

# Women in Academic Medicine

December 1, 2015

## {Power} & {Influence}

In Professional Communication

**Hosted & Facilitated by:**

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What you shared during the session...

Approachable



Directive  
(Assertive)

- Integrating Approachable & Directive behaviors is critical to demonstrating leadership and respectful, professional communication.
- It is important to be aware of your own as well as others' body language, behaviors, and verbal
- We should consider how these might affect the individual contribution as well as collective effort and outcomes.
- We should consciously determine when, with whom, in what contexts and why we might want to balance or emphasize certain behaviors to accomplish an individual and/or contribute to a collective goal.

What you said you wanted to get out of the

# **POWER & INFLUENCE SESSION**



“Gain ideas on ways to communicate effectively, project confidence but at the same time not appear as a “know it all!””

“gain more confidence in communication”

“More awareness of how I respond to others with an autocratic view of power and influence.”

“How to better communicate and collaborate with others, regardless of position.”

“I hope to reflect on the importance and delicate matter of power and how to get things done in a way that honors my style so that I can authentically make a difference in my job and world around me.”

“To get the introvert in me OUT so I can have confidence when communicating with others in person.”

“Information on how to improve my communication”

“To change my “disagree” to “agree” with the statement “I convey confidence when I communicate with people who are in positions relatively higher than mine or have more experience or expertise.” Would also like to explore how to fully utilize my power through being more influential and remain approachable.”

“Discovering what has been learned from studies of power and influence.”

“Techniques for communicating effectively with leadership, peers, and subordinates.”

“To view others opinions and experiences with leadership for further reflection on my own experiences, thoughts and direction.”

“Advancing leadership skills”

“Learning how to be better at influencing my own outcomes.”

“Making my good better, and my better best.”

“To change my "disagree" to "agree" with the statement "I convey confidence when I communicate with people who are in positions relatively higher than mine or have more experience or expertise." Would also like to explore how to fully utilize my power through being more influential and remain approachable.”

“to be able to advance myself in my career without feeling like I am not doing enough”

“Ideas when dealing with those who bully”

“Information on how to improve my communication”

“Advancing leadership skills”

“Ideas when dealing with those who bully”

“to be able to advance myself in my career without feeling like I am not doing enough”

“Making my good better, and my better best.”

“Insight & illumination as well as development of communication skills”

“gain more confidence in communication”

“To view others opinions and experiences with leadership for further reflection on my own experiences, thoughts and direction.”

“New insight on how my self-perception of power and influence has changed with changes in professional role.”

“To change my "disagree" to "agree" with the statement "I convey confidence when I communicate with people who are in positions relatively higher than mine or have more

What's being authoritative got to do with it?

**“PLAYING HIGH”**

# The Elephant in the Room: Framing Directive Behaviors

- We asked you to discuss this concept in small groups and share your ideas.
- Those who shared indicated this phrase “playing high” might not be a productive way to frame this concept.
- Several verbalized agreement that some directive behaviors are necessary, but we should never be rude or unprofessional.





What you said about

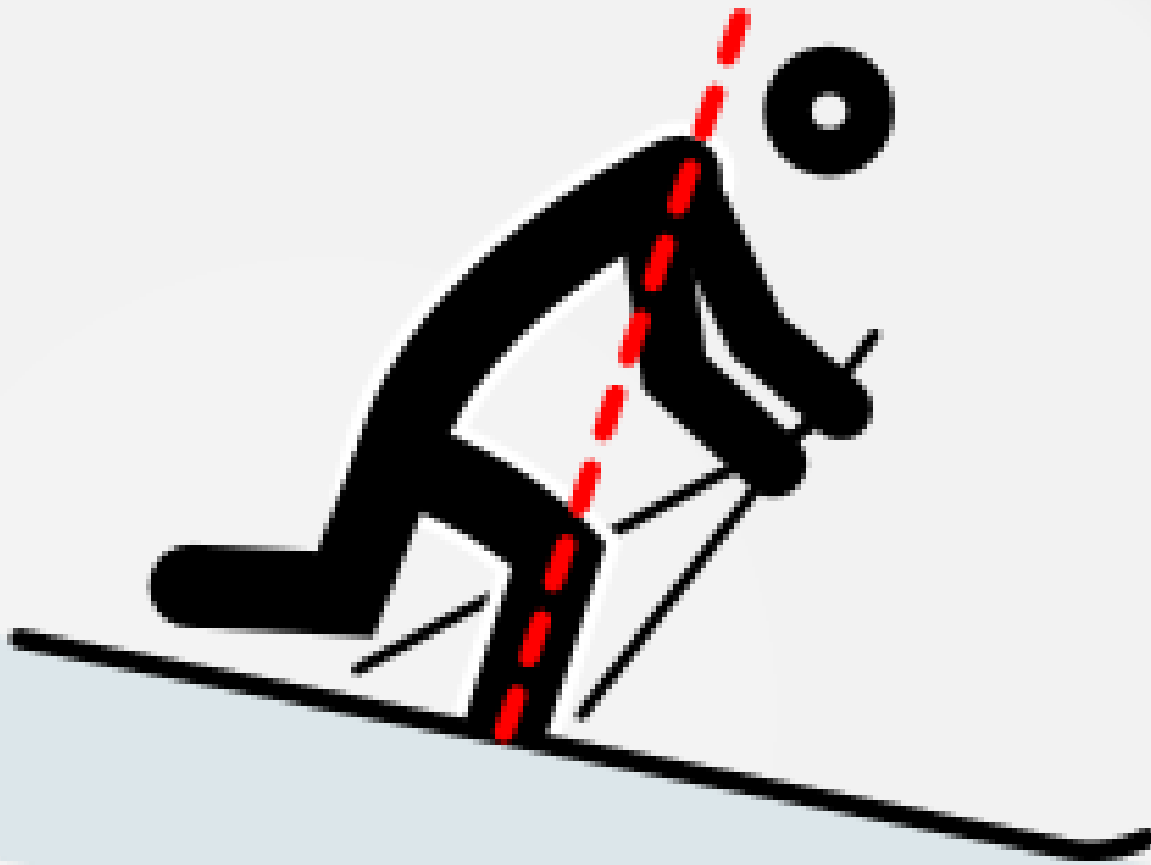
**POWER, INFLUENCE, BEING  
APPROACHABLE**





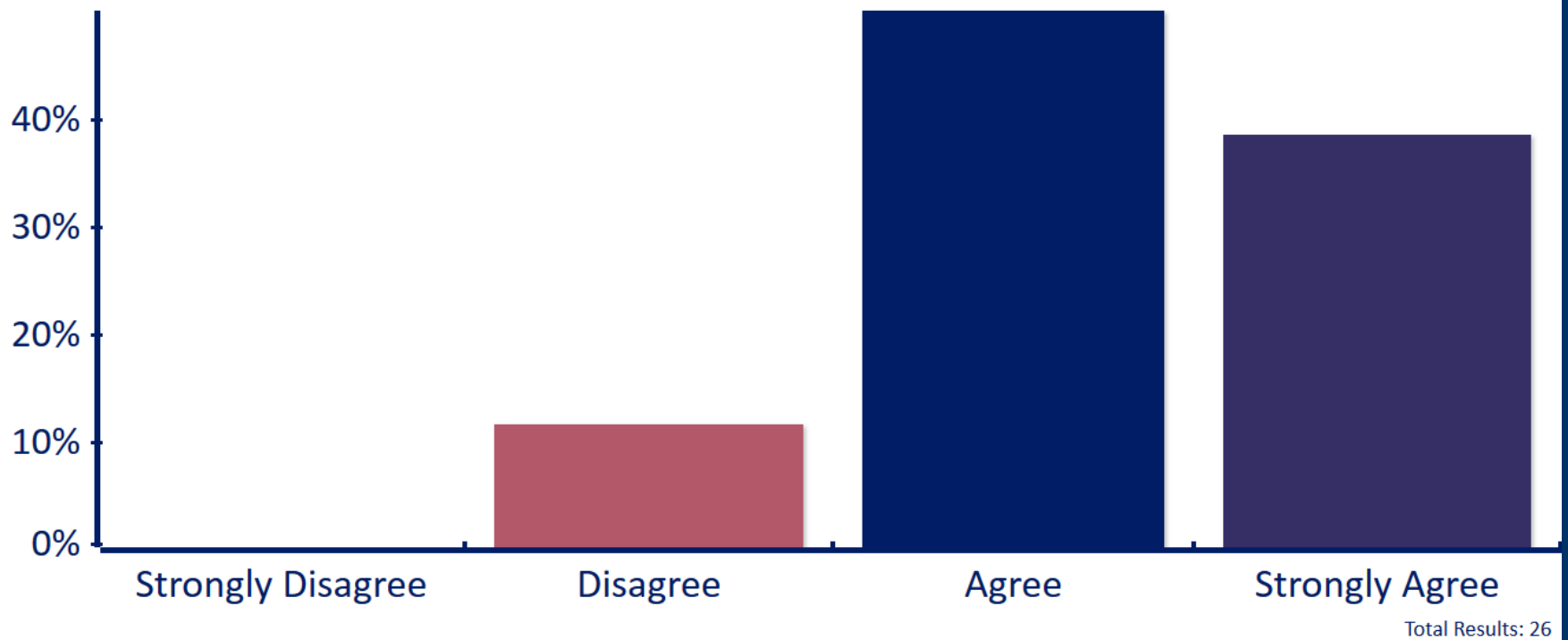
# What's *Influence* got to do with it?

How you described Influence (pre-session)

