.

UNKNOWN SPEAKER: So then I was the hero, – I was a hero that you had that experience, so now you go lead because you have that experience and then my son died. So then that whole hero experience, I've now tried to pass on to others. Because although, I had that experience, I don't have that day to day experience. (inaudible) last year I received a leadership award at AMCHP. And part of it is leaving that legacy and developing that structure should create more leaders but it really touches me.

ELIZABETH WAETZIG: Well, and it's all of these profound perspectives that come together to create almost a collective legacy and that's really what moves things. I mean, anyone of us by ourselves, we are not going to leave that much of a legacy, but the collective experience and what generates from that is enormous. So, think about it what is calling you?

All right so let's talk about interacting with other people. We are at if my watch is right 2:30, so anybody who had to leave at 2:30 you're late. Can we keep going video person? Okay, thank you. All right. Lets talk a little bit about interacting with others as I said earlier in the day, leadership is not a solitary act. And I think,

again, it's one of those cultural misconceptions that you get to a place to be a leader, and you can do everything. You can solve the problems, you can make the change, and everybody is going to be so happy that you're there exercising leadership. Does it ever turn out that way? No, absolutely does not turn out that way.

UNKNOWN SPEAKER: I was going to say when I was a director I had an open door policy, it was time to solve other issues.

ELIZABETH WAETZIG: Yeah – did anybody come in? No. It's sort of like that, come talk to me I'll help you resolve conflict. We don't have any conflict -- Yeah right.

UNKNOWN SPEAKER: And yet what I see at the parent center is that we are on the phone talking with families, helping family with issues, whatever. Something happens to our kid, you think I'm prepared to do what I need to do for my own child? No, I go to my coworkers. "Okay, what do I do now?"

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: Because then I need that coaching from them. So, that's a really unique relationship in a group environment to have, because I don't have to rely on my own advice for myself.

ELIZABETH WAETZIG: Yeah. Isn't that great? No we don't live in isolation, We don't lead in isolation, we don't follow in isolation. We are an interdependent world. If there's one truth it's that we are interdependent as a human race. I don't know of anybody who's completely self sustaining anymore, right? You have to really be living on an island by yourself.

So, let's talk a little bit about interacting with others. I want to talk a little bit about, who those people are first. We say others but there is a different categories of others. There are people that are our confidants, and I would submit to you that if you are especially if you are an authorized leader, you need a confidant.

Because there aren't a lot people within the organization that you can have those really hard conversations with, in fact, that's why a lot of executives are turning to coaching now. Because they need somebody outside the organization to talk to you, because if they talk to somebody inside the organization, they run the risk of leaks; they run the risk of, well, how come he's in his office all the time? And that engenders some difficult feelings. It's important to have a confidant and oftentimes as a leader, especially again, as an authorized leader, finding that confidant outside of the organization can be important. Allies, how much work is done around the water cooler, or the coffee pot, or the copier, or where ever it is that we stand waiting for things to happen. How much work is done on email? Does anybody Facebook? We'll talk about that in a little while. My boss found me on Facebook, I'm like really, do you really want to be my Facebook friend, I really

don't. And then the Federal funder at Georgetown found me on Facebook. Oh I'm done with this, it's terrible. Allies though, are important within the organization and allies are also important externally too. If you are in public health, again as we said before, is intrinsically multidisciplinary. So, finding those partners in other systems; finding those partners within your systems; finding those partners in different domains, family advocacy organizations, providers, agencies, finding partners within those domains is incredibly important. Finding relationships with subordinates and superiors. So, here are the categories I've named so far, and you can help me, sort of, figure out if there are others: confidants, allies, partners both externally and internally, subordinates and superiors. What other relationships are there?

UNKNOWN SPEAKER: Peers.

ELIZABETH WAETZIG: Peers, yeah thank you. It makes it worth it going to work, doesn't it? Heavy sized, somebody side.

UNKNOWN SPEAKER: Yeah, because I thought there's another relationship based on the family structure, because sometimes I'm calling the families who called me. "Saying hey, you ran into this situation..."

ELIZABETH WAETZIG: Yeah.

UNKNOWN SPEAKER: "...we talked about how did that turn out, because I need to know how that worked for you, because now I got to bring this or I need it for somebody else."

ELIZABETH WAETZIG: So there's a coach mentor thing.

UNKNOWN SPEAKER: Yeah.

ELIZABETH WAETZIG: Yeah.

UNKNOWN SPEAKER: And go back where -- and I think that's another piece of leadership with families, because the person who felt the most needy when they made the call to the parents center, then becomes the leader in the next piece of that, in holding valuable information that either comes back to us or it comes to back to us to be shared in another direction. And helps, actually helps that person who felt the most needy to (inaudible).

ELIZABETH WAETZIG: Right, isn't that wonderful?

UNKNOWN SPEAKER: And you know I am worth something.

ELIZABETH WAETZIG: Yeah.

UNKNOWN SPEAKER: Because, I can now share this experience with someone else. They've called me for information about. And so I think that when you can work together that way, that's a good relationship to have.

ELIZABETH WAETZIG: And it sounds like a lot of these relationships for you are somewhat natural, they happen, you hope they happen, you work towards them happening. How much deliberate thought do you think you pay to the relationships that you build, both to creating them and to sustaining them? I need to have a relationship with? Anybody? Do you think about the people that you need to have a relationship with, and do you go out purposely create and sustain that? Or do they just happen, because you are in the lunch room together sharing stories?

UNKNOWN SPEAKER: Oh, I just, you know, I think I don't think about it as much as I should, but, you know, it's sort of a casual, kind of thought and then I'll think, okay I need to contact so and so. And in my mind, I may know, it needs to be more than a contact. So I don't really, it's not as intentional as, there's a person that I have overlapping interest with and, you know, we could do some good work together or whatever. And so I don't really think of it as pursuing a relationship.

ELIZABETH WAETZIG: Yeah, that's why we call them strategic alliances.

UNKNOWN SPEAKER: When I feel like I need to do more intentionally.

ELIZABETH WAETZIG: Yeah, well, and I can tell you – sorry let me go to these two comments first.

UNKNOWN SPEAKER: As you were talking about this kind of things, and not can mean any (inaudible) with. And I think it's that element of where I need to think in a utilitarian way about people and that's and not comfortable for me in a personal value. So I have to raise it to being a strategic value. So that I don't have to be (inaudible) just to close to that...

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: But I think it's very important and I know that in terms of my programs, some of the people I like the least are the people I need (inaudible).

ELIZABETH WAETZIG: Yep. Yep and that's hard.

UNKNOWN SPEAKER: It is very hard for me.

ELIZABETH WAETZIG: Yep. I'm guessing most of us are somewhat social people in this room. And so those relationships peer mentor, or of mentor / mentee relationships, things like that. Those social relationships come fairly

naturally to us, the support relationships. It's the strategic relationships that are difficult. You were going to say something?

UNKNOWN SPEAKER: My experience is similar in that I don't think I give conscious thought to cultivating a relationship, but clearly there's some instinct there, but what I don't know is whether it is effective or not. You know, you're, kind of, presume you are doing the best you can...

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: And maybe something positive is coming from that...

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: in the direction you want, but it's hard to know.

ELIZABETH WAETZIG: And well.

UNKNOWN SPEAKER: And it's not the kind of thing that you can say, "how was it when I ...?"

ELIZABETH WAETZIG: Yeah.

UNKNOWN SPEAKER: ... we met exactly for you? Did you feel valued, did you feel part of the solution, is my leadership...

