

# An OD approach to leadership development: questions and consequences

OD approach  
to leadership  
development

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## Abstract

**Purpose** – The purpose of this paper is to explore the application of ideas and practice from Organisation Development to the creation of a leadership development programme, based in a UK Business School. When leadership development is constructed as a personal and relational endeavour, rather than using competences to create identikit heroes, faculty need to draw less on the espoused certainties of “expert” power and adapt their teaching style and language.

**Design/methodology/approach** – This case study of an ongoing Masters programme in health leadership, draws on external evaluation data and action research.

**Findings** – The paper’s prime contribution is as a conceptual stimulus to rethink leadership development programmes based on OD.

**Practical implications** – The practical implications could be far reaching if business schools want to offer an alternative to perpetuating heroic, individualist models of leadership.

**Social implications** – As leaders take charge of their own learning, as much as their leading, faculty become powerful participants and draw on OD skills rather than those of expert knowledge.

**Originality/value** – The paper thus offers a practical example with evaluation of how leadership development can be redesigned congruent with seeing leadership as a socially constructed, relational, dynamic and context specific.

**Keywords** Competences, Power, Context, Congruence, Organization development, Health leadership development

**Paper type** Case study

## Introduction

In 2009, the authors were working for an Organisation Development (OD) practice that was strongly informed by a view of organisations as complex, emergent and participative processes of interaction (Stacey, 2012) rather than mechanistic and stable (Morgan, 1986). The firm was part of, though culturally and organisationally distinct from, a Business School. X Consulting, and Y were awarded a tender by The Health Foundation to create a bespoke leadership programme to develop senior health leaders capable of leading quality improvement (QI). The tender unusually stipulated the curriculum must hold together, in possible tension, leadership informed by complexity thinking and the improvement sciences. Y provided input on the latter. The authors are primarily OD practitioners, so turned to this field of theory and practice to design a programme, not with the grand intent of being transformative but the far humbler hope of being useful to those leading in the challenging healthcare environment (McDermott *et al.*, 2018). To date over 120 leaders who are senior doctors, nurses, allied health professionals, managers, health charity leaders and policy makers have participated in the programme which is marketed as GenerationQ.

We draw briefly on themes in the literature which emphasise the importance of moving away from traditional heroic, individualistic conceptions of leadership to seeing leadership as a context specific and relational phenomenon. Next, we outline some core assumptions within the Organisation Development literature congruent with conceptualising leadership and organisations as socially constructed, and then state our research questions and methodology. The remainder of the paper explores three aspects of



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GenerationQ informed by OD theory and practice. We conclude by considering the consequences for the power dynamics between faculty and leaders, and the potential for both to be more human and less heroic.

### **The literature review**

#### *Leadership development*

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Ideas about what constitutes effective leadership development are intrinsically linked to assumptions about the nature of leadership itself. In some quarters, it is becoming commonplace to suggest that leadership studies are currently in crisis, with a “critical dismantling of conventional, ‘heroic’ leadership theories which [...] neglect context, reproduce normative control, overlay agency and fixate upon individual qualities”, (Mabey and Morrell, 2011, p. 107). This can be seen as a response to the mainstream “cult of individualism” (Senge, 2000, p. 64) which dominated academic and populist writing in the 1980s and 1990s and arguably continues to hold sway today. It is a view fuelled partly by wide spread beliefs that uncertainties require powerful leaders who can motivate, direct and reassure staff, and fanned by the media representation of business and government behaviour as dramas played out among personalities (Storey, 2004). In a set of interlinked assumptions, the impact of a single leader on performance tends to be magnified when organisations are viewed as complex machines (Morgan, 1986), with power and control concentrated at the top. Leadership development from this perspective is a simple, formulaic transfer of knowledge, “teaching people leadership in the same way one might teach geometry” (Mole, 2004, p. 125). In doing so, it arguably encourages a mutual false certainty between those supplying leadership development and those demanding it, implying that there are “right” answers that those teaching could, and should, impart (Sturdy, 1997).

