DETERMINING YOUR OWN LEADERSHIP STYLE

Personally I am always ready to learn, although I do not always like being taught.

Sir Winston Churchill

This chapter introduces the influence of personality and physiology on leadership dynamics. Students are introduced to various leadership and personality assessment tests. After completing the assessment tests, students are asked to write a summary essay integrating findings of their own leader and personality outcomes. This summary and the tests that precede it assist students in identifying a penchant for certain leadership styles. The assessments will assist students in understanding and relating to theories, models, and evolutionary trends in the literature.

LEARNING OBJECTIVES

1. Name and describe at least four assessments related to leadership.

2. Explain your personality type, leadership style, principles, and foundational skills as informed by leadership and leadership-related assessment instruments.

3. Produce results of at least four leadership-related assessments, and prepare and apply those results to your leadership persona.

4. Identify and distinguish your leadership style, principles, and foundational skills (both strengths and weaknesses) based on the results obtained from leadership-related assessment instruments.

5. Based on self-assessments of your personality type, leadership style, principles, and foundational skills, devise a plan to improve your weaknesses while leveraging or enhancing your strengths.

6. Critique and interpret your unique leadership persona, and relate your leadership persona with examples from your life experiences.

INTRODUCTION

Developing and utilizing a personal leadership model or plan that is efficient, effective, and efficacious starts with understanding your unique propensities of leadership. How your personality integrates with a leadership model and identifying strengths and improvement domains begin with these analyses and self-reflective exercises. It is well worth the time and effort to "know thyself." Understanding your personality is essential for effective leadership.[1] Without an understanding of self, there cannot be a clear understanding of how others perceive you as a leader. As a result, the first step in improving your ability to lead people in health organizations is to understand yourself.[2] To take that first step, gaining an understanding of your personality type, leadership style, and associated leadership skills is paramount. What you know, who you know, and, perhaps most importantly, what you know about yourself all matter![3,4] This chapter starts the journey to understanding yourself. As part of this effort, you can work to become a better leader by adding knowledge, skills, and abilities to your leadership "toolbox" by identifying your strengths, weaknesses, and propensities. This is a lifelong endeavor. Just as you have a dominant personality type (the personality you naturally have), so too do you have a dominant leadership style, a dominant conflict management style, and so forth. Even so, you can learn, practice, and master other styles, which then become part of your repertoire to lead people and manage resources. Understanding your strengths, weaknesses, and propensities is important to enable you to construct your leadership plan and model to propel your career. This is because even without your understanding them, your strengths, weaknesses, and propensities will shape your career.[5] Through understanding, you can propel your career in the direction best suited to your leadership style.

Although there are several personality and diagnostic leadership assessments available on the Internet today, we have selected four that provide a strong foundation of self-awareness. These assessment tests can give you insights into the building blocks of personality most commonly identified by peers, subordinate employees, and supervisors. Additionally, the selected tests are similar to those an employer may use as part of the hiring process for a new employee. Furthermore, any candidate applying for a new position should be ready for the face-to-face and/or telephone interview. During this conversational part of the interview, a candidate should be prepared to share personal traits and professional self-assessments with the potential employer. These may include issues regarding conflict management, decision making, problem solving, and creativity. Having a prior foundation of personal self-assessment and test outcomes will better prepare the candidate for not only personal self-awareness but also for how those self-assessments can be leveraged for success to a prospective employer and his or her organization.[6,7] Personality testing is used in the workplace to predict work-related behaviors; there is also a connection between personality traits and emerging leaders.[8] Leadership styles can be related

to particular leadership models such as transformational, transactional, and structure, relation, and change models. Eight personal work traits are important in leadership behavior: social ability, emotional intelligence, cooperation, perfectionism, endurance, creativity, self-confidence, and positive attitude.[9]

To begin your journey to understanding yourself, this chapter introduces a variety of assessment-related topics: the Jungian model (based on the research of Carl Jung, a notable Swiss psychiatrist and influential scholar for his work in personalities in the late nineteenth and early twentieth centuries), which many know as the Myers–Briggs personality indicator; introvertedness and extrovertedness (type A/B personality indicators); creative and empirical thinkers (left- and right-brain thinkers); and the propensity to lead and learn through visual, auditory, reading, or kinesthetic (VARK) constructs. Prior to completing the leadership-related assessments, you will complete the enneagram diagnostic to discern whether your personal motivational objectives mirror those of traditional leaders.

The assessments focus on the test taker's propensity and affiliation in relationship to traditional leadership or traditional managerial roles. Other assessments provide diagnostics that evaluate risk taking, charisma, vision, and empirical leadership characteristics. This chapter also discusses the constant battle a leader experiences between his or her natural predispositions and the precepts taught in leadership training and their mechanical execution. Although we do not present these tests as a panacea for leadership diagnosis, we do suggest that certain ability–job fit characteristics may become clearer after completing these self-assessments.

KNOW THYSELF: WHAT KIND OF LEADER ARE YOU?

Newt Gingrich, the former Republican Speaker of the U.S. House of Representatives, once said of former Democratic President Bill Clinton that he did not like to talk with Clinton for too long a period of time, because after a while he began to agree with him.[10] Although former White House Press Secretary George Stephanopoulos may have made this comment jovially in his book *All Too Human*, the statement was fundamentally accurate in more ways than one. President Clinton was widely admired for his natural charisma, political savvy, and social skills that inspired followership and easy friendship. The same might not be true of his spouse, former Secretary of State Hillary Clinton,[11] who has grown and matured in political

creditability through nearly two decades of on-the-job leader training coupled with personal and professional self-development. What one leader possesses intrinsically and naturally, the other honed through application of best practices and understanding of leadership styles, principles, and skills. In other words, some leaders have natural abilities, whereas others must work to learn those abilities.

All leaders, regardless of their natural abilities, experience, education, and training, must be aware of their own personal areas for improvement so that they can grow and become more successful. As a result, we ask you to consider the following questions:

- What kind of leader are you?
- What are your strengths and weaknesses?
- Are you aware of how those strengths and weaknesses support or fail to support your leadership style?

Traits of Leaders

There is an ongoing debate, within both the literature and professional practice, over whether leaders are born or made. This argument centers on the premise that those qualities that make leaders successful cannot be taught. Such qualities might include ambition, motivation, and a strong work ethic.

There is a general agreement in the literature that these qualities are inherent within individuals who emerge as leaders in the organizational workplace. Certainly, many great leaders of our time have possessed these qualities. However, qualities—or *traits*—of motivation, ambition, and work ethic are difficult to measure by themselves. Most often, proxy outcomes are assigned to these qualities as justification for their presence. Such proxy variables might include education (if the individual is motivated, he or she might pursue higher education for an advanced degree), number of hours worked, or number of jobs held at one time—all of which might lead outside agents to conclude that the individual possesses a strong work ethic. Although motivation and ambition are certainly good qualities for leaders to possess, they are not by themselves precursors to successful leader outcomes.

Take, for example, the Ponzi scheme created by former tycoon Bernard Madoff.[12] Well known as an extremely ambitious and motivated individual, Madoff became the architect of one of the greatest financial scams in U.S. history.[13] Clearly, ambition and motivation by themselves are not traits of leadership.

Another example might be Adolf Hitler. Using basic leadership theories of followership and transformation, Hitler might effectively be designated a leader through the example of his successful rebuilding of Germany after

World War I. Nevertheless, to refer to Hitler as a leader—after considering the totality of his "work"—is insulting to the profession of leadership. No, Hitler does not occupy a position in the highly regarded field of leaders. He was, at best, a despot and a dictator.[14] Leaders must be moral actors.

New leader models have emerged in the field of leadership that screen out dictators and despots from the honored study of those individuals who have earned the designation of *leader*.

PERSONALITY PROFILING IN ACTION

From 2004 through 2007, the program director of Baylor University's joint master's degree in health administration (MHA) and business administration (MBA) program conducted a series of personality assessments on members of the entering graduate class.[15,16] One of the personality self-assessments was the VARK test.[17] This self-completed survey provides users with a profile of their unique learning preferences. The scores profile an individual as having a predisposition for learning through visual, auditory, reading/writing, or kinesthetic (i.e., doing) constructs or modalities.

In the past, it was suggested that those individuals who score low in the auditory predisposition on the VARK test may have difficulty in the graduate and postgraduate settings, because oral lectures are the preferred method of delivering information in the traditional classroom. To test this hypothesis, 165 graduate students in Baylor's MHA/MBA program (approximately 41 in each class) were followed through 4 years of classroom dynamics. **Table 2–1** profiles the outcomes for these graduate students.

Table 2-1 suggests some common traits are associated with graduate students selected to attend a traditional full-time university. Although discrepancies are common, and reasonable variance is assumed between scores within the bounded rationality of standard personality diagnosis, in 2006, only two students identified themselves as having a preferred learning modality associated with listening to lectures (auditory). In the other years, the number of auditory learners was consistent and steady over time, which suggests this learning style preference might be a shared trait among graduate classes in traditional academia. Furthermore, the percentage of students who preferred the reading/writing and visual styles stayed relatively consistent over the years.

The data recorded in 2005 were unique insofar as the class had no stabilizers for auditory learning. As a result, the class as a whole often became frustrated and irascible when faced with the prospect of long lectures. The feedback received on end-of-course evaluations for professors who refused to change or modify their teaching methods from lecture to case study was extremely poor (n = 2.8 on a 5-point scale). As the program director, Dr. Nick Coppola continually made recommendations to the faculty to modify teaching styles for the benefit of the class. Those faculty members who modified their teaching practices for the second term received significantly higher end-of-course evaluations (n = 3.8 on a 5-point scale). Those faculty members who did not modify their teaching practice continued to receive poor feedback for their entire teaching year with those students. Knowing how the students learned was helpful to the professors, and it made them better educators. Health leaders can apply the same information to their leadership styles and adapt their message delivery to their subordinates' propensities.

This small example demonstrates two points. First, personality profiling does provide insights into leading people that can result in positive outcomes. Second, those professors who were savvy and aware of how their teaching practice (i.e., their leadership style) was affecting the students were able to adapt and modify situations to create win–win opportunities for both themselves and the students.

THE IMPORTANCE OF UNDERSTANDING PERSONALITIES IN THE WORKFORCE

The average worker will change jobs seven to nine times over the course of his or her career. The decision to depart a current place of employment may be based on advancement opportunities or dissatisfaction with the current work

Table 2-1 VARK Learning Outcomes at Baylor University's MHA/MBA Program (n = 164)							
VARK Test 2004		**VARK Test 2005**		**VARK Test 2006**		**VARK Test 2007**	
Aural	9	Aural	2	Aural	9	Aural	9
Kinesthetic (doing)	8	Kinesthetic (doing)	22	Kinesthetic (doing)	12	Kinesthetic (doing)	10
Read/write	8	Read/write	10	Read/write	8	Read/write	8
Visual	18	Visual	9	Visual	11	Visual	12

environment. Whatever the specific reason given, the pursuit of new leadership opportunities is often driven by the seeker's interest in matching his or her educational and work history against published criteria about a new job. However, matching only past experience and educational accomplishments will not produce a positive outcome when seeking to match skills with available openings.[18]

Personality dynamics influence success in the workplace in many ways. Performance, personal satisfaction, and outcomes are all enhanced when the employee and the work environment are in alignment—that is, when there is synchronization with personality. Synchronization is a process that includes many dimensions of an individual's abilities, such as education and experience, ability to learn, mental "hard-wiring," personality archetypes, leadership dynamics, and physical abilities.[19] Understanding the personalities of subordinates, peers, and superiors in the health organization is important for health leaders. This understanding informs the health leader of the expectations of others and provides insights into motivation, competitiveness, team building, coalition building, and interpersonal relationships and communication.

Leadership and Personality Self-Assessment

The following section identifies some of the more popular personality and leadership self-assessments available on the Internet. These sites provide free leadership and personality self-assessments that are highly commensurate with many of the private and for-profit assessments that can be purchased. In fact, for many large for-profit organizations, personality screening is a necessary precursor to being offered a position in the company. Many large-scale organizations have found that a basic interview and reference checking are just small parts of a larger interview process. Personality assessment via computerized testing is becoming more common, as organizations have realized that nearly all references provided by candidates result in positive narratives. Additionally, a favorable half-day interview may not provide the organization with a complete picture of the individual's predisposition for participatory, autocratic, and authoritarian leadership styles or level of mastery of critical leadership skills such as communication.

Many organizations are weary of the litigation potential when an individual is hired, only to be terminated for failing to get along with coworkers or adapt to existing workplace dynamics. As a result, personality self-assessment has become a piece of the overall picture of the job candidate developed by organizations prior to making a final offer of employment. As such, it is incumbent on early careerists to

not only become aware of their own personality archetype but also to gain some experience with personality assessment prior to any real-world screening process so that nervousness and second guessing do not occur during the actual corporate screening process.

Upon completing each of these personality diagnostics, the test taker is supplied with a free assessment of his or her scores by the hosting website. Although there are often no right or wrong answers, and all tests are subject to issues of reliability and validity, many of these assessments, if taken consistently over the period of weeks or months, will provide similar responses over time.

Drs. Ledlow and Stephens suggest that in the university course setting, four to six self-assessments should be completed, based on the learning outcomes of the course. Upon completing these assessments, you should write a two- to three-page integrated self-assessment based on the diagnostic outcomes. This essay should list professional strengths for the career field that the test taker is about to enter, as well as areas of potential professional development where weaknesses are identified. One last note: Everyone—leader and follower alike—has weaknesses and areas of career and professional performance that can be improved.

The following section is exciting and fun but can also be scary and anxiety provoking. The goal is to "know thyself" as a health leader and to learn to identify and leverage your strengths while shoring up your weaknesses to create more potential for great leadership—your great leadership—in the health industry. The assessments can be found at the reference attached to each section's heading.

