

'I am who I am': A phenomenology of strategic roles portrayed by creatively insubordinate Filipino medical academic leaders



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ABSTRACT

Background Organizational life is a drama in which all are actors playing different roles, hence it is made relevant by its contextually-embedded focus on role enactment.

Purpose This phenomenological study argues that medical education leaders assume strategic roles that are fit for their specific contexts. Thus it purports to answer the central question: As chief strategists, what roles do creatively insubordinate medical deans interpret and enact, in order to implement strategically effective change in their contexts?'

Design The phenomenological design was employed using open-ended and semi-structured interviews of 21 Philippine medical deans, following an aide-mémoire. After transcription of the digitally recorded interviews, extended texts were analyzed via dendogram. Inductive and deductive methods

were used to ensure appropriate placement of raw data into appropriate themes.

Findings Interestingly, this study affords to emerge, the D.E.E.P. Role Continuum that describes the envisioning, empathizing, empowering, energizing and emancipating roles assumed by Filipino medical deans as they initiate profound change in their school environments.

Conclusion The extent to which medical school leaders become successful in their practicing of creative insubordination depends in great measure on their ability to enact various change-driven roles. Discovering and understanding these roles offer an important guide to new leaders, who will then be more able to shape their leadership approach to match their personality, their institutional context and the constituents they work with.

Keywords medical deans, strategic roles, creative insubordination, Philippines

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"...the people who are crazy enough to think they can change the world are the ones who do"
Steve Jobs, CEO of Apple

INTRODUCTION

Organizational stakeholders assume roles and utilize individual and organizational strengths to enact and realize organizational strategy.(1-3) Organizational roles evolve through a combination of social interaction, contextual demands, norms and attitudes. Roles are essentially expectations about how an individual ought to behave in a given situation, that is, a characteristic behavior or expected behavior, a part to be played, or a script for social conduct. The role theory is often described using the theatre as a metaphor.

There are five approaches to role theory however, two have particular resonances with the present study. (4) Organizational role theory is made pertinent by its focus on multiple sources of norms and role conflicts. In the symbolic interactionist perspective, organizational life is a drama in which all are actors playing different roles, hence it is made relevant by its contextually-embedded focus on role enactment. Role definition then becomes a social process of interactions and expectations of the role holder and the individuals with whom he interacts within the context of his work. (5)

Principals in primary and secondary education become strategic champions when they enact decision-making strategy anchored on creative insubordination. (6) Through this concept that has been essentially unexplored in higher education, they adapted system mandates while responding to the realities of the local situation in order that they can achieve their goals within the context of a larger school bureaucracy (7-9) They acted as change agents actively influencing the strategy process through action guided by informed thought, transcending their immediate responsibilities and genuinely expressing an interest in matters concerning the whole organization. (1)

The concept of creative insubordination has morphed over the years. In his 1992 study, English advised administrators how to practice creative insubordination by informally lobbying board members, winking at obstructive rules and pursuing devious ends in the interest of their school. The best administrators were portrayed as Machiavellian risk takers who hid their activities for the public to see only good results. Machiavelli was credited for his unusual insights into the modern concept of the executive, who needs to act decisively, but must take initiatives to exceed his base of authority and be

willing to undergo undue exposure to criticism if he is to manifest a strong leadership stance. (10)

Further review of literature in organizational management revealed that some of its precepts have been embraced, partly or wholly, by more contemporary constructs such as 'bureaucratic resistance' (11); 'facilitated rulebreaking' (12); 'bureaucratic discretion'(13); 'opportunistic managerialism' (14); 'strategic deception' (15); 'positive deviance' (16); 'principled pragmatism' (17); 'discretionary insubordination' (18); 'pro-social rule breaking' (19); 'principled infidelity' (20); and 'challenging citizenship behavior' (21-28). More recently, creative insubordination has further evolved into 'creative resistance' that aims to co-produce change within a given system of power...a conception of resistance that takes the form of affirmation rather the mere reaction to a system of domination. (29)

Many of the studies, mostly conceptual and empirical, are situated in the context of public and private sector organizations. None of the studies dealt with higher education, much less the context of medical education.