ELIZABETH WAETZIG: Oh, some people, you know, I have to pleasure to work with, a couple of people around which, we talked about strategic alliances, sort of, deliberately. Al Zatstirck from Children's Mental Health Director for the State of Maryland is one of them. He is an amazing strategic thinker, when it comes to relationships. He's like, we early child's have mental health system of care. I'm not doing this alone. All right. Who can I employ here? Oh, Special Ed director. So he goes to the office, it goes to education and says to his friend Caroline Bagoline, "you know, we really need to do this, I'm wondering if we could." – anyway get the point. What he thinks about first is, "what is it that I want to accomplish? Who do I have to make sure is in the room to make sure it moves forward?"

And when we do these, at Georgetown we do these peer meetings with Children's Mental Health Directors, and the thing that they struggle with the most is not for lack of desire to have strategic alliances, it's the lack of time. To think about getting outside of your office, where you're managing the crisis of the day, to reach out to somebody that you don't normally see, because your not normally working on 10 different projects with them. So that you can create an alliance that will ultimately get you to those creative, visionary, more efficient ways of doing things, is something that has to be deliberate. It doesn't come naturally,

because they don't find themselves at the same place, at the same time all the time. So, I think your point is a really good one, about thinking not so much in your comfort zone about your relationships, because quite frankly, that's easy. It's thinking strategically about and how that sometimes feels a little manipulative, or a little utilitarian. And yet, do we really know the quality of the relationship and what it could be, what if we took that risk, what would happen? So, I guess I would challenge you to think about, can first of all, let's consider the work that has to be done and consider that environment, is it complex, is it a complex challenge, is it a complex environment, are there lots of people and I think a lot about the family organizations and the providers and the agencies all with related but different agendas, what are those relationships looking like? In that relationship from what I understand from some really wonderful family leaders has evolved, from one of adversary, I'm advocating because you won't give me what I want, and I'm going to force you to pay attention to me and think about how to do things. From adversary to – will you need me to advocate before the legislature so maybe you'll seed my organization, maybe you'll give me a little bit of money. But wait a second that means I have to advocate for what you want, right? To now, what I'm hearing from family organizations is we want to be independent, we want to be in partnership with you, but we don't want to be dictated to. So were becoming more formal, and we need to be partners. So those relationships evolve and they need to be nurtured, they need to be strategic, they need to be nurtured and we need to think about the work that has to be done and how do we as leaders make that happen. Because quite frankly,

turfism isn't going to help us anymore, and it's just going to get in the way. It's too important that we be creative and we think about resources together, as opposed to separately.

So, who needs to drive this, and how do we get in their office and have lunch with them? That's where most fun parts for me starting and running a business, is that I get to think about all those people that I can go have coffee with.

Because I'm networking and I have met some really amazing, interesting people I never would have met. So, I'm just challenging you to think beyond your comfort zone, with this idea.

So, we talked about consider the environment, if it's complex then the relationship piece is going to be key. You absolutely have to nurture those relationships. So, what we did is we had the Children Mental Health Directors think about their environment and they drew the complexity of their environment. They drew where the organizations and all the – well the organizations first, and they drew the challenge, you know, it might be a budgetary challenge or whatever. And then we had them write in all the people that were important and then ask them to assess the quality of those relationships. And they just look back and thought, "oh my gosh, I've got some work to do; I've got some reaching out to do; I've got some nurturing to do." So, what relationships are working and what relationships are not working and what do you need to move forward?

All right, so, building alliances, what are some of the things that are important there? Well, we've already talked about, being intentional. We've already talked about the fact that you can't just go out to lunch and consider yourself having a relationship. How are you going to nurture those relationships? And what are you going to talk about, is it really all going to be about the project? Are they want to trust you to talk about a joint project if they don't know you? We're going back to the beginning of our session. How are you going to be a human being in that relationship? And not the director of or the advocate for, or the person working on, your going to have to learn how to deal with conflict. We'll talk about that in a little bit.

The other thing that I have found is that the earlier you can convene your partners, your stakeholders, the people that you want to enroll in the project, the better off you are, because it doesn't matter how good this idea is, if it's already formed they will find some reason to hate it. And I'm saying that, sort of, strongly but people don't want to be told what's a good idea, they want to help create a good idea. So, it works very well to come and say, I've just been wondering about some things and here is what I'm seeing from my vantage point. I'm wondering if your seeing any of the same stuff? And you know, here is some ideas that have sort of been floating around in my brain. What do you think about that? What ideas do you have? It's a process, convene them early. Yep.

UNKNOWN SPEAKER: Well, I wanted to ask you a question about that – actually I don't know if it's kind of off the subject.

ELIZABETH WAETZIG: Oh, go ahead.

UNKNOWN SPEAKER: Okay, we talked this morning about the idea of, sort of, articulating a vision, projecting a vision, and that sort of thing. And for me in my own work, I have some conflict with where I project the vision and where I ask other people for their ideas. And so what I heard you saying was kind of, go in and, sort of, what are the ideas. But what if you have a vision that you want people to rally around and you don't want to have everything all figured out, because you want people to have a part in it; they need to be a part in it, but I just wonder if you can comment on that?

ELIZABETH WAETZIG: Absolutely I can. Are you familiar with Fisher and Ury's work Getting to Yes? Okay.

UNKNOWN SPEAKER: Oh...

ELIZABETH WAETZIG: Heard of it?

UNKNOWN SPEAKER: A little bit.

ELIZABETH WAETZIG: All right, so people typically, and first of all the word I want to say is balance. There's a balance here a strategic balance in, what do I envision is important? How do I enroll other folks in moving forward? And there's a tightrope that you're going to have to walk here, but here's a way to think about it. Are you familiar with the terms "Positions and Interests?" Okay, so, when I come to the table and I'm negotiating it's very tempting for me to have my outcome already determined, I know what I want, and my job, in a positional negotiation, is to persuade you to think the way I think. I have a few skills, and one of them is I can talk. You know, lawyers can talk, we can't operate, we can't cure people, but we can talk. And it's really very tempting sometimes to go and articulate, what I think, because I can do so with enthusiasm and passion, but is that really the way that's going to enroll people in what's important? So, there's a way of thinking about this, if positions are, "What is, what do I want?" Interests are why is that important to me? So consider this as a way of dialogue.

AMCHP 2009 ANNUAL CONFERENCE

Leadership Skills for Systems Development and Transformation

February 20 - 27, 2009

ELIZABETH WAETZIG: Missions are what we want. Interests are why we want them. So, why is that important to me? Why is that school important to me? Well, you know, she's having trouble reading and I want her to read on grade level. And I want her to be in a small classroom so she can get the attention that she needs. And guess what? The most important thing to me is that she likes to read. She feels successful and she likes to read. I've done my homework, okay. Well, you know what? We're interested in your daughter reading too. And we want her to read on grade level. We got a lot of resources going on right here. And you know what? We, kind of, actually you can't pay for every kid to go to an individual school. But we have created a reading specialty program that we're really excited about. And, we think, would really meet her interest. We want her to read, we want her to feel successful. And we want to take advantage of the programs that we can provide here without bussing kids out of their community, okay? All of a sudden, the conversations changed.

So, what did interest get us? Interest get us more than one solution, okay? It's not just his or ours or who thinks that compromise is a good idea. I hate that word, because compromise is positional. Compromise means I have already decided what I want. You have decided what you want. I'm going to give up something of what I want. You have to give up something of you what you want. And we both get a little of something we

want. I'm not starting there. I might end there, but I didn't come to give something up, right? Okay, so again, where is the level of conversation that you're having? And this is my vision. This is going to be our vision. So, if you can think about what your vision is, why is that important to you? Okay, because you can have this conversation about vision and you should, if you want to engage other people.