LEADERSHIP AND PERSONALITY ASSESSMENTS

Emotional Intelligence[20]

Emotional intelligence (EI) is the subset of social intelligence that involves the ability to monitor one's own and others' feelings and emotions, to discriminate among them, and to use this information to guide one's thinking and actions. "This big idea is that success in work and life depends on more than just the basic cognitive abilities typically measured by IQ tests and related measures; it also depends on a number of personal qualities that involve the perception, understanding, and regulation of emotion."[21] Two pieces of EI are energy and maturity. Energy is the liveliness and stamina with which people approach their work. Maturity is described as people's refinement, social graces, tact, capacity to grow and change, and ability

to interpret signals from others. Both of these elements contribute to EI. It is important to be aware of your inner emotional self so that you can conduct yourself in the best manner when managing others.[22]

EI is one of the more difficult concepts for individuals to understand, improve, and master. It is based on a variety of nonintellectual factors that can influence behavior. Some leaders are unaware of how their EI affects their superiors and subordinates. In fact, many individuals will reassign negative outcomes and behaviors to those around them and be completely unaware of their personal effect on others' actions.[23,24]

EI is a relatively new concept in leadership, having only been studied since the early 1980s.[25] Many definitions of EI can be found in the literature. Notably, the Institute for Health and Human Potential defines EI as the ability or capacity to perceive, assess, and manage the emotions of oneself and of others. EI might also be thought of as having "street smarts." Street smarts are those characteristics most often possessed by highly charismatic leaders that allow them to exercise savvy and poise in controlling relationships among outside agents and stakeholders. Executives possessing this ability have a better understanding of how to manage the complex relationships in teams and foster positive relationships with rivals while attaining control and collegiality among organization members. Fostering EI in organizations and teams is an essential factor in successful organizations and should not be overlooked.[26]

The four salient constructs of the emotional intelligence model are (1) self-awareness, (2) self-management, (3) social awareness, and (4) social skills.[27] These constructs are slanted toward the relational or "art" aspect of leadership. At the same time, these constructs can and should merge to form a secondary level of "intelligence" that is ever present and that monitors the technical and relationship orientations of the leader. Conscious engagement and mastery leads to subconscious implementation; this is the internal gyroscope that many successful leaders learn to depend on. "Those who use the emotional intelligence framework to guide their thoughts and actions may find it easier to create trust in relationships, harness energy under pressure, and sharpen their ability to make sound decisions—in other words, they increase their potential for success in the workplace."[28] The dynamic culture leader connects the four EI constructs with this "internal gyroscope" to analyze him- or herself and the organization and to merge the appropriate levels of science and art in creating an organizational culture that can withstand everchanging environmental challenges.[29]

SOCIAL COMPETENCE AND LOCUS OF CONTROL

The other important skill area to develop is social competence, which includes such attributes as social awareness, collaboration, empathy, and teamwork. Dye suggests that in order for EI to flourish, an early careerist needs to take an integrated approach to self-awareness, which includes drawing simultaneously from both social and personal outcomes and experiences.[30] The key, then, is to cultivate and sustain a high level of both personal and social competence and then to develop strategies for identifying and responding appropriately to behavioral patterns in the environment. This is done through personal self-perspective by simply monitoring reactions and emotions in the environment and leveraging personal behavior and visceral instincts accordingly. These efforts can also be gauged by interpreting the reactions of those around you. For example, each workplace develops a certain tone and tenor based on the personnel who work there. Some may respond in unexpected ways consistent with certain styles and behaviors of management. The socially competent leader will know how to adjust his or her level of autocratic, intimate, participative, and interpersonal communication with others in a manner that predicts and fosters workplace behavior over time. This reflects what is called *locus of control*.

Persons with a high locus of control are able to process, receive, and transmit information absent of emotional content. For example, an individual who worked very hard on a business case analysis that was not approved by his or her boss during a large staff meeting should refrain from an emotional outburst in front of other staff members. Likewise, leaders with a high locus of control would refrain from displaying a threatening demeanor when asked to support positions of contention in an organization where subordinate employees have a differing opinion.

Within the health professions, having a high locus of control can be important when discussing such volatile issues as end-of-life care and right-to-life issues. Leaders in the health profession must possess the sensitivity to recognize certain intangible elements in bio- and clinical ethics that are both ineffable and important to the success of a nonpartisan leadership.

Although seemingly suggesting "common-sense" workplace activities, leaders who fail to maintain a high locus of control and control their instinctive emotions eventually can become workplace hazards to themselves and the employees they supervise.

Hemisphere Dominance[31]

The hemisphere dominance personality assessment indicates the brain hemisphere (right or left) that dominates in the test taker. Most professionals are aware there is a dominant side of the brain; however, these same professionals are often unaware of the influence this hardwiring has on the day-to-day activities of professional performance. For example, "right-brained" individuals tend to be more creative. Professionals with dominant right brains may be best suited for creating new product and service lines, developing long-range strategic plans, and forecasting threats on the environmental horizon. In contrast, "left-brained" individuals are more detail oriented, methodical, and calculating. They prefer implementing strategic plans to developing them. Although it is difficult to change one's predisposition for creativeness versus detail orientation, creative thinkers can make specific adjustments in their daily business of work to become more organized, whereas more concrete thinkers can exercise creative elements of their brain by engaging in more creative arts such as writing, music, or painting.

Jungian Assessments[32]

Scholars have suggested that all individuals are born with a personality archetype. Over the years, family, society, and the environment all exert influences on this archetype. Working professionals should be aware of their natural predispositions (as measured by Jungian assessments) so that certain characteristics can be leveraged or weaknesses avoided. The most popular assessment of this kind is the Myers–Briggs Type Indicator (MBTI), which has been a reliable source of documenting personality since World War II. The MBTI focuses on four dimensions of personality: extraversion or introversion, sensing or intuition, thinking or feeling, and judging or perceiving;[33–36] "[T]he four opposing dimensions are extroversion-introversion, sensation-intuition, thinking-feeling, and judgment-perception."[37] (Two preferences are identified in each dimension.) The MBTI results indicate the test taker's preferred style and remain fairly stable throughout a person's career.

Extroverts prefer the company and collaboration of teams, whereas *introverts* prefer comfort zones that involve the interaction of just a few people. Extroverts tend to be "charged" by other people and interaction with others, whereas introverts tend to be "charged" by quiet reflection and isolated activities. Extroverts can be alone and function very well, just as introverts can be with other people for long periods and function very well. Extroverts tend to be more assertive, whereas introverts have refined listening skills.

Sensing individuals seek empirical affirmation from the environment—that is, reassurance that history plays a critical role in today's decision and will impact tomorrow. *Intuitive* personality types prefer more latent cues from the environment for decision making and, at the extreme, ignore the past.

Thinking individuals tend to be very strong at execution, whereas the strength of *feeling* individuals resides with interaction. Logic and cause-and-effect reasoning are valued by the thinking profile, whereas emotion and the impact of decisions on the organization are important to the feeling-oriented individual.

Judging people carefully weigh all of the options and alternatives. They tend to be more structured in their approaches to implementation. In contrast, *perceiving* individuals find confidence in their own heuristics (rules of thumb with which to make decisions) and prior knowledge for decision making. Perceiving individuals tend to be more spontaneous.