More recently, subtle but important distinctions are made between leader development, at the individual level, and leadership development which sees leadership as a relational activity that happens between people and is both dependent on, and is the product of, a social context. Day (2011) acknowledges little work has been done on the latter. Mole (2004, p. 129) argues that “leadership cannot be treated as though it were a portable set of knowledge, skills and attitudes; what works in one context may be conspicuously unsuccessful in another”. Context is sometimes acknowledged by aligning leadership programmes with organisational processes such as reward and appraisal. Whilst helpful, this is far from fundamentally rethinking how context might be embedded within a development programme.

The challenges and unpredictability of healthcare make calls for greater attention to understanding context is particularly pronounced in healthcare leadership. There are multiple actors involved in numerous interlinked ways, “starting with the patient clinician relationship and going all the way through to government” (Fulop and Mark, 2013, p. 151). Resource constraints, technological advances, increasing patient demands and the pervasive impact of party politics, election cycles and policy changes all contribute to the healthcare context being frequently described as volatile, uncertain, complex and ambiguous (VUCA), using Stiehm and Townsend’s (2002) ugly but succinct acronym. The challenge for business schools, as well as leaders themselves, is how to develop the capability to “see many shades of grey, see many patterns and connections, accept uncertainty as the norm” (Petrie, 2014, p. 13).

One requirement is to base the curriculum around an alternative to competences which advance “a modern version of the great person theory” and disregard the “subtle, moral, emotional and relational aspects of leadership” (Bolden and Gosling, 2006, p. 158). Three shadow sides of competences seem particularly important to avoid in re-imagining leadership development.

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First, incongruence. Competences offer a (false) promise of predictability (Bolden and Gosling, 2006) at odds with the complexities and uncertainties of today's environment. Basing the curriculum around them says to leaders: "Develop your skills, knowledge and capabilities, according to this prescribed set of competences and you will be successful". Yet who can state how others should lead when "no one set, whether 15 or 20 or 180, includes all the potential useful competencies?" (Hollenbeck *et al.*, 2009, p. 74). How can the offer of such certainty, and implied cause and effect, sit alongside the need for leaders to learn how to work with a more emergent and dynamic understanding of their own shifting context and relationships? For some faculty in business schools, as well as leaders themselves, the consequences of acknowledging the impossibility of definitive answers may threaten identities and provoke anxiety.

A second challenge is the potential for idealisation. Competences suggest, at least implicitly, that there is a right way of leading. "Perfection" is desirable and achievable with an identikit model of leadership to which all must conform. This sets up an unhelpful comparison between current reality and an idealised state, encouraging individuals to believe they can never be good enough. Constantly being found wanting, and "not there yet" can undermine personal resilience and confidence, fuelling imposter syndrome (Clance and Imes, 1978), hindering rather than helping leaders faced with the emotional and psychological challenges of uncertainty and complexity.

A third consideration is the way competences may impact the relationship between those providing leadership development and those participating in it, specifically the potential for unconscious coercion. The use of competences risks amplifying the power distance in the relationship between developer and leader, as the former claims "I know best what you should learn, how you should be". This encourages expert power (French and Raven, 1959) and "seeks to foster dependency and, by definition, block questioning and reflexive thinking. It is, therefore, inimical to learning" (Stacey, 2012, p. 80). It also denies leaders the possibility of self-determination and experiencing learning to live with not knowing, an essential for leading well in unpredictable contexts.

If leadership development needs to be less heroic and "more focussed on social processes and structures, group or team activity" (Iszatt-White and Saunders, 2014, p. 259) what does this mean in practice for the providers of leadership development, such as business schools? Might OD offer potential responses?

### **Organisation development**

Like Leadership studies, OD has been experiencing something of a crisis. From its postwar origins as "an exciting amalgam of systems theory, action research, and client-centred consultation" (Mirvis, 2014, p. 3) much of the current OD discussion concerns how to define this practice and articulate its contribution (Bartunek and Woodman, 2011; Mirvis, 2014.) There is broad agreement that the theories informing OD are humanistic in orientation, based on the idea that reality and relationships are socially constructed and that understanding organisations involves thinking systemically and relationally (Bushe and Marshak, 2015). One of the reasons OD continues to live, suggest Bartunek and Woodman (2011), is precisely that it "engages paradox more effectively than most other change approaches and philosophies" (p. 733). This made an OD orientation seem highly relevant to supporting the development of leaders in the highly complex, politically fraught context of leading QI in healthcare (McDermott *et al.*, 2018).