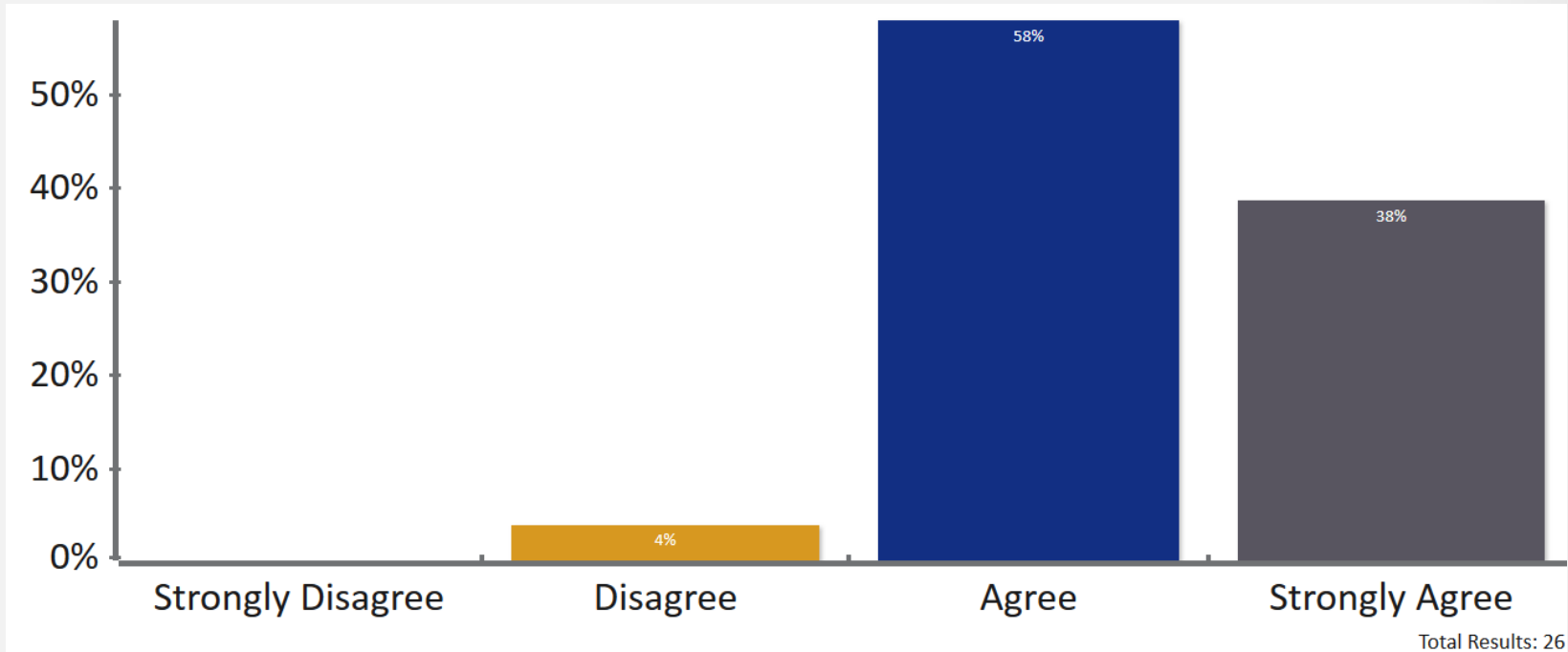


# What's position\* got to do with it?

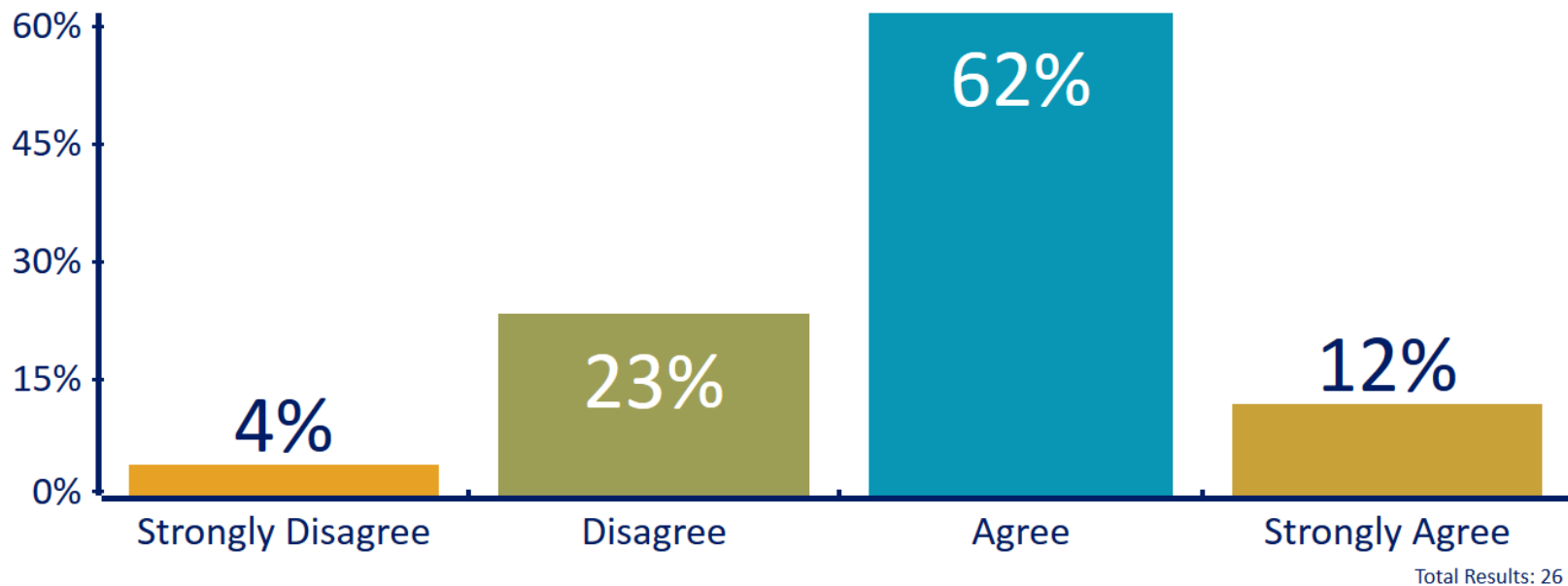
(\*Position or specialty)