Type A and B Personality Indicators[38]

In the 1940s and 1950s, when personality archetypes and behavior theories were emerging as seminal fields of study to add to the trait theory literature, it was posited that people were hardwired to fit into one of three neat, clear-cut predispositions for the purposes of personality classification—namely, Type A, Type B, and Type A/B individuals.[39]

Type A individuals are competitive, inquisitive, and easily bored with routine; they have a "short fuse," often feel impatient, and may be aggressive. These individuals may also have a difficult time relaxing, staying focused on details, and maintaining stability in any one place for long periods of time. Type B people are the direct opposite: They can relax easily, tend to maintain focus on activities and projects, see stability as comforting, and can be perceived as more social and easygoing.[40] Type A/B individuals may present characteristics of both personality traits and present characteristics in either dimension depending on environment, circumstance, and mood. Type A/B personalities are said to be balanced personalities and can find comfort in a variety of situations.

Although there is no direct evidence that any of the personal predispositions aids in leadership development and success, a growing body of work suggests that Type A individuals have higher burnout and mortality rates.[41]

There is general agreement in the literature that individuals are predisposed to present behaviors in either the Type A or B modality. Even so, it may be possible for individuals to switch over and mimic personality characteristics and behaviors of the other dynamic based on their education, work stimulus, and coping skills.

Knowing which archetype best defines an individual creates leverage in the workplace. Successful Type B individuals will know when to "turn on" and become excited and committed to projects and ventures. This posture can be mimicked until the work is completed. Likewise, Type A individuals can present a high locus of control and know when to mitigate their own emotions and instincts to perform more cooperatively in group work and interdisciplinary team dynamics.

THE VARK TEST[42]

As mentioned earlier in this chapter, a VARK assessment provides insight into an individual's predisposition toward a particular learning style. Most people have a dominant learning style, a secondary style, a tertiary style, and a least preferred style. Some individuals may also have high abilities in more than one style. Although the VARK test may seem somewhat oriented to university education, all organizations have a set of continuing education and professional development competencies that must be achieved for an individual to advance or maintain employment in the workplace. By knowing which specific modality fosters a higher learning outcome for him- or herself, an individual can maximize use of his or her discretionary time to focus on those events that promote the greatest transfer of information. Such examples of different professional development activities might include on-site conferences, webinars, distance learning, traditional education, and personal self-development through reading, listening to audiobooks, or working on computer-based problems or games.

Although learning styles change over time, prudent early careerists will conduct a personal self-assessment of their own preferred learning modality. It is important for young leaders to know that potential organizations may or may not appreciate individual learning styles. For example, if an individual is an auditory learner in an organization that emphasizes verbal communication, the probability for successful synchronization between that individual and the organization should be enhanced. Conversely, an auditory learner in an environment where mass reading of policy and procedure statements is necessary may not fare as well. Thus health leaders should be aware of their preferred methods of learning—that is, whether they emphasize visual, aural, reading, or kinesthetic traits. Other assessments use the terms *visual verbal* (reading), *visual nonverbal* ("visual" referring to pictures, figures, and graphs), *auditory* (aural), and *learning by doing* (kinesthetic) to describe the learning style preferences. Collectively, these characteristics are referred to as VARK.[43,44] *Visual learners* prefer graphs, pictures, and flowcharts to help them understand complex phenomena. These learners feel most comfortable surrounded by blueprints and matrixes but may be distracted by debates and decision discussions.

Aural learners are stimulated by conversation and debate. These learners may often be more interested in the discussion of decision making than decision making itself. They "think out loud" and may often use other employees as sounding boards for new ideas.

Reading and writing (R/W) learning preference is a common characteristic among healthcare executives. These individuals prefer cross-referencing written material, writing summaries, and emailing thoughts. They do well with complex tasks and multitasking.

Kinesthetic learners require practical exercises, a hands-on approach, or meticulous simulation to learn efficiently. These learners prefer learning through experience to alternative preparatory methods. However, they are rapid processors of information in an on-the-job environment. Kinesthetic learners are also more comfortable with ambiguity.

THE NEW ENNEAGRAM TEST[45]

Enneagrams are said to be natural encodings in the neural tissue of the brain that provide a physical predisposition to behave in a certain way based on environmental stimulus. Similar to left- and right-brain dominance, the way in which each brain forms relationships within itself to process information is unique.[46] As a result, it is incumbent on health leaders to be aware of these visceral tendencies to see if there is any opportunity for professional development or self-awareness.

Enneagrams identify the test taker's natural inclination toward behavior. The results can be classified into nine primary constructs or types: Reformer, Helper, Motivator, Romantic, Thinker, Skeptic, Adventurer, Leader, and Peacemaker.[47–51]

The *Reformer* is the perfectionist and obedient child who must do everything right. Individuals with this tendency prefer that others get along with them and prefer to dictate terms in groups and interdisciplinary teams. This behavior stands in contrast to that of the *Helper*, who will seek to engage in supportive relationships with others to gain favor and acceptance.

The *Motivator* is the high achiever who seeks to pull those around him or her toward success. The Motivator may not try to conform those around him or her to his or her own standards of excellence; rather, the Motivator will pull those in his or her inner circle toward goals and objectives.

The *Romantic* strives for warm and collegial connections with those in the workplace. Words of approbation are very important to the Romantic, because individuals with this tendency do not thrive in a critical atmosphere. The Romantic may work well in small groups of known colleagues but may have difficulty in new environments.

The *Thinker* sees the world as "overstimulating" and confusing and will need privacy to contemplate actions in the environment. Type B personalities are most often Thinkers. Thinkers will often be plainspoken and direct, and they sometimes communicate without tact. However, they are often detail oriented and factually accurate. They leave little room for discrepancy or speculation. When a Thinker finally speaks, there often is little room for alternative positions and opinions.

The *Skeptic* is eager to investigate life and propositions. Skeptics, sometimes called "Challengers," have a great lust for life and a keen intellectual curiosity. They are most often Type A archetypes, challenge institutionalism, and may demonstrate creative and right-brain thinking. At the same time, they have a need for social integration and can be tactful and wary of irritating relationships.

The *Adventurer* wants excitement, pleasure, and fun. Individuals in this category see work as a game; however, they can have difficulty organizing activities and projects themselves. They prefer stimulating conversation to the labor of work, and they prefer to be the center of attention without taking responsibility. The Adventurer is an odd mix of a charismatic personality coupled with a degree of avoidance behavior. He or she may be the "idea person" in the organization who wants someone else to produce the concepts that he or she has suggested. A difficult archetype to pin down, the Adventurer may succeed best when surrounded by talented subordinate personnel.

The *Leader* archetype is not always presented in some assessments, because researchers believe that the leadership construct is a composite of several modalities coupled with environmental opportunities. However, in many enneagram tests, the Leader may not be the individual who inspires followership or who occupies a director role in project management; rather, the Leader in this case may be called the "Asserter." Asserters have strong personalities and are direct, self-reliant, and seemingly unfettered by the opinions of those around them. At the same time, the Leader can be supportive of those close to him or her.

Peacemakers do not want to be part of the spotlight, nor do they think of themselves as important or special to the group dynamic. They tend to avoid prominent leadership roles and prefer to "hide in plain sight" by neither confronting antagonists nor supporting commonly agreed-upon direction. Far from being lazy, the Peacemaker can provide a neutral sense of direction between competing priorities and introduce new ones if carefully coddled and treated well within the group dynamic.