Here's another example. So, my teenage daughter comes home from the mall and she says to me, mom I'm getting my tongue pierced. And my reaction is, oh I don't think so. And she says immediately, you never let me do anything I want. I hate this family. You're so controlling. I don't want to be here anymore. Those are some strong words. And I really don't need to hear them anymore. So off you go. And she goes to her room and slams her door. So, would you say that that's positional conversation or interest based conversation? It's totally positional. I mean, the things that could happen are, I get my way, you get your way or actually there really is no compromise. There's no compromise and it's my house, right? Okay, so but what have I done what are the consequences of that conversation?

UNKNOWN SPEAKER: (inaudible)

ELIZABETH WAETZIG: Yeah, when does she – could she, like, crawl out the window and go down to the mall and do it anyway? Probably, and will she come to me the next time? I mean, what if it's something bigger than – I mean there are bigger things, right? What if it's a tattoo? Is she gonna come to me based on that conversation? Oh no. No

she is not coming to me based on that conversation. We have a relationship that is not based on respect. It's not based on anything other than power. And both of us think we have it, right? And I'm not sure who's gonna win there. All right so, let's think about interests here. What am I – if I'm the mother what are my interests?

UNKNOWN SPEAKER: Safety (inaudible)

ELIZABETH WAETZIG: Safety, my daughter's health. What else? You ever heard the term slippery slope? It's a slippery slope straight to hell that's what my dad said to me.

UNKNOWN SPEAKER: What other people think of you.

ELIZABETH WAETZIG: Yeah. Oh, I'm so glad you said that. I'm going to walk down the street with this kid. Everybody knows she's my daughter. What are they going to think me? You let her do that? What kind of mother are you? That's hard, right? It's really hard. All right so, those are some of my interest. What are the teenagers' interests?

UNKNOWN SPEAKER: Rebellion.

ELIZABETH WAETZIG: Well yeah, I want to fit in, rebellion.

UNKNOWN SPEAKER: Like my friend.

ELIZABETH WAETZIG: Yeah, I'm not like you mom.

UNKNOWN SPEAKER: It's part of her culture.

ELIZABETH WAETZIG: Right it is. It's part of her culture. It's part of what her friends are doing, she wants to fit in. It's important to her, but did any of that come out in that conversation?

UNKNOWN SPEAKER: You tell her they use needles in your mouth.

ELIZABETH WAETZIG: Yeah, well okay it's not so appealing to me, but I'm not so sure how she's thought about that.

UNKNOWN SPEAKER: What is (inaudible)?

ELIZABETH WAETZIG: She might have, maybe she did have an interest in using me as an excuse.

UNKNOWN SPEAKER: What (inaudible).

UNKNOWN SPEAKER: Yeah.

ELIZABETH WAETZIG: Right, maybe.

UNKNOWN SPEAKER: She never let's me do anything.

ELIZABETH WAETZIG: Yeah. Do you know what my friends think of you? That's what I heard recently. My friends all think you're mean. Yeah I don't care. All right so...

UNKNOWN SPEAKER: You know what I told me daughter when she said that?

ELIZABETH WAETZIG: What?

UNKNOWN SPEAKER: Thank you. Best compliment I have had in a long time, I work so hard to get that.

ELIZABETH WAETZIG: I'm gonna use that, that's good.

UNKNOWN SPEAKER: It totally blew her way she (inaudible).

ELIZABETH WAETZIG: Yeah, that's good. That's good. Well, let's think about this on a different level, this conversation on a different level. I can't tell you how many times I've played this out with people, it's so fun. So, the teenager comes up and says, all right mom I was at the mall with my friends and we're – I'm going to get my tongue pierced. Sounds like, you know, you guys made up your minds. Just tell me how you got there. Tell me about that. Tell me why that feels important to you? Well, you know, we were

looking for something to do that would, you know, that we could all do as a group together. And, it kind of, sets us apart from the other groups. And, I don't know, we didn't want to get tattoos and those chains are really expensive. So, we just thought you know it's kind of edgy we were kind of excited about it. All right, so here's what I'm getting from you. You're excited about it. You're gonna do it as a group. The whole group wants to do it. It seems to be the thing that you want to do as a group. And so, you're going to – you want to go forward with this, okay. Well anything else? No. All right, so if I understand where you're coming from, let me help you understand what's going on in my head right now. Of course, you know, you'll get the obligatory eye roll. And then, I get to say, you know okay, so you're growing up. I know you want to make decision, I mean, I'm guessing you want to make some decisions on your own. And I have to tell you as the person who has raised you since you were born it's a little scary for me, because I've had a lot of control up until this, you know, 'til recently. And giving away that control is hard. And, you know, I think about all the decisions you could be making and you know – those that affect your health and your safety, it's a little scary for me. You know I was arguing with my parents about getting my ears pierced and that seems pretty innocent now. And now I'm thinking about putting a needle in your tongue in it's freaking me out a little bit. All right, because It could get infected. What would that be like? And then, I think about the fact that we're going to your grandparents next week and guess what they're not looking at you, they're looking at me. And they're gonna think that I'm not doing a good job with you. And I have to tell you that's a little hard. So, those are the things that I'm wrestling with. And I hear that this is important to you. And what I'd like to do is have a conversation about the real thing of safety. So, I want to

understand that a little bit more. And I'm wondering if you and I can investigate that together, so we can figure out how to move forward. Is that a different conversation? It's totally a different conversation. And I am using this style. I believe in this style. I believe this is how I should parent. This is how I do parent most of the time, about 80 percent of the time. Sometimes I screw up, but I will say that, first of all I don't know how it's going to end up.

And the reason I don't know is because you have to look back to your interest to evaluate your options. This is critical and when you do a position based vision, my vision versus your vision, my way of solving a problem versus your way of solving a problem. When you do that along positional lines, you have no criteria for evaluating the outcome other than did I get what I want versus if you align up all of these interests, than you have criteria. Is it safe? Is it cool? Do you feel like you're part of the group? Do I – can I avoid being yelled at by your grandmother? I mean those are evaluation criteria for making a decision together. That can avoid compromise. Here's the rub though, if the answer is no then the answer is no. If you're trying this on so that you can still get no but in a nicer, gentler way, that's not very sincere. And they will catch you because they're smart, okay?

So, if the answer is no be honest. You know what, until you're 18 these are decisions I get to make. I'm sorry you're gonna be really angry with me, but I can't let you do it. And this – and maybe you can use all those others, it's about your health and safety and I don't want to be yelled at justification for that, but the answer is no. If there is room for

negotiation and in vision conversations and in problem solving conversations, there should be room for negotiation. And even if you think you know the problem and know the solution, you may be missing stuff.

So, the trick is how do I hold on to what I've been thinking about and hear all the other stuff that's going on here so that we can create a mutually satisfactory or shared vision. So, that we have buy in from everybody. So, everybody feels heard. And so, we've really come to the most creative, most effective solution that we can using all those voices. So, I went off the grid here. This was not something I was planning on doing, but it felt applicable. So, it's not gonna be in the PowerPoint. I hate PowerPoint.

So, my suggestion to you is that this is interesting to you. You can get Getting to Yes. It's a great book. It does not deal as much with the human parts of interest as I would like. So, I'll just complete this conversation by saying interests come in many different packages. There are interests that are substantive and we learned about those. To get your tongue pierced or not to get your tongue pierced is a substantive interest. There are interests that are procedural. I want to feel like the process is fair. If I feel – and you've heard this before. I felt heard. I felt like they understood what I was saying. The solution wasn't exactly what I had hoped for, but it was fair. So, there are procedural interests. There are psychological interests. I want to feel valued. I want to feel respected. I want to feel like I'm a part of things. I want to feel like I'm growing up like I can make decisions. I want to feel respected for my intelligence. I mean, you could see all of those underlying. Those aren't necessarily the things you talk about in shared vision, but they

are underlying that negotiation. They are underlying that dialogue. Every person in that room wants to feel like they have something to contribute. Families, providers, agencies they all have something to contribute. I think one of the things that's been hard about the family provider dynamic is finding that balance of contribution. I know my child best. I know – I worked really hard and I have something to contribute here. I have a discipline. I have skills and where is the partnership going to be, okay? So, is this helpful?