Given the acknowledgement of "mess" and paradox, OD practitioners favour a process rather than expert role (Schein, 1969). Asking questions rather than providing answers is privileged, with the intent to build a partnership of equals between clients and practitioners, actively exploring difference around topics and experiences of joint interest. In the language of Transactional analysis (TA) (Lapworth and Sills, 2011), OD requires speaking, and

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listening, from the perspective, or ego state, of “Adult”, where individuals are open, curious and present. In contrast, heroic leaders, and perhaps also leadership developers who see their role as transferring expert knowledge, often speak from the ego state of “Parent”. A consequence of speaking as either “Critical or Nurturing Parent”, is others can feel diminished, talked down to, and placed in a Child ego state. This illustrates the way an OD lens can offer insight into the relational dynamics of leadership.

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## Methodology

This paper is positioned as a case study because we have not found published accounts of similar endeavours. Congruent with our OD focus on context, we are also wary of overclaiming that the exact specifics of our experience will generalise neatly to others. Instead, our intention is to stimulate further theorizing and experimentation on developing leadership programmes, informed by OD theory and practice. In evaluating GenerationQ, we draw on action research (Ladkin, 2007; Reason and Bradbury, 2008) as well as a quantitative impact study commissioned by the programme’s funder (Waller *et al.*, 2015).

Action research differs significantly from mainstream research: it is reflexive in that it acknowledges the research process will affect what is being researched and that those participating will be affected by the research; participant researchers notice and think about their practices whilst in the process of enacting them and, in so doing, reflect on and modify their practice. In this respect, it is also a form of learning with the intent of helping bring about positive impact, as defined by participants. Action research is also used by leaders on the programme in their masters.

We also draw on quantitative data from an anonymous electronic survey of cohorts 1–4 ( $n = 72$ ), with a response rate of 79 per cent (Waller *et al.*, 2015). As part of the survey, Fellows were invited to a one-on-one interview, framed as second person action research, to explore their experience and stories in more depth. An overwhelming majority indicated willingness. Timing and logistical constraints meant 15 participated. This approach is congruent with the programme ethos in encouraging conversation as a means of inquiry and giving participant’s choice, rather than mandating or constraining how they should respond.

Case studies are often classified as second rate by business schools (Gummeson, 1991) which tend to equate precision, objectivity and rigour with quantitative measures alone. Case studies can also be criticised for being subjective and strongly influenced by the researcher. On this point they are, in the words of Patton and Appellbaum (2003), “guilty as charged” (p. 68). We therefore acknowledge our biases as OD practitioners, making explicit our own paradigm, selective perception and no doubt personal defence mechanisms.

The research questions are thus as follows:

- RQ1. How might a leadership programme be redesigned to take seriously the role of context and the development of leadership as a relational rather than individual practice?
- RQ2. How might OD provide a theoretical and practical foundation for such changes?
- RQ3. What might be the implications on the relationship and power dynamics between faculty and leaders?

## The choices we made

The overall GenerationQ programme architecture (see appendix) includes elements such as action learning sets, coaching and the teaching of interpersonal skills which are congruent with, but not particular to, an OD orientation and are well recognised in the

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literature (Iszatt-White and Saunders, 2014; Hind, 2015). Here we focus on three aspects shaped by an OD orientation:

- (1) embedding context into the design;
- (2) structuring the curriculum around domains rather than competences; and
- (3) ensuring congruence of teaching style and language.

### *Embedding context*

In the 2013 special issue of “Leadership”, Fulop and Mark argue that leading in healthcare requires foregrounding context. Jepson (2009) suggests context is a dynamic interaction between three interlinked aspects: cultural, institutional and the immediate social context. In GenerationQ, this is acknowledged through a range of features.