DYNAMIC CULTURE LEADERSHIP ALIGNMENT ASSESSMENT[52]

Individual assessment is important, as is a leadership team evaluation. An accurate assessment can yield many positive results, including the ability of the team to better align itself to bring real diversity of style, skills, experience, and abilities into the health organization. In this model, cultural and individual diversity are valued because they enable the organization to better respond to dynamic organizational and external environments. A diverse leadership team brings robustness to solving organizational problems, as long as focus and adherence to team goals are maintained.

An assessment that looks at leadership as a team—across organizational levels, operating environments, and external environment needs—is especially valuable.[53] This assessment intends to evaluate the leadership styles and propensities of the leadership group of an organization, the organization's operating style, and the perceived external environment expectations of the organization. It can also be used as an individual assessment for leadership, management, technical (science) and art (relationships) propensities, communication, planning, decision alignment, employee enhancement, and knowledge management constructs.

Figures 2–1 and **2–2** illustrate the use of such an assessment tool for a leadership team of a hospital. Two continua are defined: leadership–management and science–art. The leadership–management continuum provides a method to quantify a person's propensity for leadership behaviors/functions or management behaviors/functions. The science–art continuum assesses leaders in terms of their preferences for technical skills and abilities (science), such as forecasting, analysis, budgeting, decision making, and related capabilities, by comparing them to relational skills and abilities (art), such as interpersonal relationships, team building, and related capabilities.

The reliability of the assessment tool and model is moderately strong in Figures 2-1 and 2-2, which illustrate the results with a sample size of 85 leaders from four different hospitals, two different university colleges, and a U.S. Army Medical Department Regional Command
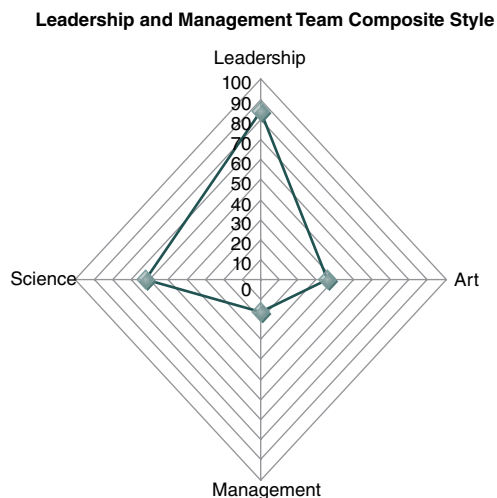
Leadership and Management Team Composite Style

FIGURE 2-1 Dynamic culture leadership assessment: Community hospital leadership team style.

Ledlow, G., & Cwiek, M. (2005). The process of leading: Assessment and comparison of leadership team style, operating climate and expectation of the external environment. *Proceedings of Global Business and Technology Association.* Lisbon, Portugal: Global Business and Technology Association.

(Department of Defense). Graduate students (a total of 58) have taken this assessment as well. Thus the total number taking this assessment for purposes of internal reliability is $n = 143$. Although this is not a very large number, early results with this tool appear promising. The preliminary internal reliability and internal consistency measures are near or above reasonable levels; for example, Cronbach's coefficient alpha measures were between 0.68 and 0.89 (where 0.7 is reasonable for the social sciences and 0.77 is strong or good) for the constructs of the model.

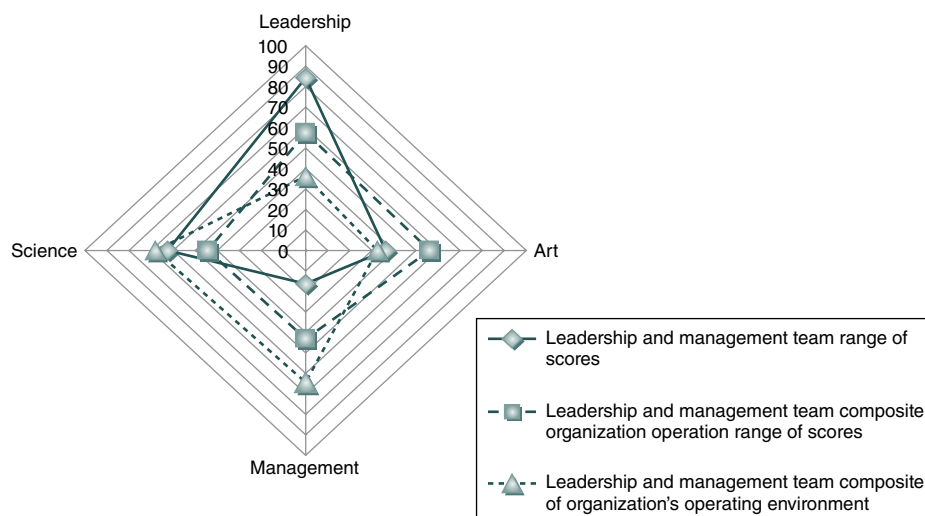**Comparison of Team Style, Actual Organization Operation Style, and Required Environment Style**

FIGURE 2-2 Dynamic culture leadership assessment: Comparison of leadership team style, operating style, and external environment requirements for a community hospital.

Ledlow, G., & Cwiek, M. (2005). The process of leading: Assessment and comparison of leadership team style, operating climate and expectation of the external environment. *Proceedings of Global Business and Technology Association.* Lisbon, Portugal: Global Business and Technology Association.

STUDER GROUP[54]

The Studer Group is a leadership and organizational consulting firm with a large hospital clientele. The Leader as Coach assessment is a quick evaluation of the test taker's coaching propensity. The test instrument groups the assessment outcomes into one of three categories: high, middle, or low coaching capability.

OTHER LEADERSHIP ASSESSMENTS

Many other leadership and leadership-related assessments are available on the Web; however, health leaders must be able to separate research-based assessments from those that are not empirically based. Does the assessment discuss or reveal internal consistency or reliability measures such as Cronbach's coefficient alpha (where 0.7 is reasonable, 0.77 is good, 0.8 to 0.89 is very good, and 0.9 and higher is excellent) or other measures of the assessment's credibility? Does the assessment have ecological validity or does it make sense or justify the real world?

Another way to look at the value of an assessment tool is in terms of its usefulness. An assessment's usefulness is in question if decisions, increased knowledge, or increased self-awareness cannot be achieved through use of the assessment. Of course, some assessments are wonderful as "ice breakers" to get subordinates, peers, superiors, and multilevel groups to talk about themselves and learn about others with whom they work in the health organization. Some assessments are great ways to encourage people to open up at meetings where they do not know one another very well, for early stages of team building, and other group activities where people must "gel" to accomplish a task or a set of tasks.

Can you distinguish research-based assessments and useful assessments from fun or icebreaker assessments? The following assessments are presented for your review.

Leadership Diagnostics[55]

This assessment is more speculative in nature. It evaluates a leader's potential to be a "twenty-first-century leader" based on several constructs such as team building.

Anthony J. Mayo[56]

This assessment determines whether the test taker is one of three leadership types: the entrepreneur, the manager, or the charismatic. Based on a book about brilliant leaders, it compares the test taker to successful contemporary leaders from several industries.

Dale Kurow[57]

This assessment evaluates leadership skills from a direct superior-to-subordinate basis. Also, individual leadership questions support the evaluation for this dichotomous assessment.

Price Group[58]

Are you more of a leader or a manager? This assessment tries to answer this question based on a series of skills- and actions-based questions.