LaNuez and Jermier (1994) highlighted how major organizational restructuring takes place following a growing emphasis on measuring outcomes that seem to impose unrealistic and conflicting expectations.(30) It is therefore essential to maintain the stability of schools in order to sustain the delivery of effective education. However, educational organizations change overtime due to external pressures by the constantly evolving ecologies around them. Hence, it is vital to contribute continuous improvement practices in the context of changing conditions to achieve school effectiveness.(31)

In the fluid and volatile environment of medical education, it is very hard to be a strategic champion and a credible strategist.(32) As centers of higher education, medical schools are fundamentally changing in response to contextual pressures. (33) Management literature also recognizes the enhanced role of middle managers as strategic champions in undertaking restructuring efforts.(34-36) These changes require that medical deans, as middle managers, take center stage and assume the lead role in strategizing for educational reform, design and development. (37)

Tibaldo (1994) and Santin (1998) for their part examined how the independent variables part examined how the independent variables of the select-

ed demographic characteristics and leadership style of principals may relate to the dependent variable of the principal's predisposition to use creative insubordination in decision-making. (38-39) Medical deans often need to make decisions without the best level of evidence in instances when failure to act is not an option. By their decisions and actions, vis-a-vis their uses of formal and informal power, and their interpersonal skills and core values, medical deans determine the degree to which a policy is implemented faithfully, converted to fit the medical school, or ignored. In this sense, medical deans invoke bureaucratic resistance through creative insubordination.

Based on the foregoing discussions, this phenomenological study argues that medical education leaders assume strategic roles that are fit for their specific contexts. Thus, it purports to answer the central question: As chief strategists, what roles do creatively insubordinate medical deans assume, in order to implement strategically effective change in their contexts?'

METHOD

Design

The philosophical and methodological underpinnings of this study are based on phenomenology. (40) Phenomenology aims to transform lived experience into a textual expression of its essence. Phenomenology is appropriate in looking at the human experience in complex, elusive and still largely unexplored areas (41), such as the practice of creative insubordination among medical deans in the context of Philippine medical education.

Selection

Participants included medical deans purposively selected to represent different practice context (i.e. government and private medical colleges and universities) to ensure a diverse overview of experiences. As medical deans, they were responsible for leadership, coordination and development of education-related programs in the schools of medicine at all levels.

Research Instrumentation

The number of participants interviewed was determined by using the saturation approach whereby

new participants were added to our sample until a variety of opinions and judgments expressed was fully exhausted and no more new opinions and judgments are extracted. All deans who were approached consented after prior telephone appointments were set. The data were collected over a six-month period.

In-depth, semi-structured interviews tackled from an emic perspective were conducted. (42) As we wanted to understand the respondents' perspective, data analysis needed to reflect the process by which it was elicited (43) and we tried to ensure that the language used in reporting the findings was recognizable to the respondents. (44-46) Fortunately, some of the respondents and the interviewer already knew each other hence a greater depth of information and understanding in a dynamic form of social interaction has been generated brought about by greater familiarity with and understanding of the context and technical language of respondents (47) The interviewer was sensitive to the respondents' slight apprehensions during the interview while supporting them in focusing on their experiences and understandings generated when they reflect on their practice through clarifying and elaborating probes. (42) Consent was sought (48), making the respondents aware that participation in the study was completely voluntary; that they can withdraw at any time and that their responses will be strictly confidential as data will be coded and reported only in the aggregate. Each interview was audio-recorded and the interviewer recorded field notes.