First, each cohort deliberately comprises leaders from a range of health professions and institutions from all four UK countries which have different health structures. The health context is explored through deliberately encouraging leaders to share their own experiences. Our role as faculty is to provide research and theory input and to then allow the group to learn together, testing their assumptions rather than us suggesting we have the “right” answers.

Pedlar *et al.* (2004) reminds us that “Leadership is always [...] local and contextual [...] what works here and now may not work in another place at another time” (p. 6). Each leader on the programme is therefore required to shape and then deliver an “Ambition into Practice” (AiP), a significant leadership gesture, designed to make a difference in their own organisation, ensuring others beyond themselves benefit from the programme. The AiP is also a device that enables each leader to adapt and apply their learning locally. The programme is accredited to Masters level and the assignment writing, in the first person, requires leaders to examine their understanding of theory, applied to their immediate context and to undertake cycles of inquiry (Ladkin, 2007) to reflect on their learning.

Examining assumptions is key to transformational learning. In relation to context, this requires reflecting upon the very nature of organisations, viewing them for example as machines or complex responsive processes (Morgan, 1986; Stacey, 2012) each with implications for understanding leadership. This is not just an intellectual exercise. Instead it allows individuals to explore their personal experience of the tensions between desire for control and the inevitability of uncertainty and to envisage new possibilities for action. Two separate quotes from the action research illustrate the potential range of responses on being introduced to Stacey’s (2012) ideas:

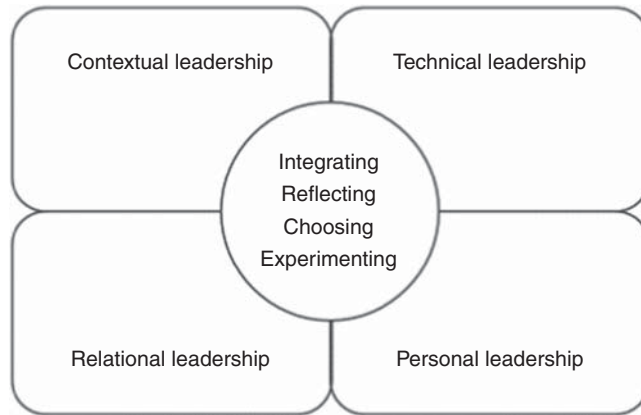
I felt disturbed by the idea of complexity thinking. It seemed to beg the question, “why bother as a leader”?

[...] the ideas presented were like a revelation, a soothing balm for a struggling leader’s soul – I did not have to be perfect; maybe I was good enough already.

Each cohort is also framed as a temporary learning organisation, creating an immediate context in which to explore how leadership, culture, power and interpersonal dynamics are enacted within the group.

### *Domains rather than competences*

Competences for NHS leaders exist but have a range of shadow sides. Instead we designed the curriculum, including the reading and assignments, around four leadership domains, drawing on the vocabulary of earlier researchers (Pedler *et al.*, 2004). These “four leadership domains represent the range of leadership skills, capabilities and qualities needed to respond effectively to the (healthcare) challenges identified, recognising the full range of situational complexity” (Waller *et al.*, 2015, p. 21) (Figure 1).



**Figure 1.**  
The four domains

Much of the content of the contextual domain has been examined in the previous section. The technical domain for GenerationQ comprises QI methodologies as the programme is designed to develop leaders of QI. The relational and personal domains acknowledge that leading requires knowing how to engage well with others as well as knowing your own personal strengths and demons (full details on these two domains are given in Wiggins and Hunter, 2017).

In OD practice, a loose container (Bushe and Marshak, 2015) describes a light structure which acts as a defence against anxiety. The domains fulfil this function for us as faculty, for the commissioner of the programme and for leaders attending. However, unlike competences, they offer structure without prescribing (Heron, 2001) what must be learnt. In each domain, a wide range of different theories are introduced but leaders choose to explore in depth those they deem most relevant for them, at that moment, in their context. This lightness is a deliberate attempt to avoid the temptation for us as faculty to assume expert power (French and Raven, 1959), about who knows best which would be adopting a Parent ego state (Lapworth and Sills, 2011).