**My POSITION (or SPECIALTY) affects how I communicate with others.**



**My POSITION (or SPECIALTY) affects how OTHERS perceive me.**



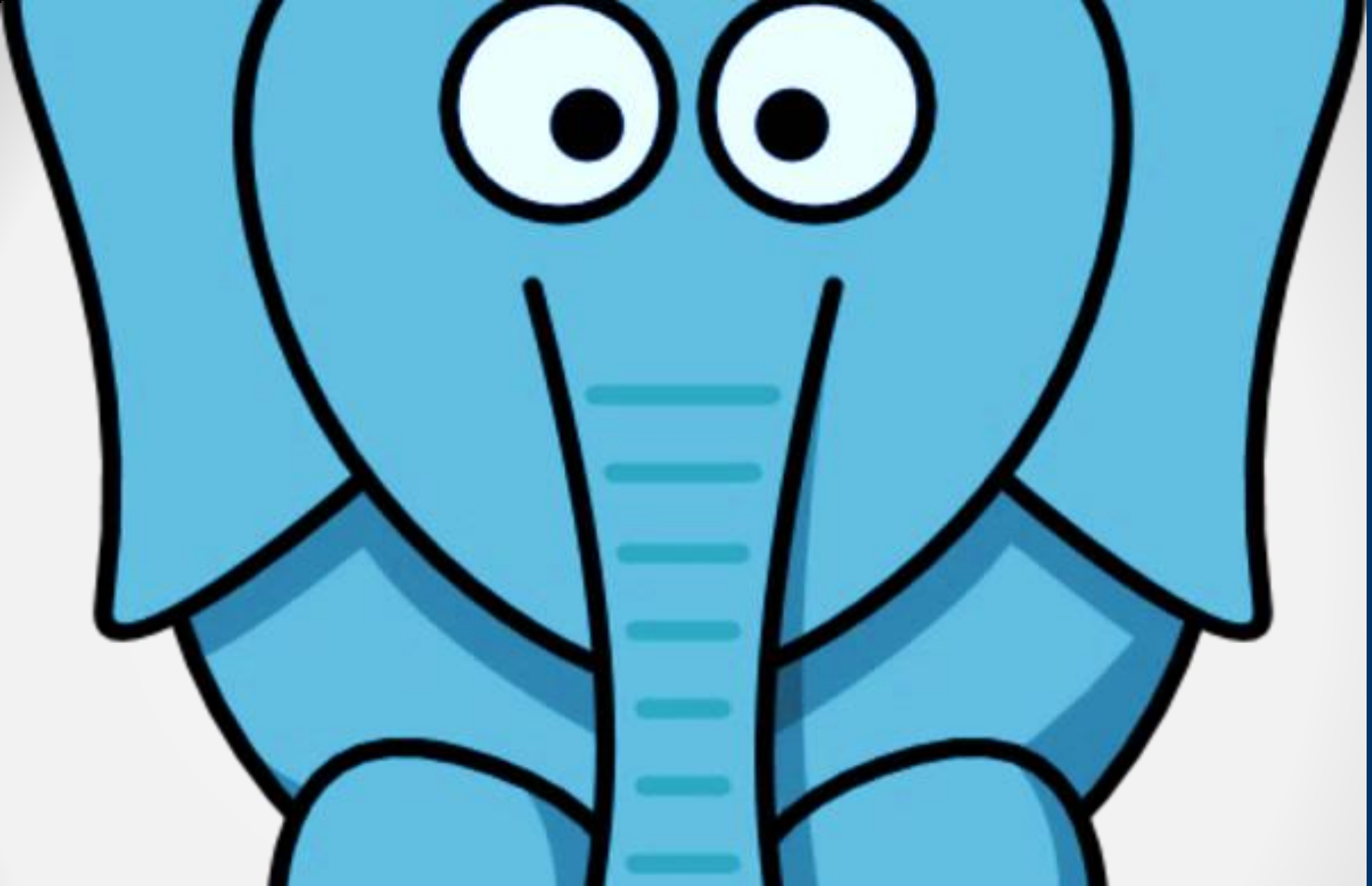
## **I convey confidence when I communicate with people who are in positions relatively higher than mine or have more experience or expertise.**

This is fantastic! 74% agreed or strongly agreed. We recognize that we experience life along a continuum and our confidence levels might be affected by many factors, including the tension in a specific situation, the roles we perform or are expected to perform, etc.

What's being approachable got to do with it?

