

# Reclaiming Our Values: Lessons from Tragedy

BY ROBERT L. VENINGA, PhD

*"Not until we are lost do we begin to understand ourselves."*  
—HENRY DAVID THOREAU

**S**eptember 11, 2001, is a day none of us will forget. The aftermath of the destruction has been grim—not only in terms of lives lost, but in the toll the terrorist attacks have taken on the nation's self-confidence. Economic growth has stagnated. Hundreds of thousands of jobs have been lost. And many organizations are struggling to regain their footing.

Can any good come from what has happened? Can any management lessons be learned—ones that have significance to health care organizations? I think the answer is yes.

## BE PREPARED FOR THE UNEXPECTED

Although the damage was significant, New York was probably the best prepared city in the country to manage this crisis. A disaster plan was in place before the tragedy occurred. Hospitals and medical/nursing personnel responded quickly. A communication system informed family members where to go for help.

Of course, not everything went well. Assumptions about the strength of the World Trade Towers were erroneous. Although the towers were built to absorb the impact of a Boeing 707, a plane almost as big as the 767 jetliners piloted by the terrorists, they could not withstand the flood of flaming jet fuel. Nor could anyone imagine that the structures would collapse, crushing rescue workers sent to help.

What is the worst crisis your health care organization could face? Test your assumptions of whether your disaster plans are adequate. The fact is, hospitals and public health organizations throughout the country are not ready for biological attack, to say nothing of nuclear radiation. But as *U.S. News and World Report* states, we can no longer hope it never happens. After September 11, we have little choice but to be prepared for the unthinkable.<sup>1</sup>

Why is it important to test your assumptions



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about the crises your organization could face? Because our assumptions become an intellectual straightjacket that prevents us from focusing on what could threaten us. Few in the government, for example, believed that 19 suicidal terrorists could turn four jetliners into guided missiles. It was more than a failure of intelligence, states *Newsweek*. "It was a failure of imagination."<sup>2</sup>

When the *Titanic* sank, claiming 1,500 lives, a cruise ship named the *Californian* was less than 20 miles away—a vessel that could have rescued lives. Unfortunately, it did not respond to the *Titanic's* distress signals; the radio dispatcher was not on duty. The moral of the story is that we can't afford to be asleep at the switch.

## NOTHING SUBSTITUTES FOR OUTSTANDING LEADERSHIP

In his book *Managing Transitions*, William Bridges states that "Big ears and big hearts are common characteristics in effective leaders."<sup>3</sup> By all accounts, New York Mayor Rudy Giuliani's leadership was impeccable in the days after the tragedy because he listened with both his head and his heart. But he did more than that; he coordinated rescue operations. He kept citizens informed about what had happened and what was being done. He appeared at "ground zero" multiple times to encourage rescue workers. And he patiently answered questions from a news-hungry world.

A valuable lesson for health care leaders: When a crisis occurs, be visible no matter what your role is. In times of uncertainty, employees want thoughtful and compassionate leaders who are visible—developing plans, providing encouragement, disseminating information. Remember this important fact: The best management strategy in the world is to *tell the truth*. As management theorist Tom Peters states, "There's a clear defense against cynicism in my organization, and that is to tell the unvarnished truth."<sup>4</sup>

## A GENEROUS SPIRIT LIVES IN THE HEARTS OF PEOPLE

When the call for volunteers went out, government officials were overwhelmed with offers of

support. The response was so great that New York City officials had to publicly state that no more volunteers were needed. Volunteers to the armed forces nearly doubled. Why would young men and women place themselves in harm's way? Part of the reason was patriotism, but there was also a need—a challenge to which young people could respond.

Employees also respond to a challenge. History is full of examples in which people volunteered to help, even when failure was possible. Early in this century, this classified advertisement appeared in *The Times* of London: "Men wanted for hazardous journey. Low wages, bitter cold, long hours of complete darkness. Safe return doubtful. Honor and recognition in the event of success." It was signed E. Shackleton. Ernest Shackleton was looking for a disciplined crew he could take on his quest to discover the South Pole. The next morning more than 5,000 men were waiting outside *The Times* offices. In 1907 Shackleton reached the South Pole with his committed crew. The lesson? We respond positively when challenged to greatness.

