**Historical Resources Center: Heritage Services** 

Research Medical Library

THE UNIVERSITY OF TEXAS MDAnderson Cancer Center Making Cancer History"

### Alma Rodriguez, MD tells a story of Leadership Challenges

Alma Rodriguez is a professor in the Department of Lymphoma/Myeloma. Since 2005 she has served as Vice President of Medical Affairs. In an interview conducted in 2015, she responds to a period of institutional turbulence by reflecting on how to communicate the need for institutional change.



# Communicating the Need for Change

My perspective on how or why things have not gone so well is that the magnitude of the change -- the magnitude of the infrastructural change, philosophical change and operational change of this new way of identifying MD Anderson-- it's a transformational change of such magnitude that it would require ... a really major imperative in urgency message to begin with. I don't think that the imperative of the message for change was verbalized.... I think that the imperative for change was seen as a change driven by the vision of a single individual, rather than a change being required by a certain dramatic threat, or a dramatic desire in the organization for the change. It also was not seen as rising, if you will, from a groundswell, up. It was seen as an imposed vision. Most transformation literature says that under such situations, if there isn't an overwhelming threat to the survival of an organization, when the change is being driven by a single individual vision, it is not going to succeed. Or it will have a really difficult time in begin implemented. Because the rest of the group will see it as a threat to their own identity; to their own personal vision, and so on. It's a matter of identity, it's a matter of integrity, it's a matter of preserving, if you will, the wholeness of a group's identity. I think that's what happened.... Change in itself is difficult to begin with, even when it's being mandated under a crisis. It is so much more difficult when there is no perceived immediate crisis and when it is not an integrated vision. At the time, we really did not have a perceived crisis. Dr. Mendelsohn had left us on a fairly good ground; we were productive, we were doing a lot of good work. We were expecting change, but I think we had hoped to all participate in the creation of the change. I think that the change process was imposed on very rapidly, with very little integration, if you will, grassroots.

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# **About This Content**

This interview clip was taken from an in-depth interview conducted for the Making Cancer History Voices Oral History Project. This ongoing project currently contains almost 500 interview hours with MD Anderson institution builders.

The transcript has been edited from the original.

The content is available for public use.

Interview link: https://mdanderson.libguides.com/RodriguezMA

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Interview Subject's name, Leadership Collection; Historical Resources Center, Research Medical Library, The University of Texas MD Anderson Cancer Center.

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