**“PLAYING LOW”**



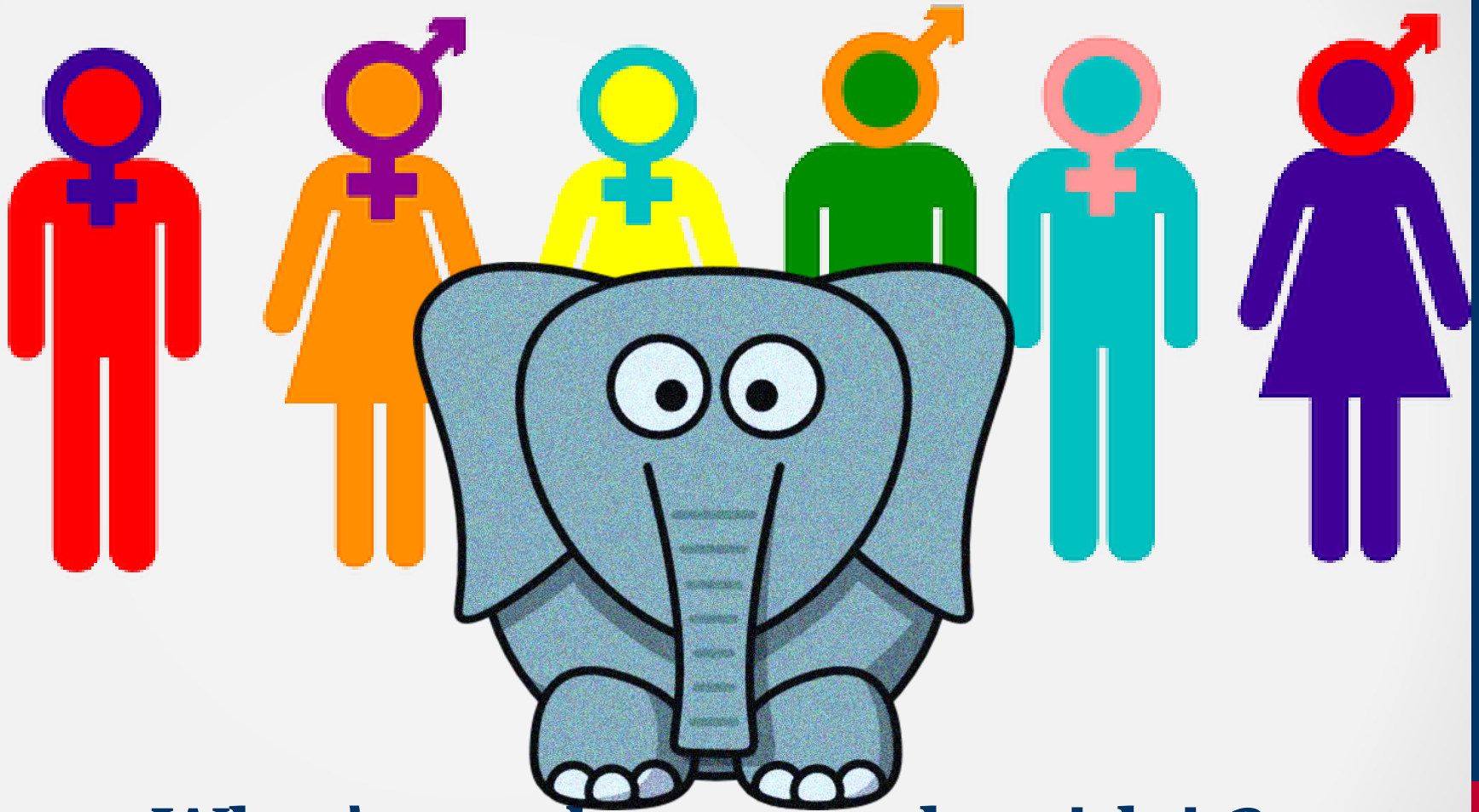


## **The Elephant in the Room: Playing Low**

All the participants who shared in the session indicated that playing low is a troublesome phrase for this set of behaviors describing approachability and openness. However, many seemed to agree that being approachable and demonstrating openness, good listening skills, etc. is critical to professional communication, especially in health care where we must work collaboratively to generate appropriate and patient-centered outcomes.