THE RELATIONSHIP BETWEEN PERSONALITY ARCHETYPE AND LEADERSHIP

The research is in agreement that personality archetypes do affect leadership style, success, and outcomes in the workplace.[59–61] Although difficult to manage without a high degree of self-awareness, the first step in any leadership development process is to recognize potential weaknesses or areas for improvement. Some of this understanding will come with experience. Other professional development areas will present themselves with personal self-recognition. This chapter has provided some tools for the latter kind of diagnosis.

By the time many students get to college, they have already established certain predispositions toward one or more of the personality archetypes presented in this text. Simple predispositions may be perceived as habits at first, such as reading alone or studying to music. These habits, or preferred predispositions, may provide clues to early discovery of mental hardwiring. Social networking and competing in sports and intramurals may suggest a tendency toward Type A behavior, whereas preferring the company of small groups of intimate friends and social clubs may suggest a predisposition for Type B behaviors.

If an individual aspires to become a CEO of a large and munificent healthcare organization and is predisposed to Type B personality traits, he or she must either reconsider entering a career field where high external presence is mandatory or gradually exercise those areas of his or her personality that may be lying dormant but are open to cultivation. Remember, leadership styles, knowledge, skills, and abilities can be learned as well as enhanced. Malcolm Gladwell, in his book *Outliers: The Story of Success*, suggests that 10,000 hours of practice, experience, trial and error, and self-discovery are required to become a master or an

expert in anything, with rare exception to this standard.[62] Gladwell also states that the average graduate student has an intelligence quotient (IQ) of 115 or higher[63]; this point suggests that you are intellectually poised to learn and master health leadership whether you are innately gifted or just willing to learn.

STRATEGIES TO MAXIMIZE YOUR NATURE-VERSUS-NURTURE LEADERSHIP STATE OF BEING

Numerous strategies are available to early careerists to help them cultivate dormant personality capabilities. For example, joining professional organizations is critical for success, because they provide opportunities for exercising leadership skills in closed and friendly environments that may not have direct visibility in the workplace. For instance, if an individual is predisposed to be a Skeptic, volunteering to support a continuing health education event with a local professional organization can provide the opportunity to be a Follower without the pressure of being scrutinized in terms of professional outcomes that may end up in a performance appraisal in the workplace. The classroom setting is uniquely suited for trial and error; mistakes are used to learn and improve rather than having negative career implications. Take advantage of the classroom environment to practice leadership by volunteering for group leader roles, community service project leadership, and similar opportunities. Find ways to lead people in a useful endeavor and to manage resources in useful endeavors; build up your experience to achieve the 10,000 hours of practice!

Within the workplace, early careerists can seek out professional mentors who are not in their direct supervisory chain to provide both education and candid professional development advice from a nonperformance-appraisal perspective. Although joining a professional organization may provide an opportunity for mentorship, many large organizations now have formal mentor programs where mentees can be paired up with volunteer mentors in a structured environment.

Self-development and self-directed learning may be the easiest method for individuals to gain a perspective on how to develop and cultivate dormant leader traits. Many professional development books include self-diagnostic scales that provide tools and strategies to augment leader skills.

Finally, the value of self-awareness and acceptance cannot be underscored enough in this chapter. Although none of the assessments in this chapter is by itself a 100% valid and reliable predictor of personality traits and leadership skills, each should be considered one part in your personal puzzle. The synthesis of these assessments should form an initial picture of your current situation—a situation you can improve and develop into becoming a great health leader. To ignore these assessments because you are not pleased with the outcome is essentially tantamount to ignoring your own potential.

USING WHAT YOU LEARN ABOUT YOURSELF

What do you do once you learn about your personality, your strengths, and your weaknesses? The important reality is this: You can learn, adapt, improve, and change to be a better leader. Several theories and models, presented in this text, can help you develop a plan to become a better leader; in essence, that is what this text is about. It is about assisting you to be a better leader. For example, goal-setting theory is a great framework to use to set goals for yourself, and your motivation will spur you on to achieve your goals. Another theory, the theory of planned behavior (TPB), is a framework to assist you in improving, once you know yourself.

TPB was proposed by Icek Ajzen in 1985 in his article "From Intentions to Actions: A Theory of Planned Behavior." According to the theory, human action is guided by three kinds of considerations: beliefs about the likely outcomes of the behavior and the evaluations of these outcomes (behavioral beliefs), beliefs about the normative expectations of others and motivation to comply with these expectations (normative beliefs), and beliefs about the presence of factors that may facilitate or impede performance of the behavior and the perceived power of these factors (control beliefs).[64] The theory was developed from the theory of reasoned action, which was proposed by Martin Fishbein together with Icek Ajzen in 1975. This theory was grounded in models dealing with attitudes such as learning theories, expectancy-value theories, consistency theories, and attribution theory.[65] The addition of the construct of perception of behavioral control differentiates the theory of reasoned action from TPB. Ajzen's three considerations are crucial in improvement (including self-improvement, as is the context in this chapter), leading projects, and directing programs when changing people's behavior.[66]

In order to apply TPB to your leadership improvement project, the key constructs or concepts are salient. The theory of planned behavior helps to clarify how to change the behavior of people. TPB predicts deliberate behavior, because behavior can be deliberative and planned as opposed to purely spontaneous.[67] As shown in **Figure 2–3**, TPB posits that individual behavior is driven by behavioral
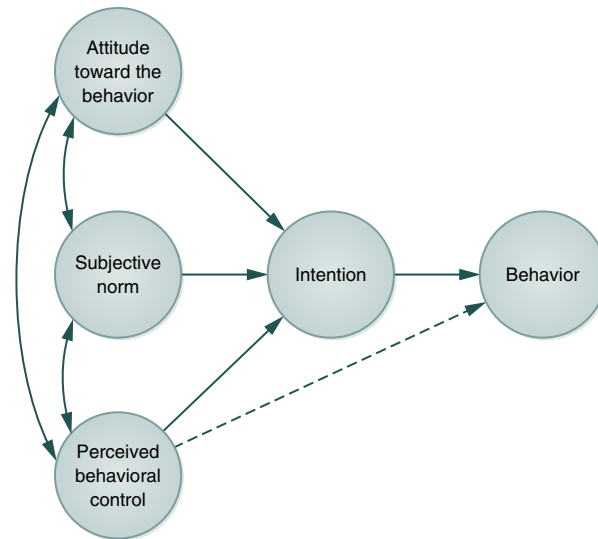
FIGURE 2-3 Theory of planned behavior.

Reprinted from *Organizational Behavior and Human Decision Processes*, 50, Ajzen, I. (1991). The theory of planned behavior, Pages 179-211, Copyright 1991, with permission from Elsevier.

intentions, where behavioral intentions are a function of an individual's attitude toward the behavior, the subjective norms surrounding the performance of the behavior, and the individual's perception of the ease with which the behavior can be performed (behavioral control). Attitude toward the behavior is the individual's positive or negative feelings about performing a behavior. The subjective norm is an individual's perception of whether people important to the individual think the behavior should be performed. Behavioral control is defined as one's perception of the difficulty of performing a behavior.[68] Goal-setting theory can reinforce TPB by setting goals to obtain a specific behavior within an organization, whether it be a health

behavior, human actions, or adopting a new technology, or a way of improving yourself and your leadership competence, styles, or behaviors. Basically, once you determine what to improve, you determine how to improve, surround yourself with those leaders who can reinforce your improvement plan, and implement your improvement plan. That is, in essence, the theory of planned behavior.