#### **INTERPERSONAL CONFLICTS ARE NORMAL, BUT PERSONAL ATTACKS DESTROY OUR SPIRIT**

When human beings meet, conflict often isn't far behind. Conflict is healthy when individuals challenge one another to find solutions to vexing problems. Regrettably, however, conflicts often result in personal attacks that highlight the weaknesses of combatants. Even worse, warring parties demonize one another, ascribing the worst motives to the other party.

This "politics of self-destruction," as it has been termed, produces bitter fruit. Problems are not solved. Relationships become polarized. And consensus decision making becomes the casualty.

One of the best things that resulted from the September 11 tragedy was that petty personal attacks all but disappeared among political leaders. Members of Congress who had bitterly fought one another could be seen worshipping together. Suddenly critical issues—the health and safety of the nation—were at the top of the agenda.

The same politics of self-destruction can often be detected in hospitals and public health organizations. Recently I consulted with several health care organizations that were in the middle of a bitter labor strike. The nature of the issues that separated management and labor did not amaze me. What surprised me were the personal attacks between well-meaning people on both sides of the negotiating table. And the more bitter they became, the harder it was to regain trust and find common ground.

We need new and creative ways to work together

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er in the arena of health care. The self-destructive manner in which we speak ill of one another should give way to a new spirit of collaboration. Fortunately throughout this country a new spirit of togetherness is awakening. During the Vietnam era, the bumper stickers read "AMERICA: LOVE IT OR LEAVE IT." Now the bumper stickers read "UNITED WE STAND."

We need to stand united in health care, reaffirming our common mission to prevent illness and heal the sick. A public health executive softened by the New York City tragedy told me that he was overwhelmed by the simple acts of kindness he saw among New York rescue workers. "Maybe we need to act more kindly to one another where we work," he said plaintively. I pressed him, asking what he meant. "In my agency, we need a new culture of respect. We need to listen to one another. We need to embrace ideas foreign to our own." A civil service worker in St. Paul, MN, whose union was on the verge of a citywide strike, said, "We are toning down our rhetoric in salary negotiations. Wages are important, but not at the expense of tearing down our opponents' dignity."

#### **FEW THINGS ARE AS POWERFUL AS SIMPLE ACTS OF KINDNESS**

Acts of compassion abounded after the terrorist attacks. Citizens from Miami to Seattle gave blood. More than \$100 million in financial aid poured in, the result of a single television appeal. Prisoners in Louisiana, making 40 cents an hour, raised \$11,000 for victims and their families. A shoe store owner noticed women fleeing the World Trade Center barefoot, having abandoned their cumbersome dress shoes. He invited them into his store and gave them comfortable shoes to wear—at no cost.

We need to reaffirm what is important. Nancy Gibbs, who has written more than 100 cover stories for *Time* magazine, put it this way:

[The World Trade Center catastrophe] has become a time of homecoming and house-cleaning, of fathers calling their estranged sons and making confessions, trying to put things right; of old friends getting past small grudges that don't matter anymore and probably never did; of couples renewing their vows and deciding it's O.K. to go in late for work. Single 20-somethings in Manhattan whose families live far away have started having sleepovers, like in junior high. Eighty-year-old parents, the generation that thought it had won the Last Battle, call their grown children every night and cry.<sup>5</sup>

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## COMMUNICATION STRATEGIES

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shows and advertising vehicles that were not in keeping with the image Scripps wished to portray were avoided. Copy in the ads included statements such as, "We were fighting a disease no one could diagnose. Scripps did" and "When my heart failed, Scripps didn't. They saved my life."

To increase the number of consumers choosing Scripps hospitals and physicians during open enrollment, staff also created the new slogan, "Choose wisely. Choose well. Choose Scripps."