Whilst each domain has a focus on certain aspects of leading, there is no intended hierarchy between them or suggestion they are useful apart from each other. As one leader reflected in the action research:

The domains are remarkably enduring [...] They're like a jigsaw puzzle; remove one piece and the picture is incomplete. Each one helps to make sense of the whole.

We were initially concerned that perhaps the domains looked too obvious, despite Occam's razor in praise of simplicity. Yet whenever we introduce them, leaders and educators understand the underlying logic and appreciate the simplicity. The domains are also a construct that gives breadth and constancy to the curriculum, whilst allowing flexibility to meet the requirements of different cohorts and individual leaders.

#### *Ensuring the congruence of teaching style and language*

Complexity theorists such as Stacey (2012) argue that the macro emerges in the micro. OD practitioners too pay exquisite attention to behaviour and to seemingly small and insignificant details that indicate cultural patterns of leadership and relationship. Given our intention to create a learning environment where leaders felt treated as leaders and Adults, in TA terms, the teaching style needed to be congruent.

As OD practitioners our core skills are not in giving lectures but in creating the conditions for dialogue (Isaacs, 1999), in drawing attention to patterns and dynamics in

the moment (Bushe and Marshak, 2015) and to asking questions rather than giving answers (Southern, 2015). These skills are essential in creating sufficient psychological safety during the 6 residential leadership forums for leaders to explore ideas that may challenge their assumptions about leadership, organisations, their context and often their own identity. As faculty we also need to hold the tension when conflict emerges in the group, trusting the process, to use an OD term, and resisting the temptation to intervene as Parent (Lapworth and Sills, 2011), either rescuing or criticising what is happening. Doing so robs leaders of the possibility of immediate experiential learning in a safe space.

Lecture theatres with ranked seating in a semi-circle easily reinforce the guru status of faculty (Huczynski, 1993). In this business school, a former stately home, there are no such formal teaching rooms. Drawing on OD practice, there is simply a circle of chairs. Every morning begins with a check-in, a process to help people become present, to allow all voices to be heard (Isaacs, 1999) rather than starting with ours.

Taking seriously the social constructionist view that “words create worlds” requires ensuring language used on the programme is congruent with our intentions. Leaders on the programme are not referred to as students or participants because we regard them as equals to us and are inviting them to see themselves likewise. Words such as “classroom”, “lecturing” and even “teaching”, are avoided and reference made simply to “rooms” and “giving input”. Powerpoint slides are rarely used: ideas are sketched on a flip chart in the moment. Pre-reading is given before Leadership Forums which allows time for collective sensemaking when the cohort is together, using a range of different exercises and interventions. Our role is to assist in helping understand or apply theory and to draw attention to what is emerging in the moment. Given the beauty of the grounds, a favoured teaching method is “walk and talk” in pairs, encouraging leaders to notice and value each other’s contributions to learning rather than over idealising ours.

## Discussion

Before examining the implications of taking an OD informed approach to developing a leadership programme, evidence of the impact and effectiveness of the programme is offered, drawing on the client sponsored evaluation survey with the first four cohorts (Waller *et al.*, 2015). The data demonstrate the impact of GenerationQ. However, this is not to position ourselves as expert leadership developers who have the answer.

Leaders were very positive about their GenerationQ experience resulting in a mean satisfaction score of 9.7 out of 10. An overwhelming majority (92.7 per cent) indicated they were very likely to recommend the programme to others and there was a statistically significant difference in how they rated their ability to lead QI, rising from a mean score of 2.98 (SD = 0.93) before the programme to 4.16 (SD = 0.83) afterwards. 65 per cent leaders were in new roles, the majority with significantly increased influence, and 70 per cent of those in new roles said that their decision to apply had been influenced by their participation in GenerationQ to either a great, or very great, extent. 76 per cent said they had made significant progress with their Ambition into Practice in areas such as increased organisational and system wide QI capability, integration across system boundaries, improved clinical engagement and innovative service provision.