In applying the theory of planned behavior, identify your attitudes, the subjective norms (of your colleagues that influence you), and your perceived behavioral control, and then devise an improvement plan. Once you have a plan and goals, work toward achieving your goals. Knowing yourself is the first step.

SUMMARY

This chapter provided a small sample of minimal diagnostic self-examinations that provide usable information for professional development in a course setting. Although the authors do not recommend taking all of these assessments, when completed under the supervision of your course director, these evaluations will support the learning outcomes of your program.

Following successful completion of several of these assessments, you should conduct an analysis and look for trends and patterns that may reveal areas of personality dominance or personality void. You may then write a paper integrating your personal findings into one composite essay. The final essay

should include a personal plan to hone existing traits while also cultivating knowledge, skills, and abilities that may present themselves for development later. Ideally, the course director, executive in residence, or professional community leader will sit down with each student and provide a mentoring session aimed at leadership and career success.

Strong personalities with high levels of education dominate the health environment. As a person progresses up the corporate ladder, he or she will encounter new and different personality types at all levels. Leaders will most likely have to develop different personality skill sets to foster and cultivate relationships in the various environments

in which they work. Traits associated with all types of leadership roles include integrity, honesty, the development of goals, and motivational skills.[69] Knowing oneself will provide an edge for success and a platform for improvement

and mastery of leadership. Lastly, the theory of planned behavior provides a framework to think about, plan, and then improve your leadership behaviors, competencies, and ultimately, your organization's performance.

DISCUSSION QUESTIONS

1. Describe four leadership, leadership-related, or personality assessments that were most informative for you. Did other students select the same assessments? Why or why not?
2. Distinguish the various typologies (categories) used in personality assessments and personality archetype assessments, and explain the differences associated with the various types.
3. Relate two or more assessments from this chapter to your personal situation: Were the assessment results complementary or contradictory? Why do you think these results occurred?

4. From the assessments (two or more), identify the health leader most appealing to you (a real leader or a fictitious one whom you create). Using the assessments' constructs and typologies, why is that health leader appealing?
5. Compile and categorize your assessment results, summarize the results, and tell the group your plan for leadership mastery.
6. Appraise the empirical strength of the various assessment instruments, critique two or more assessments, and justify your critique.

EXERCISES

1. In two pages or less, name and describe at least four assessments related to leadership you used.
2. In a three-page essay, explain your leadership style, principles, and foundational skills as related to leadership assessment instruments, using at least four assessments.
3. Produce results of at least four leadership-related assessments, apply those results to your leadership persona, and attach the results to your three-page essay from Exercise 2.
4. In a two-page document attached to your essay and results document, identify and distinguish your leadership style, principles, and foundational skills strengths and weaknesses based on your leadership-related assessments' results.

5. Based on self-assessments of your personality style, leadership style, principles, and foundational skills, devise a plan to improve your weaknesses while leveraging or enhancing your strengths. Add this work to your essay, results, and strengths and weaknesses document.
6. In a two- to three-page document, critique and interpret your unique leadership persona, and relate your leadership persona to examples from your life experiences. Attach this work to your previous work. Return to and read this document once a month until you have achieved your goals for improving your leadership capabilities.

REFERENCES

1. Johnson, P. (2012). *Unstoppable leadership: Changing your relationships, thinking and influence*. New York: Global Next Publications.
2. Didato, S. V. (2012). *Who are you? Test your personality (know yourself)*. Boston: Black Dog and Leventhal.
3. Mitra, B. (2012). Personality development and soft skills. London: Oxford University Press.
4. Ledlow, G., & Cwiek, M. (2005, July). The process of leading: Assessment and comparison of leadership team style, operating climate and expectation of the external environment. *Proceedings of the Global Business and Technology Association*. Lisbon, Portugal: Global Business and Technology Association.
5. Clark, K. D., & Waldron, T. (2016). Predictors of leadership behavior in early career white-collar professionals: The roles of personal characteristics and career context. *Journal of Leadership & Organizational Studies*, *23*(1): 27–38, first published on May 26, 2015.

6. Tuber, S. B. (2012). *Understanding personality through projective testing*. Plymouth, UK: Jason Aronson.

7. Coppola, M. N., & Kerr, B. (2012). Your post-military career: Getting the job you want! *American Academy of Medical Administrators (AAMA) Annual Conference*, Boston.

8. Bergman, D., Lornudd, C., Sjoberg, L., & Von Thiele Schwartz, U. (2014). Leader personality and 360-degree assessments of leader behavior. *Scandinavian Journal of Psychology*, *55*(4), 389–397. doi: 10.1111/sjop.12130

9. Bergman et al., note 6a, p. 391.

10. Stephanopoulos, G. (1999). *All too human: A political education*. Boston: Little, Brown.

11. Kellerman, B. (2008). Leadership lessons from Hillary Clinton's election results. Harvard Business Review Blog Network. Retrieved from http://conversationstarter.hbsp.com/2008/02/leadership_lessons_from_hillar.html.

12. Healy, J. (2009, June 29). Madoff is sentenced to 150 years for Ponzi scheme. *New York Times*. Retrieved from http://www.nytimes.com/2009/06/30/business/30madoff.html?_r=1&hp.

13. Lambiet, J. (2008, Dec. 12). Bernie Madoff's arrest sent tremors into Palm Beach. *Palm Beach Daily*. Retrieved from http://www.palmbeachdailynews.com/news/content/news/2008/12/12/ponzi1212.html/

14. Coppola, M. N. (2004). A propositional perspective of leadership: Is the wrong head on the model? *Journal of International Research in Business Disciplines*, *11*, 620–625.

15. Coppola, M. N. (2008). *Observations and outcomes of graduate students based on VARK profiling* [white paper]. San Antonio, TX: Fort Sam Houston.

16. Coppola, M. N., Kerr, B. J., Ledlow, J. R., & Fulton, L. V. (2010, Nov. 10). Using the VARK learning test to optimize delivery of health administration course content and competency fulfillment. Association of University Programs in Health Administration Annual Conference [webinar].

17. Fleming, N. D., & Mills, C. (1992). Not another inventory, rather a catalyst for reflection, to improve the academy. *Academy of Management Journal*, *11*, 137.

18. Coppola, M. N., & Carini, G. (2006). Ability job-fit self-assessment. *Healthcare Executive*, *21*(2), 60–63.

19. Coppola & Carini, note 15.

20. Queendom. (n.d.). Emotional intelligence test. Retrieved from http://www.queendom.com/tests/access_page/index.htm?idRegTest=1121.

21. Ybarra, O., Kross, E., & Sanchez-Burks, J. (2014). The "big idea" that is yet to be: Toward a more motivated, contextual, and dynamic model of emotional intelligence. *Academy of Management Perspectives*, *28*(2), 93–107, p. 93. Doi:10.5465/Amp.2012.0106

22. Dye, C. F. (2010). *Leadership in healthcare, essential values and skills* (2nd ed.). Chicago, IL: Health Administration Press.