"This slogan gave us a much needed call to action in our ads and a directive for consumers during open enrollment," said Stark. "Including the word 'choice' in many of the headlines kept us on message. 'Choose wisely' also gave us a natural transition from the testimonial into the nuts and bolts of the ad, which included our affiliated physician groups, hospitals, toll-free referral number, and website address." As an incentive for consumers to call the referral line, Scripps offered free first-aid guides.

Advertising mediums were also selected wisely. Early on, the committee decided not to pursue television because of its high costs and production challenges, even though Scripps and other area hospitals had used it previously. The team believed strongly that radio and outdoor advertising (billboards, mall kiosk signs, etc.) together with newspaper ads would provide the broadest possible exposure for its limited budget.

Additionally, Scripps participated in more than 40 local employer health fairs and several community events. During these events, Scripps staff offered free health screenings at a striking exhibit that included photographs of patients featured in the campaign, along with the new slogan and tag line. "We also turned our employees into open enrollment ambassadors. This was accomplished by asking them, in


our internal newsletters and posters, to encourage friends and neighbors to choose Scripps. We also gave out internal flyers on the campaign, e-mailed staff, and wrote articles about it in our internal newsletter. Finally, we handed out more than 5,000 license plate frames bearing our slogan," said Clay.

One of the campaign's greatest strengths was in the use of patient testimonials. In Scripps' case, these life-saving examples brought home the importance of choosing the right doctor—the crucial message of any open enrollment effort.

"We believed that a personal recommendation of Scripps from a real San Diegan as opposed to a model would carry more weight with consumers," said Clay. Of equal importance was the continued enthusiasm of the different departments featured in the ads and the pride of all Scripps employees in the new messages.

By all accounts, the open enrollment campaign was a tremendous success. "The organization has embraced the new tag line," says Clay. "Calls to our toll-free referral center continually increased during the course of the four-month campaign, and website hits more than doubled in the first month and rose steadily during the campaign. Our referral specialists reported that they were able to offer referral advice and general Scripps information to callers whose main purpose was to get the free first-aid guide. We are now beginning to track the actual increase in affiliated lives, the use of Scripps services, and our return on investment."

Another signal in the campaign's success is that the Scripps Human Resources Department is now developing a nurse recruitment campaign around the advertising slogan, "Choose Wisely. Choose Well. Choose Scripps." □

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## ANALYSIS

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Pablo Casals, the Spanish cellist and writer, had it right: "The capacity to care is the thing which gives life its deepest significance."

### FAITH MATTERS

The day after the tragedy, I walked past a chapel in a Minneapolis hospital. No formal worship service was taking place, but a steady stream of employees entered. One nurse told me, "Ever since the tragedy, employees have come to meditate. Every department of the hospital has been represented. There are janitors praying with surgeons and there are administrators meditating alongside the families of patients."

Perhaps the greatest legacy of the tragedy is that many of us have reaffirmed something we have long known—life is uncertain, and faith matters. True, our innocence has been lost and the damage done by terrorists will linger. Nevertheless, 80 percent of Americans believe the attacks will make the country stronger, and only 14 percent think that our way of life is fundamentally threatened.<sup>6</sup> From what ashes does such optimism arise? One observer put it this way: "So much that was precious had died, but as though in a kind of eternal promise, something new has been born. We are seeing it in our nation and sensing it in ourselves, a new faith in our oldest values, a rendezvous with grace."<sup>7</sup> □

### NOTES

1. Josh Fischman & Boyce Nell, "A New Breed of Medical Horror," *U.S. News and World Report*, October 1, 2001, p. 56.
2. "The Road to September 11," *Newsweek*, October 1, 2001, p. 41.
3. William Bridges, *Managing Transitions*, Addison Wesley Publishing, Reading, MA, 1991, p. 52.
4. Bob Rosner, "Tom Peters Sounds Off," *Workforce*, August 2000, p. 57.
5. Nancy Gibbs, "Life on the Home Front," *Time*, October 2, 2001, p. 16.
6. "The Road to September 11," p. 52.
7. Gibbs, p. 17.