Mode of Analysis

Transcripts from the tape-recorded in-depth semi-structured interviews provided the main focus of the data analysis. The interview transcripts were read and re-read following the steps proposed by Colaizzi (49) in order to grasp a feel of the individual sharing. Meaning units were derived and highlighted from each of the participant's sharing of their lived experiences. Guided by the rules of cool and warm analyses, we summarized these to identify themes supported by verbatim transcript extracts. (44) Member checking procedures were done to ensure the truthfulness and trustworthiness of the data collected. (48)

Findings

Demographic data gathered using robofoto (50) revealed the following baseline characteristics: ten of the medical deans were males (47.61 per cent) and eleven female deans made up 52.38 per cent. Their median age is 62 years old. Their mean age during appointment as medical deans was 52.9 + 8.6 years. Their mean number of years of experience as a medical dean was 8.02 + 6.5 years. When analyzed as subgroups according to gender, the mean number of years of experience among the male deans was higher (9.0 years) than those among the female deans (7.1 years).

In all, an 188,650-word interview transcript was generated, from which this phenomenological study interestingly revealed five themes as verbalized and articulated by a select group of medical deans in Philippine Medical Schools. Table 1 presents the evolved D.E.E.P. Role Continuum which stand for the role driver, role end, role enhancers and role persona from whence were derived the creative strategic role typologies namely: envisioning, empathizing, empowering, energizing and emancipating roles

portrayed by creatively insubordinate Filipino medical academic leaders.

ENVISIONING ROLE

The envisioning role is a purpose-directed role concerned with the goals and direction for engendering change. In the envisioning role, the creatively insubordinate medical dean acts as the Profound Path Lighter who lights the way and possesses great insight while exhibiting the attributes of single-mindedness, creativity, discernment and being venturesome.

He demonstrates foresight, i.e., he keeps one eye on the future to plan yet he keeps one eye on the past as a balance. He has a vision and uses emotional cues to draw followers into that vision. Three deans verbalized the focus and single-mindedness of purpose required performing this role:

"If I want something done, and I do it my way, it will happen." (RE)

Table 1

The D.E.E.P. Role Continuum and creative strategic role typologies portrayed by creatively insubordinate Filipino medical academic leaders.

Driver	End	Enhancers	Persona	Creative Strategic Role Typologies
Purpose	Embodying change	Single-mindedness Creativity Discernment Venturesome	Profound Path Lighter	Envisioning Role
People	Understanding Change	Openness Advocacy Caring Involvement	Perceptive Path Coupler	Empathizing Role
Power	Facilitating Change	Motivation Building Inspiration Support	Potent Path Engager	Empowering Role
Process	Sustaining Change	Magnetism Enthusiasm Encouragement Drive	Powerhouse Path Breaker	Energizing Role
Performance	Achieving Change	Heroism Challenge Authenticity Celebration	Pioneering Path Blazer	Emancipating Role

"Is it right? If I thought it was the right thing to do, then I will find a way to make it acceptable." (AA)

"Some administrators will say no at the outset, but if I believe that something needs to be done, for the institution and for the students, then I go ahead and insist because I am seeing it from a different point of view." (WS)

In establishing a new order they have to facilitate achievement of certain targets without clear rules of behavior and several deans articulated how they need to be creative and resourceful in crafting seemingly disparate ideas into a way forward:

"I am versatile, not very dogmatic in my approach to things." (PA)

"I look at time in a different way." (JP)

"I started thinking and made the academic ranking as honorific scholarships and the money we saved, we put as grant-in-aid. We are the first medical school to have a grant-in-aid. I started the Special Development Fund (SDF) and charged every student P2,000.00 per semester." (FS)

Two deans disclosed how they exercised discernment and learned when to break the rules in response to the realities of their context or when to fall back on old rules as a strategic lever to pursue their change agenda:

"...we must realize that the students, years back, are not the same students now." (JP)

"We foresaw that eventually we will have dwindling enrollment and we need to change in order to survive." (RB)

In embracing their envisioning role, they understood the risks and were willing to take it and venture on alternative plans as expressed by some of the deans:

"I wanted our school to be the benchmark...I had that opportunity and I seized it." (AA)

"With a little number of students in the population, and knowing that the PBL does not need several faculty in a department unlike in the traditional. So

eventually it will lead to the survival of the College if we make the shift now." (RB)

