

### Marshall Hicks, MD, tells a story about the Leadership Experience

Dr. Hicks joined the faculty of Diagnostic Radiology in 1998. He served as department chair from 2007-2012 and as President ad interim from 2016-2017. In an interview conducted in 2019, he explains that when he was promoted to department chair from Chief of the Section of Interventional Radiology, he learned how to think differently about leadership and expertise.



### *Leadership Means a Different Type of Expertise*

One thing I recall was learning that leadership is having the confidence to say, “Okay, let’s take a step back and let’s get the information.” Let’s go through the process for learning and understanding and then developing solutions for the challenges, as opposed to thinking that I had to know all the answers. It was more creating an environment where people were sharing information and working together, was the most critical thing. I learned pretty quickly that you’re not going to be an expert in everything --and trusting the leaders and empowering them to help you, advise you, make decisions, help collectively come up with solutions. It’s more about the confidence in your abilities to help bring people together and create solutions than it is about the technical expertise.

It’s not always easy, because people do have strong opinions, strong egos, and some of that was a learning experience for me. I came from a situation in interventional radiology where I was fairly senior to most everybody else, so people have deference there. But when it’s more your peers that you’re now leading, it’s a learning experience in terms of letting people express their opinions, maintaining the order, the calmness of letting people express their views. Asking people for their opinion. Understanding different personality types and making sure that you could engage everyone, but setting a tone as well about professionalism and civility within a discussion, and making sure that that’s pretty clear how we’re going to treat each other and how we’re going to make decisions and work together.

People can give pretty strong emotions. More often than not, beneath the emotions people still want the same thing. Sometimes they maybe are just blinded to listening to somebody else. Some of it is just making sure points of view are put out on the table in a calm, professional way. Sometimes you have to leave it for another day, too. You have to get the discussion out there, let people vent, let the emotions calm down and bring it back another day, as opposed to trying to force something that day. It’s being patient and being resilient and understanding that you’re not afraid to talk about it, to bring it back, to get resolution on it. It is important to let people be heard but also understanding that amygdala, that emotional basement that people are in sometimes, isn’t where you can have rational thinking, so you have to let that tone down. People start to realize here are the points of view that maybe I need to be a little more compromising or accepting, they’re not always going to get everything they want every time. It’s working together and what do we really want to accomplish, these are our principles, is what we really want to aspire to?

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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:** <http://mdanderson.libguides.com/HicksME>

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