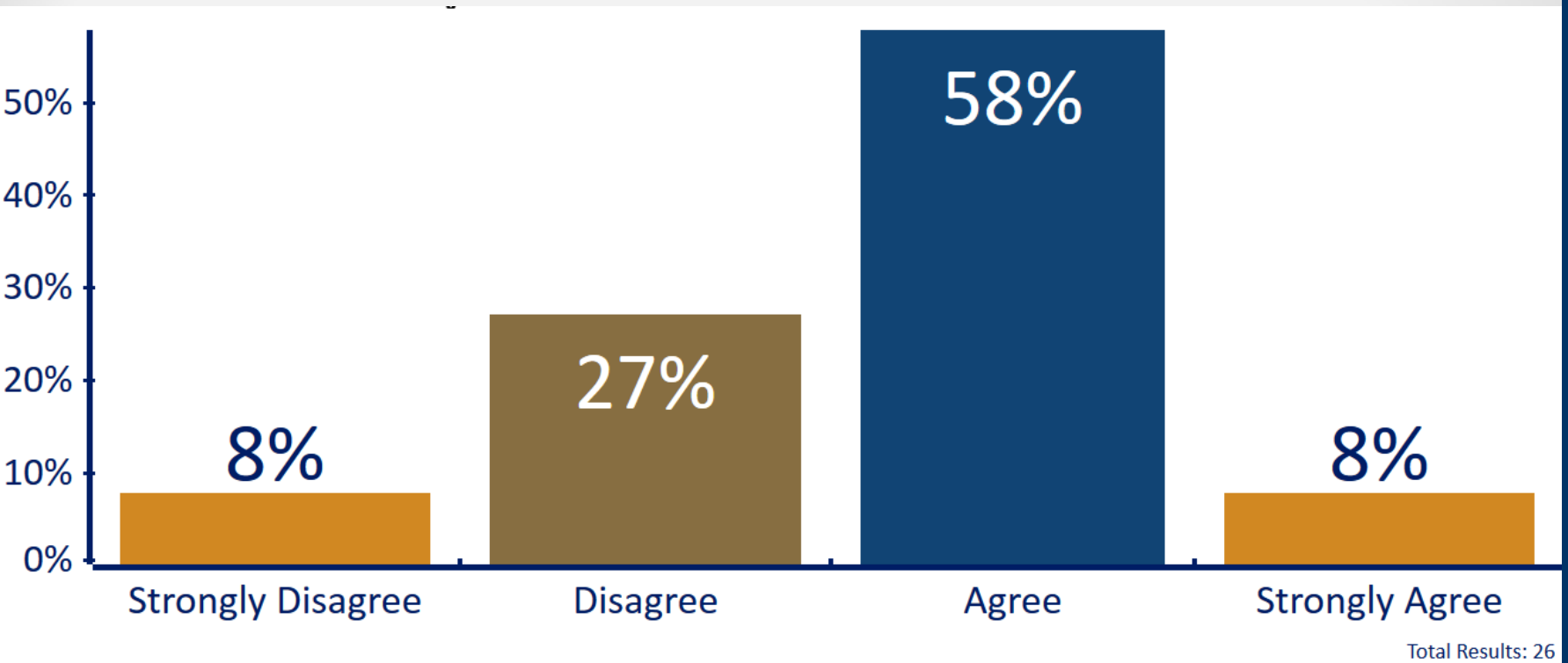


**How did you define APPROACHABLE?**

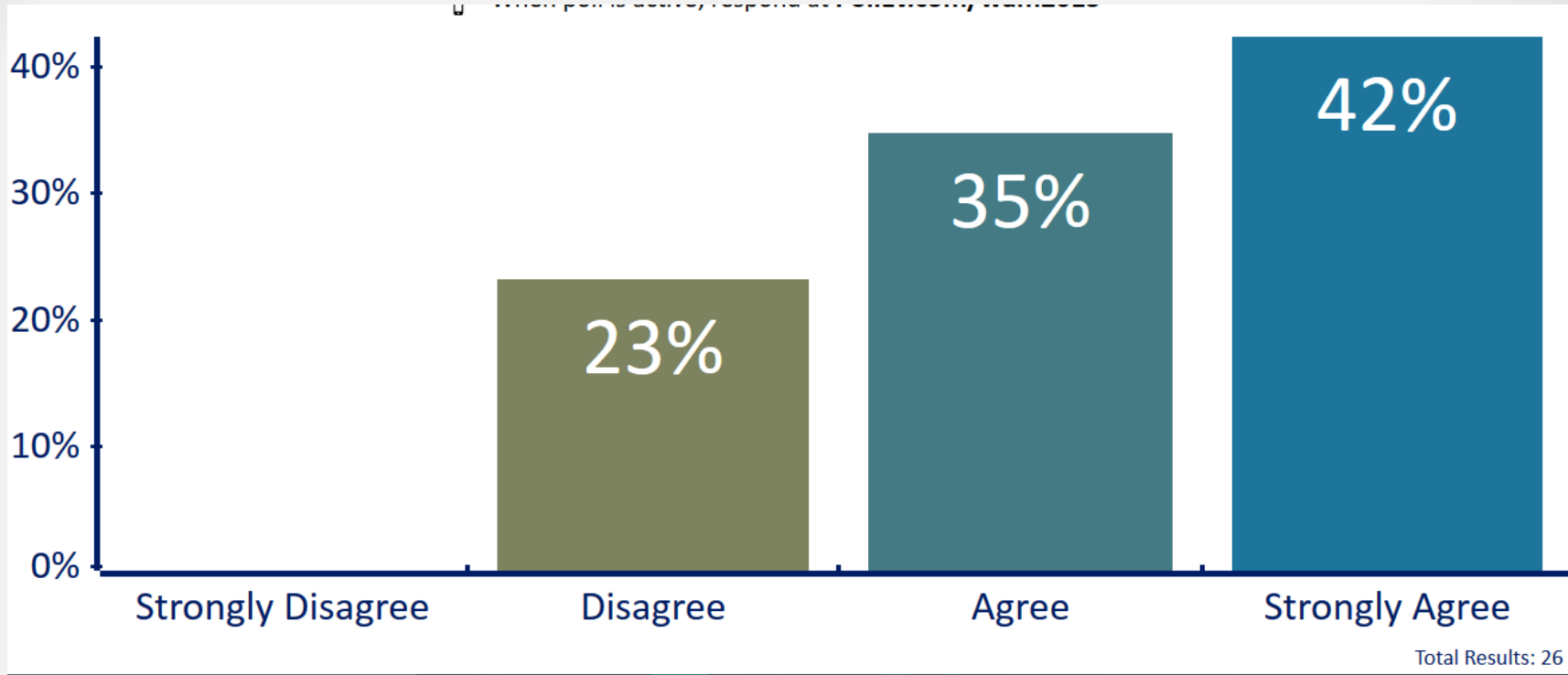


**What's gender got to do with it?**

One Last Elephant



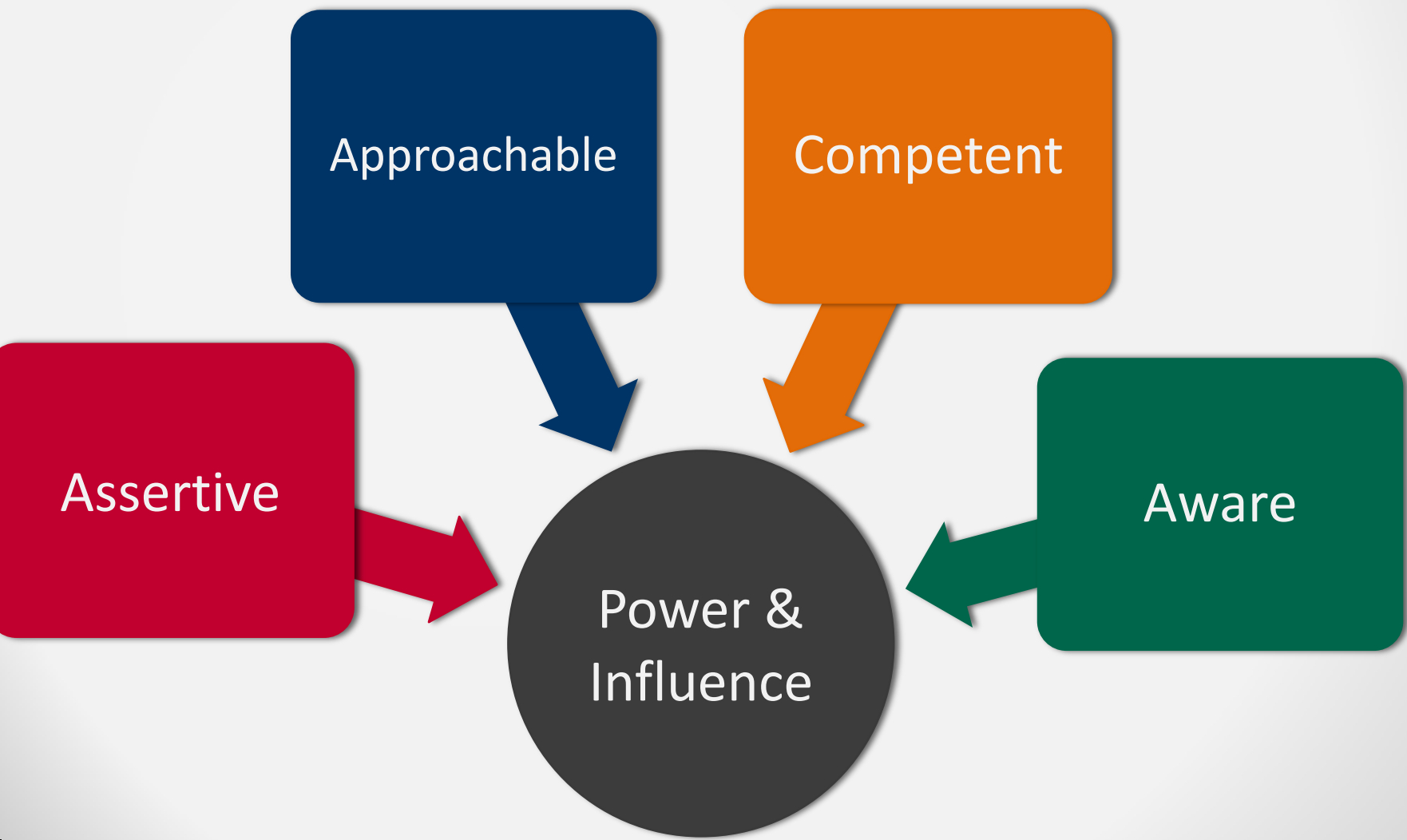
**My GENDER affects how I perceive myself in professional communication.**