23. Kluemper, D. H. (2008). Trait emotional intelligence: The impact of core self-evaluations and social desirability. *Personality and Individual Differences*, *44*(6), 1402–1412.

24. Smith, L., Ciarrochi, J., & Heaven, P. C. L. (2008). The stability and change of trait emotional intelligence, conflict communication patterns, and relationship satisfaction: A one-year longitudinal study. *Personality and Individual Differences*, *45*, 738–743.

25. Gardner, H. (1983). *Frames of mind*. New York: Basic Books.

26. Cherniss, C., & Adler, M. (2000). *Promoting emotional intelligence in organizations*. Washington, D.C.: American Society for Training and Development.

27. Lanser, E. G. (2000). Why you should care about your emotional intelligence: Strategies for honing important emotional competencies. *Healthcare Executive*, *15*(6), 7–9.

28. Lanser, note 23, p. 9.

29. Ledlow & Cwiek, note 4.

30. Dye, note 18.

31. Mind Media. (n.d.). Left brain right brain test. Retrieved from http://www.mindmedia.com/brainworks/profiler.

32. HumanMetrics. (n.d.). Jung typology test. Retrieved from http://www.humanmetrics.com/cgi-win/JTypes2.asp.

33. McCrae, R. R., & Costa, P. T. (1989). Reinterpreting the Myers–Briggs Type Indicator from the perspective of the five-factor model of personality. *Journal of Personality*, *57*, 17–40.

34. Boyle, G. J. (1995). Myers–Briggs Type Indicator (MBTI): Some psychometric limitations. *Australian Psychologist*, *30*, 71–74.

35. The Myers & Briggs Foundation. (2012). Retrieved from http://www.myersbriggs.org.

36. Harvey, R. J. (1996). Reliability and validity. In A. L. Hammer (Ed.), *MBTI applications* (pp. 5–29). Palo Alto, CA: Consulting Psychologists Press.

37. Fretwell, C. E., Lewis, C. C., & Hannay, M. (2013). Myers–Briggs Type Indicator, A/B personality types, and locus of control: Where do they intersect? *American Journal of Management*, *13*(3), 57–66, p. 58. Retrieved from http://t.www.na-businesspress.com/AJM/FretwellCE_Web13_3_.pdf.

38. Goolkasian, P. (n.d.). Personality type A/B. Retrieved from http://www.psych.uncc.edu/pagoolka/TypeAB.html.

39. Jenkins, C. D., Zyzanski, S. J., & Roseman, R. H. (1971). Progress towards validation of a computer-scored test for the Type A coronary-prone behaviour pattern. *Psychosomatic Medicine*, *33*, 193–202.

40. Kuiper, N. A., & Martin, R. A. (1989). Type A behavior: A social cognition motivational perspective. In G. H. Bower (Ed.), *The psychology of learning and motivation: Advances in research and theory* (Vol. 24, pp. 311–341). New York: Academic Press.

41. Friedman, M., & Rosenman, R. H. (1974). *Type A behavior and your heart*. New York: Knopf.

42. VARK. (n.d.). The VARK questionnaire. Retrieved from http://www.vark-learn.com/english/page.asp?p=questionnaire.

43. Fleming, N. D. (2001). *Teaching and learning styles: VARK strategies*. Honolulu, HI: Honolulu Community College.

44. Leite, W. L., Svinicki, M., & Shi, Y. (2010). Attempted validation of the scores of the VARK: Learning styles inventory with multitrait–multimethod confirmatory factor analysis models. *Educational and Psychological Measurement*, *70*, 323–339.

45. 9types.com. (n.d.). The new enneagram test. Retrieved from http://www.9types.com/newtest/homepage.actual.html.

46. Riso, D. R., & Hudson, R. (1996). *Personality types: Using the enneagram for self-discovery*. Boston, MA: Houghton Mifflin.

47. Palmer, H. (1995). *The pocket enneagram: Understanding the 9 types of people*. San Francisco, CA: Harper Press.

48. Putnoi, J. (2000). *Senses wide open*. Berkeley, CA: Ulysses Press.

49. 9types.com. (n.d.). The nine types. Retrieved from http://www.9types.com/index.php.

50. Eclectic energies. (n.d.). Introduction to the enneagram. Retrieved from http://www.eclecticenergies.com/enneagram/introduction.php.

51. Smith, J. A., & Casteel, M. (2011). *How the enneagram works: A quick reference guide*. Lilburn, GA: Wells-Smith Partners.

52. Ledlow, G. R., & Coppola, M. N. (2011). *Leadership for health professionals*. Burlington, MA: Jones & Bartlett Learning.

53. Conger, J., & Toegel, G. (2002). A story of missed opportunities: Qualitative methods for leadership research and practice. In K. W. Parry & J. R. Meindl (Eds.), *Grounding leadership theory and research: Issues, perspectives, and methods* (pp. 175–197). Greenwich, CT: Information Age.

54. StuderGroup. (n.d.). Tools. Retrieved from http://www.studergroup.com/tools_andknowledge/tools/index.dot.

55. Center for Coaching and Mentoring. (n.d.). Are you ready to manage in the 21st century? Retrieved from http://www.coachingandmentoring.com/Quiz/21stmanager.html.

56. Mayo, A. J. (2005). Which type of leader are you? Retrieved from http://www.fastcompany.com/articles/2005/08/quiz.html.

57. Kurow, D. (n.d.). Leadership quiz. Retrieved from http://dalekurow.com/kurow/services/leadership-quiz.

58. The Price Group. (n.d.). True leader quiz. Retrieved from http://www.pricegroupleadership.com/tl_quiz.shtml.

59. Judge, T. A., & Bono, J. E. (2000). Five-factor model of personality and transformational leadership. *Journal of Applied Psychology*, *85*, 751–765.

60. Chemers, M. M., Watson, C. B., & May, S. T. (2000). Dispositional affect and leadership effectiveness: A comparison of self-esteem, optimism, and efficacy. *Personality and Social Psychology Bulletin*, *26*, 267–277.

61. Rychlak, J. F. (1963). Personality correlates of leadership among first level managers. *Psychological Reports*, *12*, 43–52.

62. Gladwell, M. (2008). *Outliers: The story of success*. New York: Little, Brown.

63. Gladwell, note 57.

64. Ajzen, I. (1991). The theory of planned behavior. *Organizational Behavior and Human Decision Processes*, *50*, 179–211.

65. Ajzen, I. (2009). Theory of planned behavior. Retrieved from http://www.valuebasedmanagement.net/methods_ajzen_theory_planned_behaviour.html.

66. Armitage, C. J., & Connor, M. (2001). Efficacy of the theory of planned behavior: A meta-analytic review. *British Journal of Social Psychology*, *40*, 471–479.

67. Ajzen, note 60.

68. Furneaux, B. (2005). Theories used in IS research. Retrieved from http://www.istheory.yorku.ca/theoryofplannedbehavior.htm. Content removed due to copyright restrictions.

69. Nicol, E. D., Mohanna, K., & Cowpe, J. (2014). Perspectives on clinical leadership: A qualitative study exploring the views of senior healthcare leaders in the UK. *Journal of the Royal Society of Medicine*, *107*(7), 277–286. Retrieved from http://www-ncbi-nlm-nih-gov.ezproxy.ttuhsc.edu/pubmed/25013095.