UNKNOWN SPEAKER: Mm-hmm.

ELIZABETH WAETZIGL: I love this stuff. This is the core of what I do in mediation. So when you are a leader and you are mediating. When you are helping people find common ground it's – go to their interests. If you can't think of any other question to ask, tell me why that's important to you? That's a great question, okay? So, there's a little skill building for us. All right, where are we? How are you guys doing? We're at 3:00, we have another hour. Do you need a break? Do you want to just keep charging through? What do you think?

UNKNOWN SPEAKER: A break would be nice.

ELIZABETH WAETZIG: A break would be nice? Can we hold it to 5 or 10 minutes, because there's a lot to plough through. Yeah, if you want to hold it to 5 or 10 minutes we can do that, we'll take a break.

All right, so I think somebody said, John actually said it back there when he was talking about the risk of – I don't even remember the word he used. It all comes down to communication, so that building – that was such a natural break. That worked out well doesn't it? In order to get here some people will ask me, well how do I have the conversation if I'm the only one who wants to talk about interests. How do I get other people to buy in? And, I mean, truly because you don't really want to go to interests if nobody else is going too. Well, then who's gonna start? Leaders, right? How do I get there? How do I have these conversations? Well, it's – it is about communication. How many people think they're good communicators? Yeah, good. I found that – and many of you probably are because you've been in this field. I mean providers, advocates, people who do this human services were tend to be pretty good at communication because this is just the part of the work that they do.

And yet I would ask you to think about are there domains in your life that you're better communicators, because you know you have to be and then domains where you're not because you don't think about it. And the reason I bring that up is because I talk to a lot of nurses who are really wonderful with patients. I mean they can take a history, they can listen. They can be sympathetic. And they really do engender trust in patients. A lot of nurses are very, very skilled with patients. And you ask them if they use those same skills with physicians, not even close. All of those wonderful listening skills that they use with patients go right at the window when they're talking to a physician or even each other in a peer relationship or in a superior subordinate nursing relationship.

So, you've got a great start because you got some good communication skills in some domains already. So, then the trick is how do you apply them across the board. And leaders really, I would say, it's hard to think about being a leader and listening, because leaders think they have to motivate, and inspire, and lead, and solve, and you know do all these talking things. So, we're gonna talk a little bit first about characteristics that impact communication. First of all there's the environment. Is the environment set up for communication? Does it honor communication? Does it – do you have time when it's down further, but communication takes time doesn't it? Anybody feel like they have any spare time in their day? Anybody feel like they're doing an 80 hour job in a 40 hour week. Yeah, okay. We have differences and we have different experiences, absolutely. We're going to talk about culture in a little while. And that creates different mental models and assumptions for us. But even our similarities and our similar experiences cause us to create assumptions that may not be true. But that's how we organize. And from those – from organizing that information that's where our communications comes from. And then there are those nonverbal communication patterns. Am I cold or am I hostile, the whole eye contact thing. The two things that I really want to hit on though, because these things are probably not new to you. Our language and it's not up there but technology. Let's talk first about language. And I think family – centered care came up earlier and because it is a term of art. It's term of art right now, isn't it? Family – centered care and we referenced this before. It's hard to figure out if you got 20 people in the room where they have the same definition of family – centered care. And maybe

they would have the same definition, but do they have the same idea of how that plays out, what that means for their organization, for their system.

So, figuring out what that language means is incredibly important. I just co – wrote with some of my Georgetown colleagues a monograph on a public health approach to mental health. And we have a whole chapter on language, because we realized that when you say mental health, who knows what that means, right? And for some people, it means illness. And for some people it means health. And what does that mean? Does it mean social and emotional wellness? Does it mean balance? Does it mean the ability to experience stress and regain balance? We have struggled and we realized that because we couldn't even create a definition around the outcome. We couldn't pull a common definition around the outcome of what we were writing this for, that we needed to talk about language in a whole chapter.

So, we talk about language as it relates to the outcomes of community mental health, positive mental health, mental health and then we go from there. Bu – and it's amazing the feedback we've gotten on that language section. Public health, again, intrinsically multidisciplinary. What language are you using either in your domain, in your social group or professional group or your agency or system that may not translate? And it's almost more dangerous when you think it does translate, because it might not be translating. So, how do you have that conversation especially at the beginning and I think we were talking about a new – something you're working on around – was it public health? No obesity, I mean that first – those first meetings if you can come to some

consensus around terms. It not only helps you communicate as you move forward, but it helps ground you in what is it you're doing. And hopefully it avoids misunderstandings and misperceptions and conflict down the road. So, language I think is something that absolutely has to be and I'm talking about the terms you use and the definition for those terms. Yeah?

UNKNOWN SPEAKER: Jay Leno said something funny the other day. He said here's the truth, the whole truth and nothing but the truth and those are not the same thing.

ELIZABETH WAETZIG: It's true. Oh my god that's great. I'm gonna have to remember that. Do I have to attribute to him?

UNKNOWN SPEAKER: I don't know he said it but...

ELIZABETH WAETZIG: Yeah, no that's good.

UNKNOWN SPEAKER: And I think that would be quoting him exactly. I think (inaudible) but that was the sentiment.

ELIZABETH WAETZIG: Well and I think – actually you can carry the sentiment even farther, because the whole truth for you is not the whole truth for you. And truth is a pretty relative concept out there when it comes to systems. The other thing I want to just

talk about for a moment. I kind of made a little joke about Facebook, but boy is our – our communication is changing, isn't it? How many people text?

UNKNOWN SPEAKER: (inaudible)

ELIZABETH WAETZIG: How many people use e-mails as their primary mode of communication? It's faster and you don't have to, you know, go back and forth. How many people have had this situation where they e-mailed something that was taken the wrong way or taken the way in – not in which it was intended.

UNKNOWN SPEAKER: (inaudible)

ELIZABETH WAETZIG: Yeah. I mean I think being deliberate about communication means being deliberate about the mode in which you send it. I mean it's a one dimensional form of communication. You get no inflection, you get no tone, you get no body language. It's very one dimensional, you get words. So, one of the things that I have come up with is that I – first of all if I'm communicating with somebody with which there are some conflict or difficulty in that relationship, I wait 24 hours before I send something out. I just – I don't respond immediately. Second is if I'm writing an e-mail that – it has a pivotal role in the nature of the relationship or I don't know the person very well. I read it back to myself out loud before I send it. Not in my head, out loud. And I have to think now if I was them and from their perspective and I read this, what would I think? Would I know all of these words and what they mean? Would I have the same – I

mean the same interpretation of the words, of the language. Am I conveying the message that I mean to convey. Again it's time consuming, but I can't tell you how many people have shot off that e-mail or shot off that text. I mean I text my daughter to come down to dinner, that's how endemic it is in the teenage culture, right? Or I'll video chat with her, you know because that's what they're doing. They're having video slumber parties, did you know this? You know they can video chat with these computers and get four kids up there all at the same time and they can see each other. And they're – like it's midnight and they're having these, like dorm room type conversations. She's 11, but that's what they do. That's what their social norm is now. And so, helping her understand about communication is a whole different ball game. Erin put down the screen I'm talking to you. Erin, I don't want you looking at the computer you need to talk to me. I need to see your eyes so I know that you're comprehending something. Yeah it's – but and we will continue to evolve. What we haven't done is created the norms and the standards around our technologically based communication. So, that's a piece of what we have to do.