**My GENDER affects how others perceive me in professional communication.**

# Reconciling {Power} with {Approachability}

- How can we {Influence} process or outcomes?



# Shifting our Frame

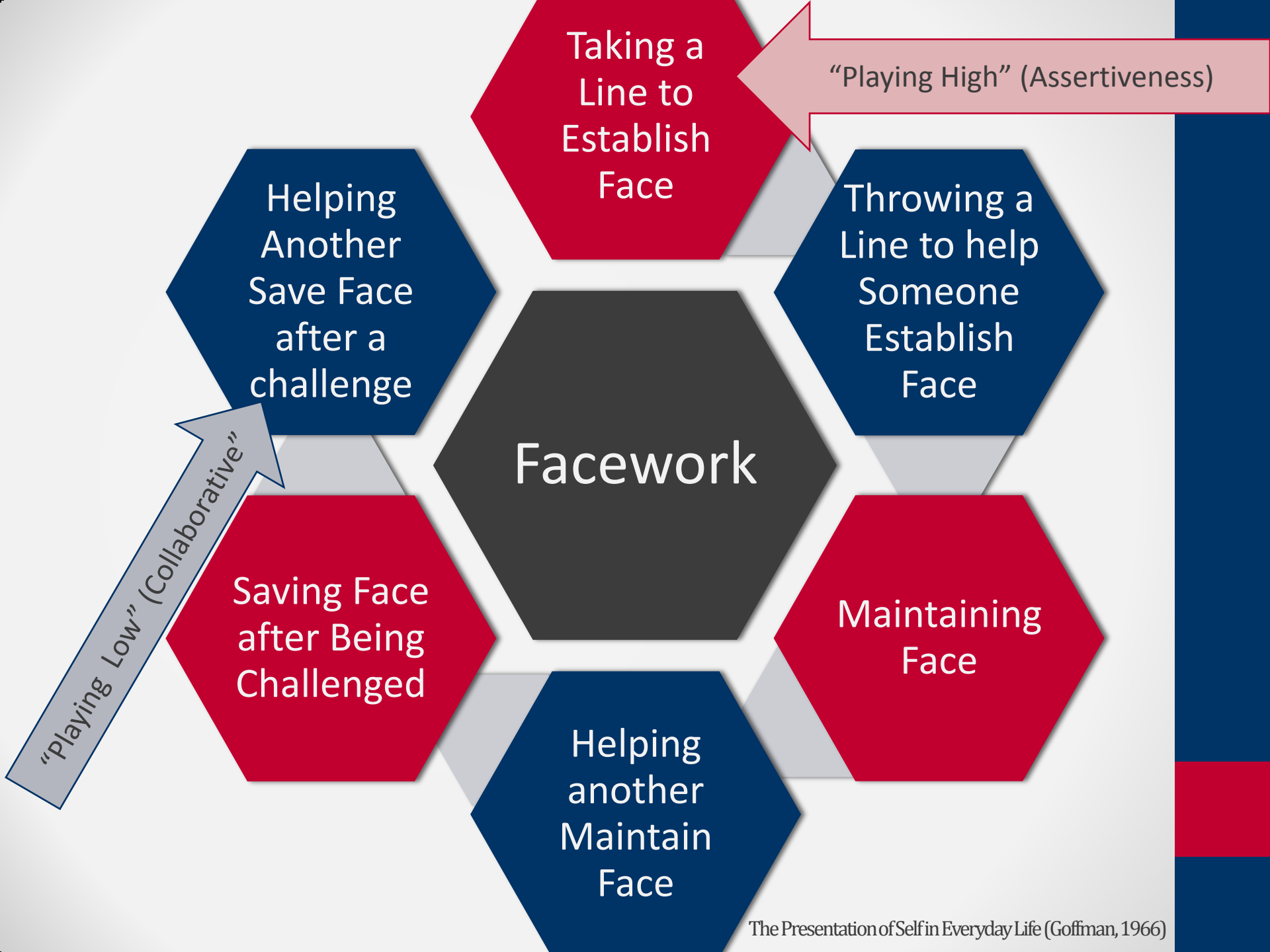
- **We started with** Dr. Gruenfeld's framework of "playing high" and "playing low"
- **We reached consensus that...**
  - We were troubled by the way this framework characterizes behaviors involved in leadership and professional communication;
  - The use of the verb "play", or the characterization of approachability and related behaviors as being "low" (demeaning?) and authoritative behaviors as "high", was not a productive or helpful way to frame these concepts;
  - These two sets of behaviors (being approachable, and being directive or authoritative) are necessary when working in groups or teams;
  - Collaboration and building a sense of team inclusiveness, especially in health care settings where the process and outcomes ought to be patient-centered, is crucial;
  - Sometimes authoritative or directive behaviors (even if we prefer to rephrase these as ASSERTIVE behaviors) are necessary to move the group's efforts forward. Sometimes leadership or "nudging" is needed;
  - HOW we demonstrate direction, authority, assertiveness (power, influence) is critical to delivering our message successfully and contributing to the group's success;
  - We CAN engage in ASSERTIVE (authoritative, directive) behaviors WITHOUT being rude or unprofessional, that is, while remaining APPROACHABLE, OPEN-MINDED, ETC.;
  - There are, sometimes, differences in how we are treated when we are ASSERTIVE depending upon our position, relative expertise, or gender.
- Kelly and I shifted shared your concerns about how the framework characterizes these concepts and introduced an alternate framework based on Goffman's concept of 'facework'. This is also why we shifted the frame in the session from Gruenfeld's label "Playing High" to its defining terms "authoritative"&"directive", and then ours "assertive". We invite you to think about how you can frame these concepts in a way that functions well for you in the context in which you work.