"When we cannot raise the tuition fees because of PD 451, I went to MECS and I told them, "can you make our school deregulated so I can raise the tuition?" We became deregulated and I was able to increase the tuition fees by 30%." (FS)

EMPATHIZING ROLE

The empathizing role is a people-centered role concerned with reaching a shared understanding with the co-evolvers of change. In the empathizing role, the creatively insubordinate medical deans act as the Perceptive Path Coupler who builds bridges and is able to connect two paths, standing between what national policymakers intend, what the top management directs, what faculty staff want, what non-academic staff require, what parents expect, and what students need. To these ends, he exhibits the attributes of openness, advocacy, caring and involvement.

Our respondent deans occupied a central position in the social network and they used two hands busy connecting people together and building linkages. Several deans related how they exhibited openness with ears to hear, listening to other leaders, listening to peers and subordinates and listening to their own instincts:

"I sit down with each of the groups, I present the problems, and then I present them with the options." (RE)

"I am making headway after all these months because of the constant meetings because I always believe that you are a better institution if you have communication." (PA)

"With the faculty, I really appreciate faculty members who give suggestions and trigger a particular meeting on an issue. To me an effective organization will be defined in terms of free communication with everyone. I am lucky that the Chancellor is my classmate." (WS)

Two deans recounted how they were able to advocate effectively through an expressive behavior, strong self-confidence and self-determination and the ability to communicate eloquently:

"I had to sell the concept to everyone, both the administration and the faculty" (LQ)

"More often than not, if I have innovations and I let them flow through the course of bureaucracy, it stops at the first level. If I wanted it done and implemented easily, I go straight to the Chancellor and within a month it is already implemented...somehow that is how things happen in our school." (RE)

Peers and subordinates respond favorably when they know that their deans care and are truly interested in their concerns and the things that matter most to them. Several deans recalled how they were able to establish a personal connection with their followers when they performed 'boundary-spanning' activities such as quality assurance, communication and conflict mediation through creatively insubordinate means:

"I was able to marry the concerns of the faculty and the directives of the administration." (RL)

"I would go against any school policy if I feel that it is detrimental to the students." (RB)

"When we see that they are good students and have difficulty in paying, we offer them a service contract agreement and now we are implementing the "Study now, pay later." (PA)

"I have to understand where the administration is coming from but I have to express my views about the possible disadvantages of certain policies." (TS)

Through the empathizing role, they respected the correctness of space, but were willing to cross the imaginary emotional lines that separate staff and subordinates and become involved in their affairs as expressed by two deans:

"Also I have instituted for example a 'no agenda' monthly meeting with the faculty. We just have a lunch meeting, come up with your own ideas we will look whether it is good or bad, and come up with your complaints... so from that we grow. So it's a different style of doing things in a way." (JP)

"What I do is personally sit down with everybody and explain to them the problems. "What matters is

that they were involved in the decision-making before the change happened." (RE)

EMPOWERING ROLE

The empowering role is a power-aligned role concerned with how the medical deans influence the flow of influence within the medical school. In the empowering role, the creatively insubordinate medical dean acts as the Potent Path Engager, taking peers and subordinates by the hand to develop and empower them while valuing differences and providing leader support and builds trusting relationships. To this end, they must be imbued with the proper attributes of motivation, encouragement, inspiration and support.

He is motivated more by the prospect of success than by the fear of failure. He needs to make sure that his rule-breaking behavior leads to and encourages constructive entrepreneurial activity rather than destructive alienation. One dean enthused how she noted the continuous improvement among those of her faculty staff who were willing to be empowered:

"I motivated them...tried to share the vision with them. Those who were highly motivated stayed through and they flourished. I could really see how they flourished from knowing out of nothing to somebody who can step anywhere in the world." (AA)

In the empowering role, our respondent deans show willingness to invest in another person's growth, building people, seeking, mining and bringing their potentials to the surface. They know that when a change in intent is being formulated, they have to make sure that everyone inside and outside the organization are inspired to participate. Two deans articulate their views on empowerment:

"My vision of a school is a school that develops people and if you choose only the brightest, they don't need it...you take them so you can develop them." (AA)

"We don't want our people to be tentative, so empowerment is the best leadership thing that I can think of. You can empower your people to be managers themselves, not to depend upon you." (PA)

Two other deans expressed how they shared influence and delegated power to and through the

members, but cautioned to add that they never ask people to function in ways they are not equipped to serve:

"You do not tell them what to do but you show them the options and they choose." (RE)

"Some of our faculty members were against the change in curriculum, but I made them understand."(RB)

Our respondent deans provided the needed support and freely shared information with their peers and subordinates so that they are given the opportunity to examine better solutions to problems and better methods of strategy implementation as encapsulated in these verbalizations:

"I have to support maybe 80% of the senior staff who will rely only on instructions and are afraid to rely on personal innovation." (RE)

"We gave all the scholarships that anybody wanted...the CHED requirement to teach in college is to have a Masters [Degree] in the first two years...I got 15% of the faculty to enroll, which more or less dwindled to 10% but that's still okay " (AA)

ENERGIZING ROLE

The energizing role is a process-focused role concerned with the push necessary to sustain the ongoing change. In the energizing role, the creatively insubordinate medical dean acts as the Powerhouse Path Breaker taking the lead and choosing to follow another path while others remain. He keeps heart beating anxiously when status quo becomes unnerving and strives to change it. This role resonates with the attributes of magnetism, enthusiasm, encouragement and drive.

In the energizing role, our respondent deans exude charisma and maintain freedom from internal conflict. They likewise exhibit expertise in using unconventional means to transcend existing order often through counternormative means, as expressed by several of our respondents:

"I think I really don't have the word coerce in my vocabulary...just talk to them, personally or in meetings...charisma that is what I use." (MA)

"The good thing is I am very persuasive." (PA)

"I tapped my friends and I was able to get a number of donors for each classroom that badly needed repairs." (CT)

They are catalytic, accepting the rules but finding ways to subvert or reinterpret them. Two deans shared how they kept two feet busy in the interim to keep things moving from one location toward their desired goal:

"I look for the money myself...I capitalize on the power of friendship...at one time I got P5M for research." (FS)

"I tend to follow...well to some extent we did all our changes without getting terminated. I never had to explain the changes...I was surprised. I did my thing all the time when there might be some written rule, I did not check for written policies or rules which might restrain us in our changes." (AA)

At times pushing and sometimes holding back, all actions are intended to affirm and encourage people at every opportunity while drawing reinforcement from an inner source:

"I started reclassifying the faculty into core and base faculty...the core faculty stayed longer hours and we started to give them more incentives."(ED)

"Sometimes, I have my action plans already ready but I just ask them to come up with their own plans before we reconcile. At least they have participation and ownership of the activity." (RE)

They owned the change process and maintained high levels of activity and energy. Their drive in decision-making is an educated determination based on their experience and the wisdom of others as depicted in these excerpts:

"I think it depends upon your perspective. Some will just talk about it, while some will do something about it. I will rather be doing something about an issue rather than talking about it." (PA)

"When you do change even if you have the perfect formula, there are sequelae which may come out later that you need to troubleshoot for the things that you were not able to foresee. Those are the things that take up so much time." (TS)

EMANCIPATING ROLE

The emancipating role is a performance outcome-oriented role concerned with breaking new ground towards an envisioned change. In the emancipating role, the creatively insubordinate deans is the Pioneering Path Blazer forging ahead and breaking new ground while looking for a path in unexplored areas. In this role, he exudes heroism, challenge, authenticity and celebration.