All right so communicating, I love this slide. And I wish I could give you an attribution, but it was given to me like this, so I'm passing it along. How do we listen to each other? In an eight hour work day, you spend four hours listening. And actually that's probably overestimating. I mean, if you were listening 50 percent you're doing a pretty good job. Okay, most people are listening about 30 percent. All right, but in a four hours listening you only hear about two hours of that. The rest of it is just in one ear and out the other. You actually listen to an hours worth of that. So, you may hear but you – it doesn't sink

in. Of what you hear, you understand 30 minutes. You believe about 15 minutes of that. You remember eight. Eight minutes of an eight hour day is what we remember, shocking isn't it? And you know it's – I don't know how database this is, so take it as a metaphor, you know, and think about the way that you listen in your own life, okay? In an eight hour workday what is the percentage of time that you're talking versus the percentage of time that you're listening, is it 50 – 50, is it 30 – 70 okay. And of that are you doing other stuff? Are you thinking about what you're having for dinner? I mean what is going on in your head while you're listening, okay? Are you thinking about what you're gonna say next, because if you are you're not listening. You're thinking about how to respond. That believe thing too, I love that because I can't tell you how many times I've been in a dialogue with somebody and they just – and I'll something else, well that's not true. What do you mean? Based on what? You know, so we choose what we believe, right? What to believe and what not to. It's pretty powerful. And we're probably not gonna remember what we don't believe.

All right, so how many people have seen these skills about 40,000 times restating, reflecting, open ended questions, reframing and summarizing. How many people restate? How many people were taught to restate? Yeah most people are taught how to do it?

Mediators, when you're mediating, when you're being a leader using mediation like skills, this is huge. Huge, the most important thing that you can do in helping people listen to each other is actually just tell them back what you heard. Why are you doing

that? Well, you're creating some trust, right? You want to get it, right? If you're really listening you have an interest and understanding what they're saying. So, you want to get it completely. You want to get it accurately. You want to understand. And that desire, that curiosity goes a long way in developing relationships too. Desire to understand and the best way to indicate that is to restate, you don't have to do it verbatim. I know sometimes people are uncomfortable with this skill, because they feel like they're being patronizing. There's a way to do this and you can practice it with your spouse, your partner, your friend, your child, whatever. There's a way to do this that is sincere and effective. And it's a great meeting starter too. For those of you who are facilitating meetings and you're engaging lots of people. I typically try to restate things that people say as I'm writing them on a flip chart, because they want to see what they said, right? And it helps you to remember so that I can put it all together. So, when you're facilitating as a leader. When you're mediating as a leader or when you're interacting with someone that you're building a relationship with, restating is a very, very powerful tool.

The reflecting piece, it's helpful when there's high drama, high emotion. It's probably not as effective in a group, as a facilitator because it can come off as a little patronizing, but in an interaction in a relationship, building scenario reflecting does make a lot of sense especially when someone is upset, frustrated, angry, hurt, excited. Even acknowledging the positive feelings is a wonderful thing. You're really passionate about this. What's behind that, what's going on? Acknowledging, why is it that we shy away from all those emotions that make us human, that draw us into conflict, that draw us together, because

they're a little scary. But it's worth doing if it's getting in the way of the substance, it's worth doing. It's worth acknowledging it.

Okay, so tell me the last time you asked a question in a conversation. You're interacting with one other person, when is the last time after they said what they wanted to say that you asked a question about that?

UNKNOWN SPEAKER: (inaudible)

ELIZABETH WAETZIG: Good.

UNKNOWN SPEAKER: I use that a lot and I teach parents to do that.

ELIZABETH WAETZIG: Good.

UNKNOWN SPEAKER: Because ask those open ended questions you get more information and find out what – and I find it interesting, because it links with the position, position intimacy...

ELIZABETH WAETZIG: Yep.

UNKNOWN SPEAKER: – the things so well that when families are really upset around something that they will ask open ended questions, they find out more information on what's going on.

ELIZABETH WAETZIG: That's right.

UNKNOWN SPEAKER: And begin, you know, everybody on the team hears it out loud and then it comes something of value in the meeting.

ELIZABETH WAETZIG: That's huge.

UNKNOWN SPEAKER: And a lot of families come back and say, wow I really worked on doing that, it completely changed the (inaudible).

ELIZABETH WAETZIG: Yeah I think that asking questions thing is – especially the open ended kind to clarify, to augment, to, again, indicate interest. I mean I don't – I can't tell you how many times in an interaction – I'll state what's going on in my perspective and immediately the other person starts stating their perspective. And I feel like everything I said had no meaning. Are you curious? Do you want to know more? And this is especially true with language. I mean, somebody it may be completely innocuous and not based on emotion or conflict. But, you know, they'll make a statement about what they desire, what their vision is. And there's a term in there that, you know, may have a variety of meanings. Questions are a great way to get at that. So, when you say we

need to be family centered. Tell me what that looks like for you? I mean what a great question that is, right? How does that work? Those are the kinds of questions that really get you underneath positions. That really gets you beyond the rhetoric and the persuasion. And get you down to really what's going on for people. I don't find that we ask enough questions in conversation. We ask questions typically when there is a differential in power, then that's when we're better at it. But when we're sort of on the same level and we're trying to do some – maybe some programmatic things together or I mean typically when the level is pretty equal, questions are harder because we want to muscle our way in there. We want to get our stuff heard. We want our vision to prevail. That's when questions become more important. Because if you can sit back and hold that inside for a little while and really let the others expand on what system change they feel is important. You'll learn some things about how to frame what's going on in your head, okay.

Reframing is a tough skill, mediators practice this for years especially when you're talking about conflict but reframing even in a facilitative role is tough. So, when somebody comes out, somebody you're in an interaction and somebody says something along the lines of, you know I have called you over, and over, and over to discuss this child, to discuss this – what's going on with this child. You just don't get it. You're not getting what I think is the issue. I'm really frustrated. What do you do with that? How do you keep that conversation going?

UNKNOWN SPEAKER: I think what to do is ask. Okay so what is it that I don't get?

ELIZABETH WAETZIG: Oh god, don't even get me started, there are so many things that I mean all right try again. Try to reframe this. How are we going to keep this conversation going? How are you gonna turn these negatives into a positive, turn this past into a future we go here and then here.

UNKNOWN SPEAKER: Well, I usually say – that I usually I just affirm the other person's right to feel a certain way or, you know, how that they're – even if I disagree with it. And sometimes that's a hard thing to do especially when you really are like you know...

ELIZABETH WAETZIG: Confirming doesn't need agreeing, right? Sure, you want to try that?

UNKNOWN SPEAKER: Yeah.

ELIZABETH WAETZIG: You want to try it?

UNKNOWN SPEAKER: For me it doesn't, could you said that again?

ELIZABETH WAETZIG: You want to try that with this scenario? I have called you over, and over, and over again to discuss this child and this family and you just do not get what the issue is here. I can't tell you how frustrated I am.

UNKNOWN SPEAKER: I would probably say, well, I mean, it makes – you called, how you said you called me several times.

ELIZABETH WAETZIG: Several times.

UNKNOWN SPEAKER: Same thing.

ELIZABETH WAETZIG: Okay I'm entrenching myself at this point.

UNKNOWN SPEAKER: I can still say that, I think it's not too late, let's start over and see if we can.

ELIZABETH WAETZIG: Start over? See this is hard, isn't it?

UNKNOWN SPEAKER: Let's just talk about what the issue is then. Maybe not start over but let's restate what the issue is. What is it that, that's really the problem or that you're concerned about.

ELIZABETH WAETZIG: Okay, you want to try?

