Building global leadership to optimize the future of traditional & alternative medicine

Phyllis L. MacIntyre, Philippe A Souvestre
Fairleigh Dickinson University, Canada
NeuroKinetics Clinic, Canada

Health care professionals are effective problem-solvers in a specific area of technology; leadership calls for a very different way of thinking and learning. Leadership development is a combination of experiential learning and programmed learning, including the conceptual frameworks of leadership, practice to integrate and apply the meta-cognitive skills of leadership, such as self-discovery of leadership identity and a movement towards mindfulness. Integral to this learning is the support of other leaders who provide a mixture of coaching and mentoring to sustain the new leader’s growth. Leadership education takes place beyond university in a context that broadens the career opportunities for health care professionals. In the USA leadership development education has a business focus, while in Canada it values sustainability and an holistic thinking, particularly in medical and applied sciences. Often professionals regard leadership training as a soft skill with less value in their technical field of practice and this presents a challenge for leaders in organizations or professional associations, who need to identify the preferred educational strategies to develop leadership or to risk using leaders without the essential technical expertise for strategic planning and decision-making. Employer surveys show an expectation that health care graduates have equivalent skills in technical expertise, business knowledge, and leadership. Learning leadership includes leadership practices to describe and quantify the leadership of individuals and to characterize the leadership of the specific group; secondly, a workshop on leadership education based on transformational learning and thirdly, formation of a community of leaders who advocate and further leadership development.

Biography
Phyllis L. MacIntyre is an Assistant Professor at Fairleigh Dickinson University who joined the full-time faculty in 2011. In addition to a Doctorate in Education, she has an MBA from the University of British Columbia, and a Bachelor of Industrial Engineering from Dalhousie University. She is a professional engineer in British Columbia who actively promotes leadership for women engineers. Her industrial engineering included productivity improvements in transportation; and in healthcare: development of hospital systems, operations audits, and functional programming for an ambulatory care centre and a pediatric hospital. Her research focus is on learning how to learn through inter-disciplinary and cross-cultural collaboration, and application of innovative teaching in university education.

Notes: