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### LEARNING FROM THE STORY OF A GREAT LEADER

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#### Abstract

This paper reports on research findings from a larger study which seeks to understand leadership from the experiences of well-known and well-recognised Australian leaders across a spectrum of endeavours such as the arts, business, science, the law and politics. To date there appears to be limited empirical research that has investigated the insights of Australian leaders regarding their leadership experiences, beliefs and practices. In this paper, the leadership story of a well-respected medical scientist is discussed revealing the contextual factors that influenced her thinking about leadership as well as the key values she embodies as a leader. The paper commences by briefly considering some of the salient leadership literature in the field. In particular, two prominent theoretical frameworks provided by Leavy (2003) and Kouzes and Posner (2002) are explored. While Leavy's framework construes leadership as consisting of three "C's" – context, conviction and credibility, Kouzes and Posner (2002) refer to five practices of exemplary leadership. The paper provides a snapshot of the life forces and context that played an important role in shaping the leader's views and practices. An analytical discussion of these practices is considered in the light of the earlier frameworks identified. Some implications of the findings from this non-education context for those in schools are briefly noted.

## LEARNING FROM THE STORY OF A GREAT LEADER

### Introduction

Over the last century, there has been no shortage of theoretical perspectives to help explain the phenomenon of leadership. Such perspectives have described leadership in terms of traits, qualities, and beliefs held by leaders (Horner 1997). For example, early theories last century referred to the “great man” approach that maintained successful (male) leaders possessed certain traits and attributes. Particular types of leadership behaviour theories followed in the 1950s and 1960s and these noted that leadership behaviours are based on leaders who get the job done (i.e. task focused) and those who have the ability to gain trust, respect and warmth with followers (i.e. consideration focused) (Horner 1997). Subsequent writers examined situational theories that maintain effective leadership depends on the specific context in which leadership is operating, arguing that certain leadership styles will be more successful in certain situations (Fiedler 1967). Examples of often cited theories introduced more recently in the literature include servant leadership (Greenleaf 2002); shared leadership (Gronn 2002; House & Aditja 1997; Limerick, Cunningham & Crowther 2002); transformational leadership (Bass 1990) and moral leadership (Sergiovanni 1992). Common to these theories is the centrality of a human centred approach to leading and managing people (Ehrich & Knight 1998). To be noted is that the leadership discovery journey continues, with “new” perspectives emerging seemingly on almost a daily basis.

The focus of this paper concerns the leadership of a well-known Australian who has made a significant and successful contribution to her respective context. This leader is Dr Fiona Wood, medical scientist, plastic surgeon, Director of the Western Australia Burns Service and Clinical Professor with the School of Paediatrics and Child Health at the University of Western Australia. With scientist Marie Stoner, she is co-founder of Clinical Cell Culture Ltd (C3), a publicly listed tissue engineering company recognised internationally for its pioneering work in the treatment of developing skin cultures for burns victims.

Although a well-respected surgeon in her field for many years, Fiona rose to national prominence in 2002 as the surgeon who led the team at Royal Perth Hospital to save severely burned survivors of the Bali bombings. At the Royal Perth Hospital Burns Unit, the surgical team operated for five days to deal with this incredible challenge. Fiona used the ground breaking technique of spraying on skin cells (known as Cellspray) cultured from the patients’ own skin and to complement traditional skin grafts to cover their burns. For her exceptional leadership and surgical skills, Fiona was named Australian of the Year in 2005, and West Australian of the Year in 2004 and 2005. Fiona is a wife and mother of six children.

Fiona Wood’s story is revealed to illustrate the formative experiences that impacted on her direction in life, the driving life-forces that affected her conception of leadership and her beliefs and ideas about being a leader. Her story comes from a larger study which seeks to understand leadership from the experiences of well-known Australians leaders across a variety of contexts. The paper begins with a discussion of selective theoretical literature in the field, then considers the qualitative research methodology that guided the paper. The story of Dr Fiona Wood, an inspirational, innovative and insightful leader, follows.

In taking our approach of trying to better understand the highly complex and contested notion of leadership through the story of such a prominent Australian, we have been mindful of the words of Leon Mann in his 2003 Cunningham Lecture when he noted:

*The subject of leadership can be approached in many different ways. How we approach leadership – who and what we choose to study, the activities and events we attempt to analyse, and the conceptual frameworks we use to understand leadership – determines what we see and therefore what is concluded.*

Our position is that we believe we have much to learn from such individuals and that our research does indeed contribute valuable insights into the holy grail that is leadership.

### **Leadership perspectives – an overview**

Leadership is an elusive term that defies simple definition. What constitutes effective leadership performance and practice has been debated in the literature for many years, with little resolution evident in these debates. Not surprisingly then, it is beyond the scope of this paper to review effectively this vast and comprehensive literature. Indeed, any such discussion is likely to lose the richness of the research data available through the story of our prominent Australian. For these reasons, we draw on two key theoretical frameworks that we believe have considerable potential for analysing this individual leader's story. While we are aware of the contemporary theories of leadership that maintain it is a shared activity and not the province of an individual (House & Aditja 1997; Limerick, Cunningham & Crowther, 2002; Pearce & Conger, 2003), we recognise that there are some individual leaders who deserve to be singled out for the originality of their vision and their tireless work in inspiring others to share that vision. Such leaders are highly influential and do make a difference. The leader whose work is considered in this paper is one such person.

The two leadership frameworks of interest are those put forward by Leavy (2003) and Kouzes and Posner (2002). Leavy (2003) presents three key constructs (i.e. the three "Cs" of leadership) known as the "the great leadership triad". The first "C" is *context*, in which leadership emerges - this defines the opportunities that are available and created. Context is therefore important in shaping leadership practices and behaviour. Gronn's (1999) work is useful since he takes a career perspective of leadership that points to a set of wide contextual factors that shape a leader's action. These contextual factors or life forces are believed to influence a leader's views and practices.

Leavy's second "C" is *conviction*, referring to imagination, vision and drive all of which are essential for leadership. Much of the leadership literature acknowledges that a leader needs to not only communicate a clear vision (Wheatley 1999) and desire to make a difference, underpinned by strong values and a purpose, but also the know-how, will and energy to make it happen (Leavy 2003). As Leavy (2003, p. 57) maintains, "having the opportunity to make an impact ... is not the same as making one". A challenge facing leaders, then, is the ongoing need for sharing and building the vision or conviction with others and enlisting their support and personal commitment to achieve it. The final "C" is *credibility*, identified as the dynamic currency of leadership. Because credibility is dependent upon performance it can be created or destroyed very quickly. Lack of credibility can emerge when leaders' spirits become tired, their stories get old or their followers have either too much or too little faith in their ability (Leavy 2003).

The model proposed by Kouzes and Posner (2002) draws upon five key leadership practices that might be considered the core components of effective leadership. These five practices are *model the way*, *inspire a shared vision*, *challenge the process*, *enable others to act*, and *encourage the heart*. *Model the way* refers to the need for leaders to model the behaviour they expect of others if they want to gain commitment and achieve success. *Inspire a shared vision* refers to the importance of having a vision and inventing a future based around it. This involves leaders committing to it, and enlisting others to share that vision. *Challenge the process* refers to leaders who search for opportunities to change the status quo, to take risks and experiment. *Enabling others to act* recognises that achieving goals requires a team effort. Collaboration and trust are key ideas here. Finally, *encourage the heart* is concerned with recognising the achievements and contributions of others and celebrating successes in a spirit

of community. What clearly underpins each of these five practices is the people side of what leadership is about.

There are some points of commonality between the two leadership frameworks discussed here. For example, Leavy's (2003) notion of *conviction* encompasses most if not all of the five exemplary practices put forward by Kouzes and Posner (2002) with obvious links to *sharing the vision, challenging the process and enabling others to act. Modelling the way* is related to Leavy's construct of *credibility*, since credibility is heavily contingent upon the example leaders set and their leadership performance and behaviour. The importance of the role of context (Gronn 1999; Leavy 2003) in developing and nurturing leadership and providing opportunities for it to flourish adds an important dimension to this discussion. Finally, the strong underpinning notion of both frameworks is the importance of people in the leadership equation: leaders as well as followers must be considered as the individual can achieve very little alone (Stoll & Fink, 1996). The next part of this paper discusses the methodology which steered the study.

## **Methodology**

The main data source for this study was an in-depth semi-structured interview with the identified leader (Marshall & Rossman, 1999; Silverman, 2000) to understand her life history (Dhunpath 2000). Interview methodology was deemed an appropriate data-gathering method since it enables participants to reflect upon and make sense of their experiences (Siedman, 1991, p.3) – these life experiences and life events were our interest (Dhunpath 2000), particularly as they illuminated leadership understandings. In addition to the semi-structured interview, relevant documents about the leader – including websites, magazine articles and newspaper items - were reviewed to augment the interview data (Yin 1989). The semi-structured interview was designed around a set of key issues outlined in an aide-memoir and made available to the participant prior to the interview process (Minichiello, Aroni, Timewell & Alexander, 1990). This was done to encourage her to reflect on the issues to be raised during the interview prior to the interview taking place. Permission was granted for the interview to be tape recorded. Notes were taken by both researchers during the interview. Immediately following the interview, the two researchers shared their reflections on some of the key messages to emerge from the interview. These provided useful markers for later analysis. The full interview transcript was returned for her checking and endorsement. The analysis, in large part, was guided by the procedures outlined by Marton (1988). For example, comments were brought together into categories on the basis of their similarities and categories being differentiated from one another in terms of their variances. The theoretical constructs alluded to earlier in the discussion were used to assist in the interpretation of the themes that emerged from the analysis. A draft of the individual's leadership story was shared with her to seek her agreement that we had accurately captured her thoughts and provided an insightful and authentic narrative. The next part of the paper introduces the leader and then discusses her leadership practices and views in line with the theoretical constructs discussed previously.

### **Fiona Wood – a snapshot**

- Western Australia's only female plastic surgeon
- Head of Royal Perth Hospital's Burns Unit and Director of the Western Australian Burns Service
- dealt with a large proportion of survivors from the Bali bombings, 2002
- Australian of the Year, 2005

## Context: Important Life Forces

Born in 1958 in Yorkshire, England, to a coal miner father and physical education teacher mother, Fiona was the second youngest child of four children in her family. Her parents believed very strongly in the value of education and sport to transform a person's life and encouraged all of their children to achieve their personal best in both academic and sporting ventures (Leser, 2005, p.56). Apart from some early years spent in the state school system, at the age of 13, Fiona moved to Ackworth School, a Quaker school, in a local village nearby. Because of her excellent academic abilities, she managed to complete school a year early. Not only did she excel in academic subjects such as science and mathematics (she was Head Girl and Dux of the School), but she was also an outstanding sportsperson and Sports Captain. As a sign of her varied interests, she received a gold medal for the Duke of Edinburgh award.

While at school, her initial intention was to study mathematics and physics at Cambridge University. However, on the advice of her brother who was at medical school, she changed her plans and followed him there. She studied at St Thomas's Hospital Medical School in London. As a newly graduated doctor, Fiona became interested in burns when she saw a badly scarred four year old child and thought that much more needed to be done to help the child not only in terms of the child's appearance but also in relation to pain and functionality (Leser, 2005, p.56).

It was during her time at training in general surgery in London in 1985 that she met her future husband, a Western Australian born surgeon. In 1987 they migrated to Australia with their first two children. While in Australia, she continued her training in plastic surgery. In 1991, she became Director of the Burns Service of Western Australia, providing her with extraordinary leadership and learning challenges and opportunities. An important professional and personal turning point in Fiona's career was in 1992 when she treated a young school teacher who had burns caused by a petrol fire to 92% of his body. This was a defining time for Fiona: "*I wanted desperately to help this man, but he had almost no skin left to graft*" (Wood in Laurie, 2003 p.21). She worked hard to convince those around her that he could survive this terrible injury. Using a United States invented technology at the time, skin from his groin was sent to Melbourne and cultured by Joanne Paddle under Professor John Masterton and enough skin was grown to cover his body three times over. After a couple of months when it looked as though the patient was on the road to recovery, he got a severe and debilitating complication. At this time, she did a lot of soul searching and questioned whether what she had done was "*personally ... good enough*". A weekend camping trip with her family away from this emotionally stressful situation helped her to realise that "*unless I could believe that my best was good enough then I was not sustainable in this environment*". After the weekend, she returned to work "*with the full realisation that we had all done our best and that this was a success not a failure*". The patient did survive and spent another seven months in rehabilitation.

Another significant lesson that this experience taught Fiona was the personal awareness of "*taking too much of the load myself*". She decided that she needed "*to strengthen the links in the team [to include] psychology and psychiatry*" and other professional fields. As she said, "*we strengthened those links at that time and moved forward as a group stronger for it*". It was at this time that Fiona realised that her future direction was in the field of research in tissue engineering (Laurie 2003) so she could be more effective in helping people like this young teacher. It was against this backdrop of Fiona's own awakening of the need for research in this field that her "*issue*" (Gronn 1999) took shape. It provided an opportunity for her to vision a leadership agenda and exercise leadership skills (Leavy 2003).

## Conviction and Credibility

Fiona Wood is a person who has shown considerable conviction and credibility (Leavy 2003). The next part of her story provides illustrations of how she has demonstrated that conviction and attained that credibility. Each of Kouzes and Posner's (2002) exemplary leadership practices - *challenging the process, modelling the way, inspiring a shared vision and enabling others to act, encouraging the heart* are used as a framework to look more critically at Fiona Wood's leadership.

### *Challenging the process*

Fiona's philosophy of life is one based on enquiry and challenge. As she says: "*you ask one question in research, you may answer it, but you ought to ask another 12. You never actually get to this elusive top of the mountain*" (Wood in Leser 2005, p.59). At the heart of "challenging the process" is the necessity for questioning, risk-taking and experimentation (Kouzes & Posner 2002).

Fiona acknowledges that the young teacher she helped back in 1992/1993, who suffered horrendous burning, was an inspiration to her and propelled her to undertake research to investigate how to grow skin more quickly. A critical part of the experience of working with this person over some months was her self-questioning as to whether she had done her best: "*it was quite a defining time for me personally*". Her work with Marie Stoner over the next couple of years led them to the discovery of reducing the time to culture the skin and spraying the cultured skin cells onto the wounded area (ATSE, 2005, <http://www.cluniesross.org.au/cr2005/woodstoner.htm>). Unlike previous skin culturing techniques that required up to 21 days to produce new skin, the technique perfected by Fiona and Marie Stoner's research took only five days to produce. Years' later, the urgency of the Bali crisis when she and her team of medical practitioners were faced with so many severely burned victims enabled them to "*push ... the technology to new limits*" (Laurie 2003, p.19) and in 30 minutes a portion of skin was processed in an enzyme solution and sprayed straight on to the patients. The aim of this was to greatly reduce the scarring and number of operations needed.

### *Inspiring a shared vision*

An important vision that came to fruition for Fiona Woods and her partner Marie Stoner was the establishment of a burns treatment research foundation, known as the McComb Foundation in 1998. The following year, they established their company, Clinical Cell Culture Ltd, in order to commercialise the intellectual property for spray on skin cells. Registered on the stock exchange in 2002, this company provides spray-on technology to many countries including the United Kingdom, Europe and Asia. The company is valued at tens of millions of dollars which are channelled back into funding research in the field. The impetus for forming the company was to provide the means for the funding of ongoing and future research. As Fiona states,

*"you cannot just sit down and ask [governments] for money. It became apparent to us early on that there's only so much money for research for medicine, so you have to think of other ways to sustain that research"* (Wood in Laurie, 2003, p.21).

Fiona notes that it was a huge challenge to learn about commercialisation since it was such an alien environment from what she had experienced previously. It required her to rely heavily on the expertise and advice of others since she did not have the requisite education and/or knowledge about commercialisation issues and other issues such as finance, marketing and so on. Having to learn the rules of this new game, whilst acting as CEO in the company in

addition to balancing her work as a surgeon, created much stress for her. Yet, she never considered that she might walk away from the venture. The experience confirmed to her that being a CEO was not where she wanted to be and as soon as the company became buoyant she returned fully to her surgical and education work. As she says “*my skill set is in training and education and really my skill set is engaging science into daily practice and that's where I want to be*”. It is this passion, this commitment, this central belief that motivates her and “*what gets [her] ... up in the morning*”.

### *Modelling the way*

Modelling the way refers to leaders living their values, beliefs and principles in practice, sharing these with others by setting a good example (Kouzes & Posner 2002). On contemplating her school days, Fiona notes that she played many roles that point to early leadership behaviour and demonstrate examples of modelling the way:

*“I was a very involved, active, doing kind of kid and turned into an active, involved, doing kind of person. ... It was just the way I was ... I was in that [leadership] role very early on. I was in that role when I'd take my school team down to the athletics pitch to make sure they could change the relay baton, so that we had a chance of winning”.*

When asked to describe leaders whom she admires, Fiona notes : “*I admire people who are positive ... who actually engage and will use their energy to engage with others – to communicate, collaborate, share and move forward in the problem solving scenario*”. This description lies in stark contrast to those people she is critical of, namely, those who “*need to sledge to win*”. Fiona’s description of the characteristics of those leaders she admires very much reflects what others might see in her. That is, someone who is a positive, engaging, energetic leader who uses her skills and resources as well as harnessing the skills and resources of others to problem solve and to strive towards excellence.

Amongst her personal qualities as a leader is her strong work ethic: “*Whatever I do ... I work hard at it because that's what I am ... whether it's doing the surgery or riding the bike or trying to help the kids*” (Wood in Leser, 2005, p.59). Related to this, is her belief about doing better, constant improvement, and never being complacent: “*You have to believe your best is good enough but you can always believe you can do better and I guess that is [my] philosophy*”. This is one of the important messages she shares with school children and others she meets in her ambassador work as Australian of the Year.

Fiona also exemplifies commitment and resilience in her personal and professional make-up. As she says, once you start something, regardless of what happens to you, “*you cannot walk away ... so in anything I have great difficulty letting go until the job is completed*”.

Described by colleagues and journalists as “*superwoman*” for her boundless energy and ability to juggle several large balls in the air at one time, Fiona is quick to point out that she does not expect others to demonstrate the same unwavering energy. As she says, “*I never expect anyone in my team or anyone around me to do what I do*” (Wood in Leser, 2005, p.58). She operates at such a fast and furious pace because she says, “*I've got the energy to operate on a lot of fronts. And I feel like it's a duty almost to do it*” (Wood in Leser, 2005, p.58).

### *Enabling others to act*

Fiona is frank in recounting that her early training as a surgeon did not provide positive examples of democratic work processes or team work amongst her professional colleagues.

*“I had come through a surgical training system that was extraordinarily autocratic ... we were taught by intimidation and ... we were ritually humiliated and we all thought it was pretty normal ... the surgeons were top of the pile and there were no questions asked”..*

Reflecting on medicine today, Fiona notes a shift away from a punitive model of training and an autocratic approach with the surgeon as all powerful to one in medicine that is “*moving towards multidisciplinary teams. Oncology there’s team work; burns is team work. A lot of things are team work and so I’m in a privileged position as leader*”. Teamwork and valuing others’ contributions to the team are central to Kouzes and Posner’s (2002) notion of “enabling others to act”.

In her time as a medical practitioner she observes she has seen “*very dysfunctional teams, no teams and good teams*”. Her own philosophy is one of shared leadership (Limerick et al 2002) and shared respect for others in the team:

*“you [have] to really develop and appreciate the people as they take the journey with you as head of a team because without it you can’t actually deliver the care ... I can’t do all the dressings. I can’t do all the physiotherapy. I can’t do all the nutrition, the psychology, the psychiatry. Not only is it out of my skill set, it’s out of my time frame, and so by the nature of the subject matter ... we have to be solid in teams”*

Fiona is also quick to acknowledge that she has skill deficits and that often one becomes aware of this the hard way. In reflecting on the time when she first established her company, she recalls trying to do almost everything, eventually realising the potential of the skills of multidisciplinary teams:

*“that was a very challenging time because ... I didn’t have the background education and knowledge. I didn’t know the rules of the game ... that was a difficult time because I felt very much that my feet were sliding ... So it’s learning that and so you learn that other people have got skill sets and you work together.”*

Her view of leadership resonates with House and Aditja (1997) who maintain that “leadership involves collaborative relationships that lead to a collective action grounded in shared values of people who work together to effect positive change” (p.457).