There are many verbatim quotes from the action research but we include just one:

These insights have made me a better leader, doctor, father and husband. It’s the best educational experience I have ever had.

With any case study, questions of generalisability must be considered. The widely expressed need for transformative approaches to leadership development that embed the contextual and relational aspects of leadership into development, suggests that the approach taken here could have wide appeal and interest. Yet there are some specific

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contextual features that may explain why an OD approach to leadership development was possible here but may be more challenging for others. First, the commercial context. The provision of leadership development is a business activity, with a need to win work and gain clients, as well as a scholarly endeavour grounded in research and theory. The globally competitive leadership development/executive education market is an “insecure business” (Sturdy, 1997) with mutually reinforcing anxieties: commissioning clients, and leaders, seek reassurance that there are right answers to be had and faculty may feel the pressure to offer expert knowledge and certainty to reassure and win the work. The authors were freed from this pressure as winning the tender provided financial security to develop an innovative programme and the client marketed and fully funded the places on the programme. The physical setting and consulting tradition of X Business School are also contextual features that may not be easily replicated elsewhere.

Those putting forward case studies are charged to share their own personal biases. It is undoubtedly relevant that both authors see ourselves as primarily experienced OD practitioners rather than academic faculty. Adopting the role of powerful participant is congruent with our core identity but may not be so for some faculty engaged in leadership development. Gender may play a role too. Both authors are women and we chose, from the beginning to co-lead the programme. In hindsight, this was a powerful, if unintended gesture that enacted a distributed model of leadership rather than replaying the heroic leader paradigm. We should also acknowledge some personal ambivalence with regard to expert power.

In the rest of this section we therefore explore the impact on us as faculty of working with emergence and uncertainty and power dynamics between faculty and leaders. As experienced OD practitioners, our preference for a process rather than expert view of consulting (Schein, 1969) has consciously influenced the design of GenerationQ. It has also required us to acknowledge and work with tensions and ambiguities such a stance evokes for ourselves and leaders in this programme. Embedding context so explicitly reinforces what we cannot know – the lived reality of leaders on the programme. Creating conditions for dialogue enables leaders to share and reflect on their relational experiences, increasing the attention they, and we, pay to group dynamics. The most apparently innocent of exercises, even Kolb’s learning cycle, can evoke highly charged reactions. We draw on our OD skills to work with what is happening in the moment, in the belief, and hope, that doing so allows leaders to observe and learn in practice how to work with the messiness and emotion of everyday human interaction. Yet there are moments too when we are tempted to show (off) our own expert, academic knowledge of theory or experience a desire to rescue. This is why we always work as a pair for each Leadership Forum and have supervision as a faculty team, two standard OD practices.

Leaders’ instinct at the beginning is often to look to us as faculty for answers, for us to rescue from the ego state of Nurturing Parent (Lapworth and Sills, 2011). To do so would be to reinforce existing heroic leadership paradigms. Instead we choose to encourage leaders to develop the skills and capability to inquire into, and work with, their own group process. We, like them, need to adopt the practical wisdom (Stacey, 2012) of what interventions in the moment are helpful, ensuring sufficient psychological safety (Mason, 1993) without creating dependency.

And yet, there are times where we exert positional power unambiguously, in itself an example of the complexity of relationships and leading in multiple contexts. We introduce complexity theory, theories of organisational and personal change and improvement science drawing on our expert power (French and Raven, 1959). For each cohort, as programme directors, we select 18 leaders from three assessment centres we design and run; we mark assignments; we supervise and mark masters’ projects which are overt examples of reward power (Mason, 1993). In adopting an OD approach to leadership development, we are not



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suggesting faculty relinquish all power, rather than it reduces reliance on expert, propositional knowing. Power instead is constructed as a dynamic function of being in relationship, as it is for leaders in their work context. To quote Stacey (2012), “we constrain each other at the same time as enabling each other and it is this paradoxical activity that constitutes power” (p. 28). Taking an OD stance allows this to be overtly acknowledged and explored as part of the shifting and emerging context of the work, enabling leaders to be in charge of their own learning, as much as their own leading.