Our respondent deans deeply opposed mental enslavement to norms and rules that do not lead towards their envisioned change. They responded to their inner voice and are willing to take positions that sometimes even go against the grain of the organization. Several deans shared their heroic efforts at institutional innovation:

"There was no precedence but I think that the timing is right." (CH)

"What I'm trying to ask them is just try to give the College of Medicine a free hand with what to do with its funds. We want to be able to maximize the usage of our funds." (PA)

"When I feel strongly about something and I feel it is right, then I impose it and take full responsibility for the consequences." (ED)

"The College now enjoys financial independence from the main campus. We do not have to wait for weeks or even months to pay our lecturers. We were also able to purchase educational materials and equipments, like new computers, laptops for projections, etc." (EM)

They are keen on hurdling challenges, and looks at them as opportunities to create, to reinvent and to excel. They create new rules and keeps mind open to possibilities. Using the big picture perspective, they are able to create frameworks and share these with

their peers and subordinates. Several deans shared their encounters with challenges in the workplace:

"If it is not reasonable, I would really reason it out. You have to make them see your point about why you do not agree with the policy. I think it is best to say it rather than just keep quiet." (RB)

"The administration only sees the bottom line, and don't believe in the investment in people (pause)... that's my number one challenge, how to convince the administration otherwise (sighs)..." (PA)

"The challenge I faced was in drawing the faculty in and letting them participate in important decisions involving the college and letting them share in the responsibility of running the affairs of the college..." (EM)

One dean expressed how the attributes of consistency, trustworthiness and credibility collectively translate to authenticity. Our respondents who exhibited this attribute are viewed by followers as capable of finishing and likely to succeed in whatever mission they engage in, running until they break the tape at the finish line.

"I never impose on anybody to do something that I don't know how to do myself." (RE)

After a long and arduous trek to the envisioned goal, the creatively insubordinate dean takes delight in honoring the achievements of those who have worked together in achieving the common goal. One of our respondent deans shared how she celebrated a good performance by the team, the completion of goals and objectives:

"Once a year I would treat the Medical Education [Department] and Admissions [Committee]...to a dinner...for me to say thank you. I don't think they were really favors, they have much more work than the average faculty member." (AA)

DISCUSSION

Physician educators are under pressure in their careers, teaching students and residents, designing curricula, managing community projects, conducting research, and at the same time expected to be clinically productive. (51) The pressure becomes more

acute when the physician educator assumes the deanship of the medical school, for then he needs to address development programs and projects as well as human resource and fiscal management concerns. (52)

Critics of medical education systems blame the shortcomings of medical education on the failure to address much needed curriculum redesign and pedagogical reforms that will address new priorities in a globalizing world. (53) Toward this end, the medical dean must assume and enact a repertoire of roles to address issues specific to their individual contexts. The globalizing world is the context within which educational leaders, medical educators included, need to frame their work in order to continue relevance in the twenty-first century. (54) What became clear from an examination of the interviews was that the medical deans enact roles that allowed them to work in spite of the rules when, if in their views, the rules were not appropriate for what they wanted to or needed to achieve.

Creatively insubordinate deans needed to assume the envisioning role and begin to engage people in the future. Their job is to interpret the overall strategic direction and ensure that everyone in the medical school understands the direction and its implications for them.

Communicating a compelling vision and using other motivational strategies are essential areas of focus. (55-56) This is the case among most of our respondents who went through the process of curriculum redesign. Physician educators are rational, logical people and they have a tendency to be suspicious of unsubstantiated vision and get nervous of overconfidence about a solution or plan. The prevailing theme in this conception of resistance is the search for the co-construction of change or the co-production of a common future, which implies 'acting within a given system of power, offering solutions, assuming de facto managerial roles' while sometimes confronting top management. (57)

Change that requires a long drawn-out process such as curriculum redesign must be understood by the people from the start so they will be prepared to undergo the birthing pains. It is a good idea to make sure that people know that once it is all over, a hopeful future is forthcoming. To be credible in this role requires clarity about the aims, a good rationale for doing the work, realistic planning, plus the right resources. Rules and guidelines are necessary and

advantageous and they should not be ignored because they create a sense of order and of a predictable program environment for all. Hence, creatively insubordinate deans must exhibit discernment to be successful in the envisioning role because one may not know when discretionary decision-making may be called for until one understands the basic values and goals intended to be implemented through program guidelines.