UNKNOWN SPEAKER: I don't know (inaudible)

ELIZABETH WAETZIG: It's tough, isn't it? It's hard.

UNKNOWN SPEAKER: My first place that I would have moved to probably would have been to have said, it sounds like you're continuing to have some serious concerns and like to see if we could talk about what those are.

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: I go to the self blame route and say, you know I do have a problem with sometimes not listening to what people are trying to tell me. And I need to get better at that. And I want to hear your questions. And let's talk about some of those and we'll try to acknowledge the frustration.

ELIZABETH WAETZIG: I like the last part of what you said, the self blame thing I'm struggling with that a little bit, I'm struggling.

UNKNOWN SPEAKER: It would have to be delicate, and you're – you know, maybe that's not the best word.

ELIZABETH WAETZIG: You're right. Well, I mean, I think what you're doing is you are sort of laying down and saying...

UNKNOWN SPEAKER: It gives you responsibility for being part of (inaudible).

ELIZABETH WAETZIG: Right and it is genuine, you know what if I have ignored your phone calls absolutely, I'm taking responsibility. You know what I didn't call you back, you're right and I'm – and obviously I'm not getting what you think to be the issue is. I think there's a more – there is a mutual way to reframe this that alleviates the need for blame.

UNKNOWN SPEAKER: Can you just say you're sorry that there is, you know, it seems like there's been a misunderstanding. And whatever part you might have played in it, you know, you'd like to understand and be able to, you know, that you care about them.

ELIZABETH WAETZIG: Again, I am sorry is a great thing to do if you are sorry, because you really truly think you did something wrong. Let's keep going with this, because I'm going to try hearing here.

UNKNOWN SPEAKER: So what I hear you saying is that you feel like you called me a number of times and what? I am getting from what you're sharing with me and I'm not understanding. And I'd like to understand a little bit more from you, what it is that I don't understand?

ELIZABETH WAETZIG: Use a nice – nice use of restating. And I think you could go a little bit farther, but I think you're on the right track.

UNKNOWN SPEAKER: Well, you have to take responsibility for not taking those calls. I would say clearly admit.

ELIZABETH WAETZIG: Wait a second that was at part B. I've called you, and called you. You're not getting what I believe to be the issue.

UNKNOWN SPEAKER: Clearly I've missed opportunities to discuss this matter in greater detail with you. But I'm here now moving forward. I would like to understand and for you to clarify some of the things that (inaudible).

ELIZABETH WAETZIG: Again I like the second half. Try this on for a second. You know what we're not on the same page. Clearly we're not on the same page. And that's a problem and we need to be on the same page. So, let's figure out how we can clear more clearly communicate with one another so that we both understand what the issue is and we can move forward. What's different about what I said?

UNKNOWN SPEAKER: You didn't put the blame to the (inaudible).

ELIZABETH WAETZIG: I neutralized it. I mean why should I take responsibility for the whole thing, maybe you didn't communicate clearly. And maybe I didn't understand. Maybe there is some fault that like and I'm sort of nit picking to prove a point here. But I do think – and I do think that the way that we reframe, the purpose of reframing is to move us forward together, okay? So, when you are dealing with this in an interaction

with someone else it's very important to be able to communicate yes there's an issue, I acknowledge there's an issue. I want to resolve the issue with you together so we can move forward. So, what you're doing is you're taking what ever is past and you're turning it into the future. You're taking whatever is negative and making it positive. You're taking whatever is positional and turning it into an interest, yeah?

UNKNOWN SPEAKER: This might be circumstantial and you have to be sensitive to who you're speaking with, but the – and I like your approach. The potential problem that I see with it is one that, you know politic I just listen to lots of news. But it's like with respect to the war, it's like okay, you know we did this invasion we're there, you know, that's happened now let's move forward.

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: And, what it doesn't acknowledge is the frustrations that people have had for that and maybe for this person also. So, you know maybe they'll be good with we're clearly not on the same page, lets' move forward. But they might also say, yeah, but I tried so many times.

ELIZABETH WAETZIG: Right. Right. No. No.

UNKNOWN SPEAKER: And why did I have to do that?

ELIZABETH WAETZIG: I think you're right and I think you could actually acknowledge the frustration by saying I can hear that you're really frustrated about this and it's, because we're not on the same page. How do you delicately balance acknowledging, I know I appreciate your willingness to tease this apart. Because this, I mean, this is a two day course right here. You know figuring out how to dissect the words, the tone, the emotion and shift it so that you can move forward.

Now when you're in a facilitative or a meditative role, you're doing that for everybody. You're doing that for – and you're creating an issue, you're framing an issue that everybody buys into. And either that issue is shared vision, planning, we have to create something to move forward or that issue is, we're in trouble and we're stuck and we need to figure out how to move forward, okay? So, framing it so that we all buy into the needing to move forward piece is why this skill is so important, so critical and so hard. So, it's worth looking at the different layers. What's the emotion and the tone, what's the context and that's why I mean the exercise sort of in a vacuum right? You don't know the relationship. You don't know a lot of the contextual pieces.

UNKNOWN SPEAKER: And part of that (inaudible) going back to your slide about what you'll remember, eight minutes. And I've seen, in regards to, you know, communication one on one of saying what did you hear me say.

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: I mean and part of that frustration is what have – did you hear me say that you are frustrated?

ELIZABETH WAETZIG: Right.

UNKNOWN SPEAKER: You know, because then you can see well maybe I'm the – they didn't hear, they only heard eight minutes of our...

ELIZABETH WAETZIG: Exactly.

UNKNOWN SPEAKER: What I'm going to talk. So, maybe we need to clarify that a little bit more.

ELIZABETH WAETZIG: Right. No I think that's a great point. So, if you're going along like this saying, you know, I know what I'm trying to communicate. I'm not sure I'm effective at communicating it. Help me understand what you think I'm saying. Help me understand where you think I'm going with this, because if I'm missing something I need to clarify it. I mean being honest with the struggle is always a good strategy. And I think as leaders, as people who are, you know time pressed and dealing with lots of things at the same time, it's tempting to not go down those layers. But the cost of not doing that is big. You know, you seen conflicts erupt. They start on a micro level and then they spread like amoebas. Throughout the entire organization pretty soon they take on a life for their own. There's something that they were never intended to be. So, being able to

slow down and say okay wait a second something is going on here and frame it as something we need to work on together is part of pulling those silos together. Those disparate voices together, facilitation, mediation, leadership, interactions with one other person, okay?

And then the ability to summarize all of this and this is also an art form pulling together the different pieces of what has happened so that you can then go to the next place. So, if I've got it all right, this is where you're coming from, this is what's important to you. This is what I've express as my perspective and what's important to me. It looks like there are some places that we are in common. And there are some things we need to talk about, let's move on, okay?

The ability to do that is a facilitative thing and it's important because – but the hard part the balance is I have to manage what's going on for me and I have to manage the group, that's a balance. So, when I'm in those situations, typically I preview what I'm doing. Okay, I'm stepping out of interested party role and moving into facilitator role. And I want to maybe try to some up what's going on here so we can move forward. As transparent as you can be, it will get you great dividends, okay?

All right, so framing your message and I think I talked about this a little bit, you know some of these e-mails that I was – that I've been experience lately have missed a couple of these really important pieces and it's frustrating the tail lights out of the rest of the group. So, this e-mail comes through. I don't know why that's being sent. I don't

know what's expected of me. Framing your message in a way that other people can hear it is a very important part of communication. And if you've done your job and listened well you have some clues about how to frame that. So, you want to frame it so that they can determine the meaning of the situation for you. You have the situation, be it planning and visioning or problem solving in conflict resolution it has a meaning to you. So, knowing what that is, is important. Knowing what your interests are. The purpose of the message, am I trying to be persuasive? Am I trying to be conciliatory? Am I trying to be consensus based? What's the purpose of my message? Am I trying to help? Am I trying to be – engender some sympathy or some empathy for what's going on for me? Why am I talking? Actually, I love that acronym, why am I talking wait because it reminds me to listen first. Wait, why am I talking, okay? So you'll choose your frame, choose your words, choose your language, choose your timing, choose your pace, choose your frame.