Yet for Fiona, leadership

*“depend[s] upon the circumstances and the time pressure is a very obvious example. If somebody is in front and they are in dire straits, in urgent need, you take the lead and you deal with it. If somebody is in a situation where you’ve got a problem to solve, there’s no time pressure, then you can facilitate the leadership potential in your juniors around you to see how they step up to the plate and respond and use it as an educational exercise. So it’s actually very varied depending upon the situation”*

This description is a classic example of “situational leadership”, an important leadership theory that holds there is no best way to lead; what is likely to be effective will depend on a range of factors (i.e. such as the nature of the situation, the ability and willingness of the followers, and other considerations) (Fiedler 1967).

*Encouraging the heart*

An important characteristic of “encouraging the heart” (Kouzes & Posner 2002) is the practice of encouraging and supporting people in challenging times. One way Fiona is

“encouraging the heart” is through educating the community about the importance of science in enhancing our every day lives. In her work as Australian of the Year she shared the passion and excitement that science offers to children and adults alike:

*“It’s something of a mission for me to show that science can make a difference in our everyday lives because I think there is still this idea of scientists locked way in ivory towers. It’s been an education and a great opportunity to travel around schools and take science off the stone tablet and bring it into reality”* (Wood in Bond, 2005)

Related to this is her concern for people in the community to take more responsibility for their own health, wellness and education. An important quest of hers is seeking government support to ensure that at least 50% of the Australian population will be proficient in first aid by 2010. As she argues, these basic skills are absolutely necessary for people in all communities and might well save lives. As a case in point, she referred to the hurricane disaster that hit New Orleans in October, 2005, and commented that the administering of basic first aid may have well prevented much suffering and death (Wood in Bond, 2005).

There is little doubt that her motivation, energy and vision come from her passion and unwavering belief in education and the role science can play in improving the quality of our lives.

### **Fiona Wood’s leadership in summary – some lessons for education**

It is difficult to capture the complexities of leadership in practice for any individual, but the ideas offered by Kouzes and Posner and Leavy provide some useful lenses for trying to do this in our case focus of Fiona Wood. What these lenses help identify are some important leadership lessons that can be “translated” to educational and school settings. Five dominant concepts emerge:

- leadership is driven by a passion and commitment to make a difference, to do better, to strive for excellence, to answer the difficult questions;
- typically, leadership is about a team-based approach, where the skill sets of the team are harnessed to solve the problem and meet the challenges at hand;
- doing the best one can now, and doing better tomorrow are important drivers in leadership;
- leadership involves taking risks and being open to new and complex challenges; and
- learning, as a lifelong journey of enquiry and discovery, is central to leadership

There are clearly themes relating to visioning, drive, excellence, commitment and sharing the leadership journey with others evident here. Such notions are well documented in the educational and wider leadership literature. However, what we see by studying leaders-in-action such as Fiona Wood, are those themes manifested in practice. While such studies are useful for those working in education as they deepen our understanding of leadership as we see them enacted in different organisational and operational contexts, they also re-enforce for us that the “ideals” of leadership argued for so strongly in the literature can, in fact, be a reality.

### **Conclusion**

This paper has provided an insight into the beliefs and practices of a successful leader who has made a significant contribution to medical research and practice in this country. Constructs from two theoretical frameworks (Kouzes & Posner 2002; Leavy 2003) were used to interpret her story more fully. A limitation of this paper is that it provides a mere snapshot

of Fiona Wood's leadership story and life. From what she says, there are many challenges that lie ahead for her and her story is far from over. For example, she noted that finding a cure for scarless healing is her "*professional holy grail*" (Wood, in Leser 2005, p.59). Not content to rest of her outstanding achievements to date, Fiona modestly states that, "*spray-on skin is not a great scientific discovery. It's part of a journey. We have got a lot more to learn, a lot more to do*" (Wood in Madden 2005).

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