Once the change process has been initiated, the deans needed to assume the empathizing role. The focus of this role is on individuals as they go through the journey of change. All the stakeholders must feel that their concerns are heard and that their needs are met. This role helps people feel that they belong to something that has a clear purpose and to feel connected to others. Bennis (1996) alludes to this role when he said: "Change leaders depend on being able to engage the hearts as well as the minds of the organization." (58) Medical deans are in such an enviable position that they carry vital information and decisions back to the upper management and act as an advocate for the strategies developed in the medical school. Lipman-Blumen (2002), for his part, likewise talks about this role when he noted that one of the preoccupations of change leaders is their ability to ensure that they develop a sense of common purpose across boundaries through communication between stakeholders and partners. (59)

In the empowering role, creatively insubordinate deans delegate power and avoid maintaining controls over day by day practices of staff so that the inconsistencies between local practices and institutional rules are not discovered as is the case in the fluid environment of a medical school. (55) The decentralization of power is the hallmark of empowerment. Constituents are given the opportunity to make the most of their talents. It frees them from mechanistic thinking and encourages critical thinking, problem-solving and the application of knowledge to practice. (60-61) Empowered constituents are encouraged to act on their expertise and judgment because they know that they have management support to back them up, thereby leading to a sense of autonomy. (62) Our respondent deans exhibited genuine commitment to empowerment through capacity building among their staff which conforms to the position of Valadares (2004) that advances the need for healthcare organizations to promote a culture of psychological safety to ensure that employ-

ee empowerment succeeds.(63) By involving their subordinates in the planning and implementation of change they believed that they have some input in what is about to happen to them and some control over the context in which they will work in the future.

In the energizing role, creatively insubordinate deans have to lead by example, showing energy and enthusiasm for the change agenda and the work that lies ahead. Power and energy go hand in hand. The energizing role is necessary to give the push that will maintain the momentum of change. Inspiration appeals to people's values or emotions and generates enthusiasm for strategy generation. Incentives and promotions are tangible rewards for people who demonstrate the skills, competencies and values needed for the success of the strategy. This role is likely to be most important when the institution experiences a crisis, when the work is difficult and discouraging such as when it is pursuing a high-risk strategy.(64) Many of our respondent medical deans successfully utilized charisma or personal appeal to inspire their superiors and subordinates towards their envisioned goal while keeping them inclined to pursue their change agenda through constant encouragement.

If it is assumed that the medical school tends to reflect a bureaucratic approach, then we must acknowledge that it may have limited capacity to change due to inertia and preservation of the status quo, and also due to systemic barriers such as limited resources, high specialization, and such formal constraints as rules and standardized work processes.(65) Thus, in embracing the emancipating role, our respondent deans truly manifested heroism and authenticity in their creatively insubordinate endeav-

ors by truly embodying what they speak about and the willingness to undertake the risks and bear the consequences of their actions. Dukerich, Golden & Shortell (2002) argue that managers are challenged to 'elicit cooperative behaviors from professionals in organizations'.(66) This is necessary to constructively face and overcome the tension and conflicts inherent in the fluid environment characteristic of a medical school.

CONCLUSION

As if under the spotlight, leaders enact their roles like actors in a stage play. Leadership is about stepping forward and doing something that otherwise would not be done. When someone steps into a leadership role, his relationships with people begin to change. People may treat leaders differently not because of who they are or what they have become, but because of the roles they assume. We believe that discovering and understanding these roles offer an important guide to a new leader, who will then be more able to shape his leadership approach.

Through the emerged repertoire of roles, deans of Philippine medical schools engaged in collaborative strategy-making are opening up new windows and explore more and more possibilities through their use of creative insubordination as a decision-making strategy. With foresight and courage, they are able to leverage the diversity within them and their innovative efforts form the blueprint for their success. This phenomenological study therefore highlights the need for academic leaders in medical schools to learn how to develop the right mix of envisioning, empathizing, empowering, energizing and emancipating roles in ways to match their personality, their institutional context and the constituents they work with.

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