We are so not going to get through this whole presentation I'm just going to mention that right now and we're going to go to cultural competence. Again, another two day training unto itself, three days. But tremendously important, I don't think you can talk about leadership or conflict resolution without talking about culture, okay? It has to be, it is present and, I think, every interaction is a multicultural interaction. Because of the way that we define culture. So, another quick exercise, because quite frankly they are more fun than listening to me talk. That's not my writing. Okay, so I spent now a long time with you all because it's almost – it's quarter to 4:00. I've spent three hours plus a little bit of time with you. I would like you to tell me what you think you know about me.

UNKNOWN SPEAKER: You like to talk. And you're good at, you know, a good communicator (inaudible)

ELIZABETH WAETZIG: That's okay, I like to talk, I'll buy that, yep.

UNKNOWN SPEAKER: You like being a mom. (inaudible).

ELIZABETH WAETZIG: Okay. What else do you think you know?

UNKNOWN SPEAKER: Passionate about your work.

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: I think you're sassy.

ELIZABETH WAETZIG: Really?

UNKNOWN SPEAKER: And that's a compliment and you say that's a good thing.

ELIZABETH WAETZIG: That's a good thing.

UNKNOWN SPEAKER: Exactly.

ELIZABETH WAETZIG: I'm right there with you. So, what else do you think you know.

UNKNOWN SPEAKER: Honest.

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: Humor.

ELIZABETH WAETZIG: My little sister was always a funny one, it irritated me.

Everybody is laughing at her at the dinner table like what, come on.

UNKNOWN SPEAKER: So you're the straight man.

ELIZABETH WAETZIG: Yep.

UNKNOWN SPEAKER: (inaudible) used to live around LA.

UNKNOWN SPEAKER: You have a big network I think (inaudible).

ELIZABETH WAETZIG: (inaudible).

UNKNOWN SPEAKER: Within your (inaudible).

UNKNOWN SPEAKER: (inaudible) lawyer.

ELIZABETH WAETZIG: Oh good. Good memory.

UNKNOWN SPEAKER: He doesn't know it's kind of (inaudible)

ELIZABETH WAETZIG: That's right I didn't let you tell my – your lawyer jokes. I bet there are many too.

UNKNOWN SPEAKER: We know some about your family.

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: (Inaudible).

ELIZABETH WAETZIG: Oh, yes.

UNKNOWN SPEAKER: Do you know how to detect (inaudible) and since (inaudible).

UNKNOWN SPEAKER: She looks, I think she was in (inaudible) right now.

UNKNOWN SPEAKER: Yeah (inaudible) for.

ELIZABETH WAETZIG: Yeah. Good. I'm going to get lots of friends out of this aren't I?

UNKNOWN SPEAKER: Yeah.

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: I'm thinking you know how to separate personal from business.

ELIZABETH WAETZIG: Anything else you know about me?

UNKNOWN SPEAKER: You're enjoying your work and (inaudible).

ELIZABETH WAETZIG: Well, that's a lot you guys got out of, you know, three plus hours.

UNKNOWN SPEAKER: You let people (inaudible).

ELIZABETH WAETZIG: Okay. I'm a big E.

UNKNOWN SPEAKER: (inaudible).

ELIZABETH WAETZIG: Extrovert.

UNKNOWN SPEAKER: Okay.

ELIZABETH WAETZIG: Ever take the Myers-Briggs. So far in the E scales, ridiculous like I'm off the scale. My husband is on the E.I. Center I said save a little of that E for me don't spend it all at work, because I need to talk. All right so...

UNKNOWN SPEAKER: You care about being (inaudible).

ELIZABETH WAETZIG: Okay.

UNKNOWN SPEAKER: You have a husband.

UNKNOWN SPEAKER: Is he a lawyer?

ELIZABETH WAETZIG: Nope.

UNKNOWN SPEAKER: I think she's happy.

ELIZABETH WAETZIG: All right. So, there's some things that we haven't put up here, have we? But I lived in DC for 13 years.

UNKNOWN SPEAKER: Well I thought (inaudible)

ELIZABETH WAETZIG: Why?

UNKNOWN SPEAKER: By the way (inaudible).

ELIZABETH WAETZIG: Just a better way to say it?

UNKNOWN SPEAKER: Can I say something

ELIZABETH WAETZIG: Yeah, please.

UNKNOWN SPEAKER: And not offend anybody, but I always expected to be Caucasian women comes positive and present, you know presenters to always be Caucasians.

ELIZABETH WAETZIG: It's interesting, why?

UNKNOWN SPEAKER: Because it's just seems like you guys are always going have been invested in it from the beginning and you know that has been able to communicate with those that are higher up I guess to get your point across with research and stuff working for you in your programs or your professionalism or whatever your expertise like you did.

ELIZABETH WAETZIG: It's interesting.

UNKNOWN SPEAKER: You see, I mean if we are going to be truthful about it, you don't see many minorities facilitating. Mostly, I mean, you can count right here in the room and see how many are in here that attend conferences or something, nine times out of ten we're always in the audience, we're not facilitating.

ELIZABETH WAETZIG: So, we should talk about what we might do about that. I think that's an interesting point. And actually it – there was a story that I was going to tell about this after we finish this exercise and I'm definitely going to tell it because of what you just said. I think it's a really interesting point and I appreciate your honesty in bringing that out. This is an iceberg, what do we know about icebergs?

UNKNOWN SPEAKER: There's a lot underneath.

ELIZABETH WAETZIG: There's a lot underneath. In fact it's about 70 percent. Actually it's probably more than that 90 percent. We see about 10 percent. So, when I walked in to the room, you know a couple of things about me. You know that I'm female, certain race, certain things about my appearance that you can tell. And then as I start to talk you learned some other things. The interesting thing about this to me is, you don't know what that means to me. You know, what does it mean for me to be female? How does that affect my identity? How I view myself? How I see myself?

I asked my mother once, who went to medical school in the '60s. What it was like to be one of two women in her medical school class. Do you know what she told me? I didn't really think about it. Like come on I wanted a story. But the story was she didn't think about it. So nobody else thought about it. So, for her trying to understand her life and what it means to be a woman in a predominantly male society was not an issue for her. So, that tells me something about her culture, her cultural being.

So, the story that I was going to tell you, my partner Suganya who was going to come is from Malaysia. And she is a woman of color. And we typically do cultural competence together, because I have to admit that I feel this was a piece of the program she was supposed to do. I typically feel a little bit unqualified. I don't know why I feel that actually because I thought a lot about it. But there is a certain level of discomfort, maybe too strong a word, but I have with this piece of it that I don't feel with the other pieces.

And she and I did this side by side at one point, and we ask the audience who was in DC and I think I was the only white woman in the room. And she and I did this together. And we had them put all the things that they thought they knew about us up on the board and they were, I don't know if they – they were family members actually. They were family leaders and we asked them well who would you want to receive services from? And this got to be a very honest, very interesting conversation and they didn't hesitate and they said her. And we asked why and they said well, because we feel more comfortable talking with her which I completely understood. I mean that visual connection, that connection was easier for them, right off the bat.