# An Alternate Communication Framework

Facework





Taking a Line to Establish Face

“Playing High” (Assertiveness)

Throwing a Line to help Someone Establish Face

Helping Another Save Face after a challenge

Facework

Maintaining Face

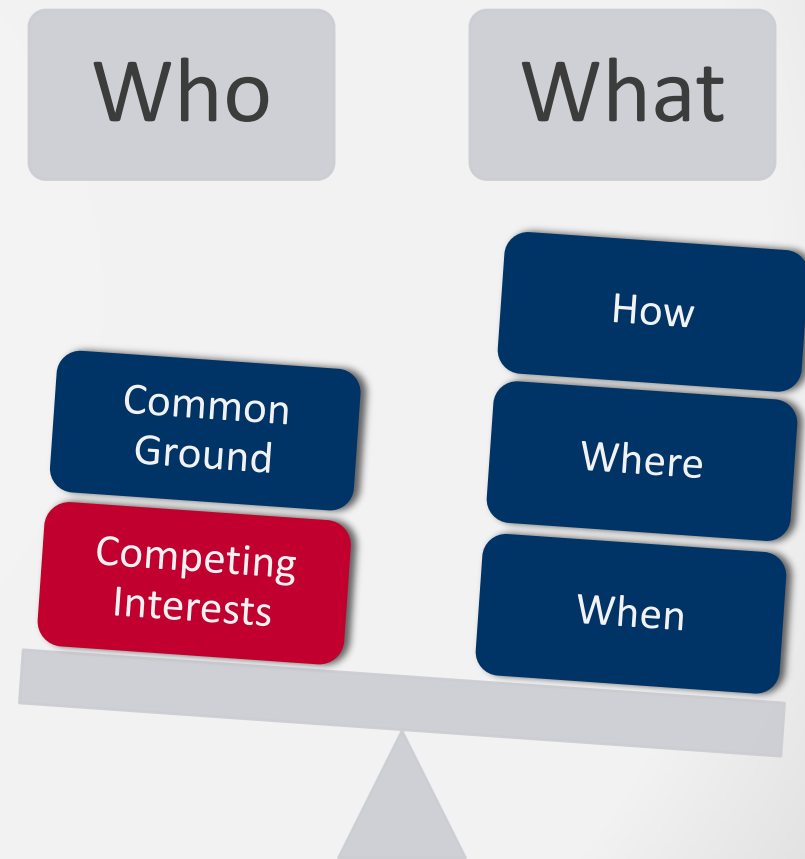
Saving Face after Being Challenged

Helping another Maintain Face

“Playing Low” (Collaborative)

# Facework → Survey the **LANDSCAPE**

- **Who** is in the group?
- **What** & **How** can *they* contribute?
- **What** & **How** can *I* contribute?
- Are the group's interests **in conflict** with mine? How? To what extent?
- **Where** & **How** can WE find common ground?





## Working Relationship

- Is there an existing rapport?
- If not, build rapport



## Hierarchical Relationship

- Relative Positions
- Relative Experience
- Relative Expertise



## Interests of Stakeholders

- Self-interest in process or outcome
- Collective interest (process or outcome)



## Nature of the Task / Issue

- Serious, stressful, complex, & requires long-term, collaborative effort
- Straightforward & Amenable to simple solution

What will you do to enhance your approach to professional communication?

Enter your response

Submit response

No responses submitted yet.

Click  
here



## How will you extend the conversation on power & influence, or enhance your approach to (inter)professional communication?

Please include ideas for how we can extend this conversation, perhaps how you might address these communication concepts or issues on your own terms in the programs, teams, departments or educational activities in which you participate.



## **Professor Deborah H. Gruenfeld, PhD**

Joseph McDonald Professor at Stanford University Graduate School of Business

Codirector of the Executive Program for Women Leaders

Academic Area: [Organizational Behavior](#)



# References

- Goffman E. On facework *Psychiatry*, 18:213-131; 1955.
- Goffman E. *The presentation of self in everyday life*. NY:Doubleday; 1959.
- **Search Results in Google Scholar** regarding facework as a framework for understanding communication from the perspective of:
  - [Education & Anthropology](#)
  - [Medical education](#)
  - [Nursing](#)
  - [Pediatrics](#)
  - [Psychiatry](#)
  - [Social psychology](#)
  - [Veterinary medicine](#)
  - [Working in Teams](#)