GenerationQ too has been impacted by shifts in its own context. Some faculty members have left and others joined; key contacts have changed at the funder. Midway through cohort five, restructuring at the Business School meant that the separate consulting firm we worked for ceased to exist. We became faculty despite our discomfort with the title. Turning to the programme’s internal context, we realised we needed to provide a more intellectually coherent response to the multiple ontologies, epistemologies and methodologies offered in the technical and relational domains. We created, and now introduce, the idea of multi-level pluralism (Wiggins and Marshall, 2018).

## Conclusion

In adopting an OD approach, we have endeavoured to embed context and the experience of leadership as a social and relational practice into the GenerationQ leadership development programme. In doing so we “allow time and space for groups to discuss, contextualise and develop their own understanding of issues to do with leadership” (Iszatt-White and Saunders, 2014, p. 263). This has resulted in the need to pay attention to the physical environment, teaching style and language and the significant consequences this has for the power relations between leaders and faculty.

If business schools wish to respond to the challenges of an increasingly unpredictable macro level context, to develop leaders who are more human and less heroic and who can work well with others and with uncertainty, taking an OD informed approach may offer a way forward. However, as with leaders embarking on GenerationQ, it requires a willingness from those leading leadership developments to undertake what might be their own development journey, to explore a different kind of relationship between faculty and leaders, to adapt existing identities as experts and to learn some new OD skills. This might then generate the possibility of further research and theorizing about OD informed approaches to leadership development.

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OD approach to leadership development

Appendix

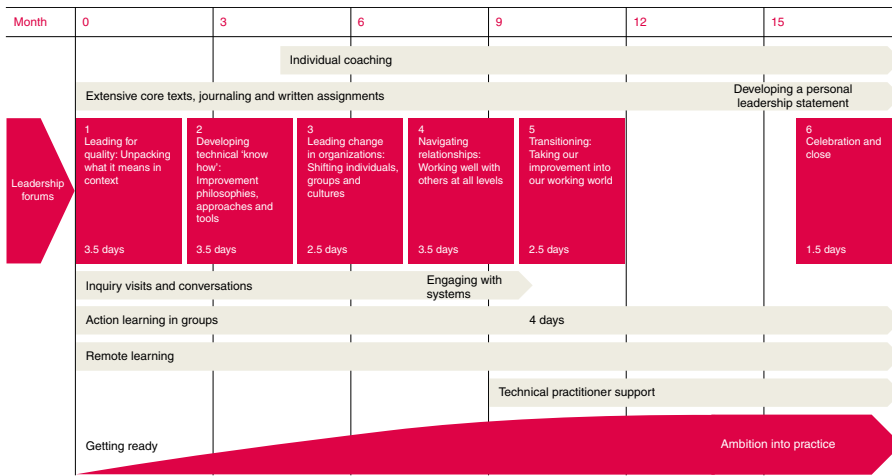


Figure A1. GenerationQ programme architecture

About the authors

Liz Wiggins is Associate Professor of Change and Leadership at Ashridge, now part of Hult Business School. She has over 20 years' experience leading change at Unilever and as a change and communications consultant across the private and public sectors. Since 2009, Liz has been involved in developing and delivering GenerationQ, the highly esteemed Master's degree in leadership for QI. Liz is also an executive coach to clients across a range of sectors, as well as being part of the NHS pool of accredited coaches. Her latest book is "Relational Change", published by Bloomsbury. Liz Wiggins is the corresponding author and can be contacted at: [liz.wiggins@ashridge.hult.edu](mailto:liz.wiggins@ashridge.hult.edu)

Janet Smallwood has worked with Ashridge, now part of Hult Business School, for over 20 years. She has enormous experience designing and delivering complex leadership development programmes that satisfy both the system and individual leaders' agendas. Her interest is where leadership connects with strategy, culture and change. Janet received Masters Degrees in Natural Sciences and Chemical Engineering from Cambridge and the Ashridge Masters in Organisation Consulting. Janet has been involved with GenerationQ, The Ashridge Masters in Leadership (Quality Improvement) since the outset of the programme in 2009. Most of her current work is in the UK health sector.

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