Well, we probed a little deeper, because underneath you put things like parenting and you put things like family status. And I said well, so you know some things about my parental status, because I've told stories about my kids. What do you know about Suganya's parental status? Well, she doesn't have kids. And I said well does that make a difference? It kind of makes a difference. And I said what about the fact that I advocated for my daughter in the education system, because she's had a learning disability and well it's not severe, but I've been in a system family in the role of parent in that kind of a negotiation. Well, that made a difference.

So, what it taught us and what it taught them was this is a huge part of culture. This is a huge part of culture and what we don't know is what these things mean to people. We don't know the degree to which they cause you to be who you are. Am I who I am because I'm a white female who grew up in Washington State with two physicians as parents and I spent a long time out on the East Coast. Okay that tells you some things. There's a whole lot more going on there. So, when we look at, when we look at the way we interact with people, it goes back to that first point. You know when you know about my name, my role, and even what I hope to get out of this, what do you know about me? About that much. There's so much more that's worth knowing. And so those conversations, those interactions with those strategic alliances need to go deeper than vision. They need to go to a level where we start building trust, and we start building a meaningful relationship.

Let's talk a moment about those things that impact culture. We can talk a little bit about the definition of diversity. I would actually prefer for lack of time to talk about some of these factors that influence diversity. And look how many there are and this is just page one, okay? So, we have these internal factors and these are things we, kind of, can't change. Gender, sexuality, our religion, our spiritual views, I guess we can change those, but our age, our life cycle issues, the generational things we talked about earlier. Many of these are just very intrinsic core pieces of who we are. Then you look at the internal factors. Just reflect for a moment on that list and we go from being groups to being individuals. The more of this list we take in and I would challenge you to think about how many of those affect your work in public health or health care, language, education, perception of disability.

I was just talking with the head of Operation Smile. I don't know if you're familiar with that group, Operation Smile. They do cleft palate surgery. And I was talking about his work with him and he said, you know we don't travel, we have to travel with a mental health specialist. And we have to travel with cultural brokers, because a disability of that kind of – that that's visible on a child has ramifications throughout that family. And the way that they perceive blame, and fault, and punishment and I mean just the whole and the social consequences of not just having a cleft palette, but getting it taken care of is profound. And they understand that and they provide for that and it's a really wonderful thing. But I'm not sure that they thought about it when they first started. I mean they have been spit upon, kicked out, things have been thrown at them. These are the surgeons not the family, the surgeons, because they are connected with something that

is – makes this particular community feel vulnerable. You never know what you're going to think, what people are going to think.

Have you read *The Spirit Catches You and You Fall Down*? Unbelievable book about the way people approach health care. *The Spirit Catches You And You Fall Down*. It's about a Hmong family with a daughter who I believe has epilepsy or some sort of epileptic disorder. And the communication between the providers and the family is, I mean from the medical profession who really wants to understand what's going on and the family that believes that this happened to them because of fate. And they have a very spiritual perception of what needs to happen and the cross purposes at which the family and the providers work. And nobody is malintented here. Everybody has the best intentions and yet they struggle. They struggle to make this work and it's really. It really points out a lot of the difficulties and the challenges of being multicultural and providing health care.

So, look at the list of internal factors and then we go to external factors and it just continues to get more complex. Then we talk about communities, we talk about politics, we talk about race relations, we talk about history, because we can't negate that. And I think what you brought up is a piece of this, you know, how do we perceive how race and ethnicity factor into our roles. And our perceived roles and our expected roles, and do we need to think about changing that, and supporting folks from different ethnicities to be up here with this thing.

UNKNOWN SPEAKER: I don't know about that thing, but (inaudible).

ELIZABETH WAETZIG: You don't have to. Yeah PowerPoint is overrated. All right, so again we have to move rather quickly, but let's think for a moment about culture not just as ethnicity, but as an integrated pattern of behaviors. That include all of these things, the way we think, the way that we communicate, the way that we talk, the language that we use, the beliefs, values, practices, customs, courtesies, I mean the list is endless and I would add a couple to that, the way that we approach conflict, the way we approach leadership, the way we approach evaluation and science, those are all culturally bound. And so, understanding how we as individuals come and the way we as organizations come to this work is really important. And how do we know this? We communicate, we build relationships, and we know what are our environment is. So, you can see how this is culminating. There's a flow to what we've been talking about today.

UNKNOWN SPEAKER: Can I mention something? In the nursing literature now there's – when you talk about cultural competencies, they are saying that there are three generations of nurses that are still working. And that some of the conflict like in the work place related to the fact that, you know, the spectrum is so wide. You know, people that are like in their 20s that's working. And then, you know, people that are in their 40s. And then people who are approaching retirement - or they thought until the economy. And they were saying how that you really have to, it's kind of, subtle so you really have to really be aware of that. If you are in a leadership role or something like that, you have to

be aware of the three different generations. And how they approach, you know, like even the whole thing of how much overtime do you work. That you feel obligated to work overtime or the balance that you have for work and play to work and leisure time. There is a difference (inaudible).

ELIZABETH WAETZIG: Absolutely.

UNKNOWN SPEAKER: And it can be seen as a negative if you don't have the same set of values about, you know, how much time you put in at the work.

ELIZABETH WAETZIG: That's a really astute observation. I mean even in terms of how wisdom is valued, and experienced is valued, and new thinking is valued. And, I mean, you can just begin as you think about, you can begin to think of all the different ways that a group might be tripped up. But all the different ways that they might actually support each other and create this amazing group that can help get to a much higher level, it's interesting.

All right, so we have like a minute left to go through about 40 slides so we're not going to get there. What I – and I'm just going to sum up at this point, because I will send you these PowerPoints. We were going to finish with organizational culture, because you bring your individual culture within an organizational context. And the organizational culture does affect when it clashes it's hard, when it's consistent it's easier. But they all

change and they don't necessarily change in the same way. So, we have to pay attention to organizational culture as well as individual.

Then I wanted to talk a little bit about shared vision and how it – and I know we've been talking about that a little bit but there are lots of ways to do that. From being directive about it, I'm going to create the shared vision and I'm going to share it with all of my loyal followers, to selling it. I've created it, but I'm going to find a way to sell it to you, to testing it. Well, let's test it out with a few trusted people and then maybe we'll roll it out as a group thing. Or maybe I'll consult with you on the creating of it or maybe I'll co-create it. So, there's a whole spectrum of ways to do that. And it's not about doing just the co-creating it's about looking at what you have to do and determining what makes the most sense. With the people that you have, the vision you're trying to create, and what the end game is.

What is the end result you're looking for. Because if you need buy in, you darn well better be co-creating. If you need to move quickly and it's a more technical issue, if it's a simpler challenge then go ahead and either tell, sell, or do it yourself. But be able to assess your environment, be able to assess the people and the stake that they have in it. The stake they need to have in it. And then choose your intervention, choose it thoughtfully. And then, when you do that, you have some processes available to you. With facilitation, your job is to be, to set a tone of participation and inclusion, to be able to restate what's going on for people and be respectful of their contribution.

AMCHP 2009 ANNUAL CONFERENCE

Leadership Skills for Systems Development and Transformation

February 20 - 27, 2009

ELIZABETH WAETZIG: Being aware of the environment, the relationships, the group dynamics, how can you assess that situation, how can you identify and diagnose what's going on, intervene in a way that builds alliances, encourages diversity and disagreement? And I did say disagreement because having the opposition there to talk about what's important to them might mean that you succeed in the long run. And then being able to reflect what worked, because if leaders can reflect and adapt as they move forward, they have a much better chance of being successful. So, any questions?

I'm sorry, we had to speed along so fast. I really appreciate you coming and finding your way to Siberia and it was fun. I'm sorry, [inaudible], you couldn't be here. But I wish you all the luck in what you're doing and perhaps our paths will cross again. Thank you. All right. Thank you.