



## Review Article

# S-5 formula for leadership development

Balachandra Adkoli <sup>1,\*</sup>

<sup>1</sup>Centre for Health Professions Education, Sri Balaji Vidyapeeth (Deemed to be University), Pondicherry, India



### ARTICLE INFO

#### Article history:

Received 16-11-2021

Accepted 13-12-2021

Available online 13-01-2022

#### Keywords:

Leadership

Mentoring

Feedback

Reflection

Competency Based Medical

Education

Professionalism

'S5 Formula of Leadership

Development'

### ABSTRACT

Leadership is an area of perennial interest cutting across all fields of knowledge, including health sciences. The current models of leadership emphasize the skills and techniques derived from behavioural sciences and management. S-5 Formula is a developmental model, evidenced by learning theories and anchored in ancient Indian wisdom. The leadership journey begins by Setting a high goal (Sankalpa) to achieve something big, different and useful. This journey is aided by a Self- study and reflection (Swadhyaya). It gains Synergy (Satsanga) through collaborative learning, mentoring and feedback. The next phase is Service (Seva). Finally, the leader does act of Surrender (Samarpan), giving back to the society thus becoming an instrument of change. The theoretical framework behind these components and their implications for practice have been discussed.

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## 1. Introduction

Leadership is a crucial issue in every field of human activity. Leaders make a difference to the organizations as well as to the society. While leadership matters in every field, it is of great significance in medical education, which prepares the doctors to deal with life and death situation. The quality of health care and wellbeing of the people are largely determined by competent and caring medical professionals who lead the health team. In a complex, interdependent world, leadership is even more challenging. COVID pandemic has exposed the vulnerability of the medical profession and the need for change.

Of late, the regulators have recognized the need for strengthening leadership right from the undergraduate level. National Medical Commission has redefined the role of Indian Medical Graduate (IMG) as a team leader, interpersonal communicator, professional and lifelong

learner besides serving as a clinician.<sup>1</sup> These attributes underpin leadership training. The National Assessment and Accreditation Council (NAAC) and the National Education Policy, 2020 also emphasize the role of leadership training in health sciences universities.<sup>2,3</sup>

However, explaining the dynamics of leadership has been a jigsaw puzzle. The field of leadership has been enriched by the theories of learning derived from behavioural sciences, sociology, psychology and management.<sup>4</sup> A systematic review of leadership development programs reveals a narrow focus on individual-level rather than system-level outcomes.<sup>5</sup> There has been no effort to blend the Western theories with the Indian Philosophy.

## 2. The Search for a New Formula

The S-5 Formula of Leadership Development is an attempt to view leadership as a long developmental journey (Fig 1). It identifies the process, and the major milestones in the development of leadership which begin with letter 'S' in English and Sanskrit. (Box)

\* Corresponding author.

E-mail address: [bvadkoli@gmail.com](mailto:bvadkoli@gmail.com) (B. Adkoli).

The leadership journey begins by **Setting a high goal** (Sankalpa) to achieve something big, different and useful. This journey is aided by a **Self- study** and reflection (Swadhyaya). It gains **Synergy** (Satsangaa) through collaborative learning, mentoring and feedback. The next phase is **Service** (Seva) or application of competency leading to performance. Finally, the leader has to **Surrender** ego (Samarpan), giving back to the society, thus becoming an instrument of change.

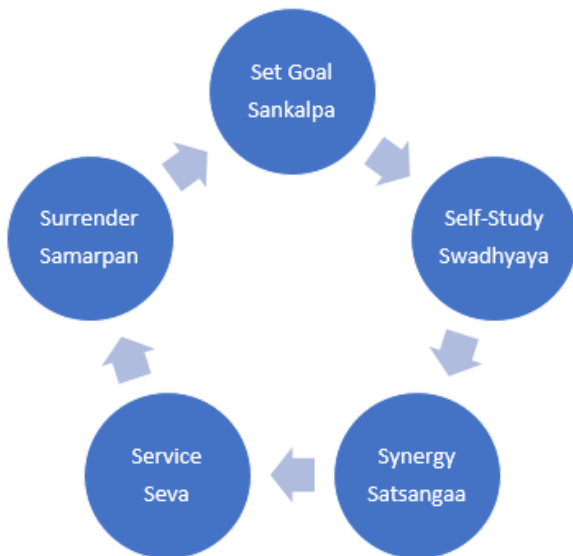


Fig. 1: S-5 Formula for leadership development (Adkoli BV, 2020)

### 3. S-1 Set high Goal (Sankalpa)

Leadership begins by setting up a high goal which is tough and seemingly impossible. The word Sankalpa in Sanskrit means making a firm resolution.<sup>6</sup> All leaders who made a difference to the mankind were self -determined to set a high goal (Sankalpa) and they chased their goals for a life time, braving innumerable odds and failures. While setting the goal, one should examine one's purpose of life, unique identity and strengths. The second consideration is to foresee how the goal is going to benefit the society.

While every organization has its own vision and mission to guide its functioning, a young leader should check whether his/her goals are in alignment with the vision and mission of the organization. If not, it is better to quit the organization and join another service, which is more satisfying. Once the goal is set, it can be converted in to tangible objectives and short term outcomes. Prioritization becomes important here. The leader should put in cent percent of effort on the task in hand, achieve it and move forward. Hurdles are expected, but the leaders should have the learning agility which is the next aspect of leadership.

Table 1: Setting Goal (Sankalpa): Implications for medical education

1	Medical colleges should help students to discover their strengths, and set high goals such as becoming a great teacher, clinician, researcher, innovator, entrepreneur, or a civil society leader
2	The leaders in the profession should be invited to give motivational talks about their struggle, success and failures
3	Help the students to convert their goals in to tangible outcomes (milestones) with a dedicated time frame
4	Train the students in handling success and failures

### 4. S-2: Self-study (Swadhyaya)

The term Self-study is used in a wider context to include all activities which are self-driven or self-directed. It includes self – reflection, self-learning, self - practice, self-audit, self-accountability and self - assessment using one's power of self-determination.

Most of these skills are developed during early childhood by emulating the behaviour of elders at home. It is nothing but good culture called 'Sanskar' in Sanskrit. Self-study builds a strong foundation for the development of personality including leadership skills. Among them are reflection, critical thinking, emotional control, empathetic listening, problem solving and creativity. Along-with the skills, one should inculcate human values such as truthfulness, honesty, forbearance, obedience, humility, kindness, compassion, fellow feeling, brotherhood and love.

Acquisition of self-study skills require a holistic approach to life style management by a) cultivating healthy food habits (Aahar), b) exercise and relaxation (Vihar), c) control over the mind (Vichar) and d) good practices (Vyavhaar). The ancient Indian wisdom of Bhagawad Gita and the practical techniques such as Yoga, meditation, and prayer can play a key role.<sup>7</sup>

Table 2: Self- study (Swadhyaya): Implications for medical education

1	Self-study begins at home; The elders should demonstrate and role model virtues, to develop emotional control, empathy, sharing, caring, tolerance, and universal brotherhood; They should give opportunities for reflection
2	Help students to develop self-study skills, reading, listening, browsing, seeing, watching role models.
3	Harness the power of information technology and social media. However, use them judiciously.
4	Document all experience by maintaining a diary or e-portfolio to aid reflection
5	Give dedicated time to yourself every day to reflect and self-monitor your progress
6	Adopt a healthy life style, food, exercise, positive thinking and ethical behaviour.

### 5. S-3: Synergy building (Satsanga)

Self-study is inadequate and incomplete without the socialization or collaboration with peers and support from mentors. The learning gets synergy in schools and colleges with formal and informal methods of interaction. Collaborative learning using blended learning (combination of formal and e-learning modalities) can be used effectively to develop technical skills as well as soft skills like interpersonal communication, team building, and networking. Group assignments, projects and field work should form a part and parcel of the curriculum at all levels of education. Extensive feedback combined with mentoring arrangement goes a long way in building up the synergy.<sup>8,9</sup> The concept of Community of Practice (CoP) proposed by Lave and Wenger is highly relevant here to support and motivate the young minds.<sup>10</sup> Mentoring practice dates back to the ancient Indian practice of Satsanga where the saints and philosophers sat together and shared their insights to create a mass movement.

**Table 3:** Synergy building by Collaborative learning (Satsanga): Implications for medical educators

1	Promote a collaborative learning environment in classrooms, lab, OPDs, wards, workplaces and communities
2	Engage students in Project work with shared goals and responsibilities to develop a Community of practice
3	Give feedback, receive feedback, act on the feedback and develop an institutional culture of feedback
4	Introduce long term mentoring programs as a part and parcel of the curriculum
5	Develop and encourage networking skills, using effective IT and communication skills, however driven by ethics and values.
6	Design and implement strategies of 'transformation' rather than 'information'. Challenge the learners with new tasks and support them by Community of Practice.

### 6. S-4: Service (Seva)

As the journey continues, it is now time for the leader to apply the knowledge and skills learnt through Self-study (Swadhyaya) and Synergy (Satsanga) to life situations. The word Seva refers to self-less service, which is the core element of leadership. The attainment of goal requires engagement in service by a large number of people with different skill sets. It is therefore necessary for a leader to extend his/her network within the profession as well as beyond the profession. The crucial issue is how to transform others. Transforming oneself and demonstrating success is perhaps the most effective intervention while dealing with team building, effective communication and delegation of tasks.

For performing quality service, resource mobilization is an essential requirement. In a knowledge society of today,

resource generation is much easier if the products and services can be converted in to Intellectual Property Rights. With the shift in the emphasis from routine research to innovations leading to copyrights, patents and technology transfer to industries, the leaders in the future can exploit these developments to their great advantage.<sup>3</sup> Another value addition is the power of information technologies, thanks to the developments such as digital India, use of Artificial Intelligence (AI), Big data analytics, Machine Language (ML) besides a host of social media.

This stage may pose a lot of challenges because of the 'silos' in the system and resistance to the change which is inherent in any organization. A leader has to use appropriate conflict management strategy to anticipate, prevent, and resolve conflicts.<sup>11</sup> Failures and setbacks are most likely at this stage, mainly due to the competition coming from within as well as outside. A leader should be able to resolve conflict, and demonstrate good governance.

**Table 4:** Service (Seva): Implications for medical educators

1	Extend your service by networking; Use effective communication, team work, delegation and conflict management skills.
2	Mobilize resources by harnessing IPR activities; Innovations and research hold the key for generating resources
3	Sharpen and continuously update your skill sets by unlearning, and relearning new skill sets; Ride on Information Technology, but don't ignore soft skills
4	At this stage failures are unavoidable. Be equanimous in success and failure; In success, give credit to the team; In failure, take responsibility; Pause for a while, reflect, meditate and show resilience
5	Stay connected with the family and relationships; Maintain work-life balance to prevent burn out at this stage.

### 7. S- 5: Surrender (Samarpan)

This is the final stage of leadership development which many leaders find it difficult to handle. This is because of 'attachment to the post or position' which is often addictive. Change is the only unchangeable feature of any society and leadership is not an exception to it. Surrender in S-5 formula has two meanings. One, it refers to shedding ego, and sharing the expertise with the next level. The more profound meaning of Samarpan is the spirit of offering to the universe or almighty becoming a mere instrument of change. At this stage, the leader becomes detached to the success or failure, a state which is described as Sthitaprajna by Lord Krishna in Bhagawad Gita.<sup>7</sup>

### 8. Evidence for S-5 Formula

S-5 Formula is backed by well- established learning theories, at the same enriched by ancient Indian perspective

**Table 5:** Surrender (Samarpan): Implications for Medical Education

1	It is time to quit gracefully and shift gear to self-less service, by putting ‘ceiling on desires’.
2	Identify few mentees who have a potentiality to carry forward your mission
3	Shed your ego, share your experience and wisdom. But don't enforce your views because you lived in another time and your trick may not work! Give your honest opinion only when asked.
4	Do not expect that you will be remembered for a long time; Be humble and grateful to God as you were chosen to become His instrument for a noble cause.

of holistic living. The setting of high goals is backed by the theories of motivation.<sup>12</sup> According to the theory of self-determination (Ryan and Deci, 2000), there are three key factors which govern the motivation and performance: autonomy or freedom given to the learner, perceived competency and relatedness, or the extent of support available to the learner.<sup>13</sup>

Self-study, through reflection and reflective practice have been supported by the works of Schon<sup>14</sup> and experiential learning cycle proposed by Kolb.<sup>15</sup> Further, S-5 formula gives a holistic view by connecting self-study with the Indian concept of Swadhyaya which is a part of Ashtanga Yoga (Eight limbs of Yoga) propounded by Sage Patanjali.<sup>16</sup>

The concept of Synergy (Satsanga) is backed by theories which suggest collaborative learning via social construction.<sup>17,18</sup> The theory of Zonal Proximal Development (ZPD) by Vygotsky, supports mentoring.<sup>19</sup> The concept of Community of Practice (CoP) by Lave and Wenger<sup>10</sup> supports the Synergy component of S-5 formula. Looking back to Indian wisdom, the Gurukul system practiced in ancient India is a fine example of Community of Practice.

Service or Seva is at the heart of Indian philosophy. While taking care of one's body is the supreme duty or Dharma (Shareeramadyam khalu dharma sadhanam), it emphasizes that this body is meant for serving others (Paropakarthamidam shareeram). Finally, the stage of surrender (Samarpan) is the essence of Bhagavad Gita which believes in doing ones' duty for sake of duty, without expecting results, which of course follow automatically as per the law of Karma.

## 9. Conclusion

S-5 Formula is just a step forward to shift the attention of scholars towards a holistic approach. The potential leaders should recognize the dynamics of leadership as a long journey of setting their goals (Sankalpa), pursuing self-study (Swadhyaya), gaining synergy (Satsanga), performing self-less service (Seva) and finally surrendering (Samarpan) to the society whatever wisdom they have gained in

life. Medical education should underline leadership as a longitudinal curricular thread. However, the training has to begin at homes and schools.

Any formula will require practice and testing before it becomes established as a theory to guide further practice. What is needed is integration of these concepts in to the medical education, rather than grafting isolated pieces of information.<sup>20</sup> S-5 formula therefore, requires further deliberations by the academic fraternity to see whether it makes sense or merely a rhetoric.

In conclusion, S-5 Formula is a shift from reductionistic approach to a more holistic approach. When the world is undergoing most difficult times, it is prudent to bank upon our strengths and wisdom, which we gained in the past.

## Acknowledgments


The author is grateful to the institutes and academic fraternity of JIPMER, Pondicherry, AIIMS, New Delhi, and Shri Balaji Vidyapeeth (Deemed to be University), Pondicherry, for giving insight in to the leadership.

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### Author biography

**Balachandra Adkoli**, Director  <https://orcid.org/0000-0002-4873-0307>

**Cite this article:** Adkoli B. S-5 formula for leadership development. *J Educ Technol Health Sci* 2021;8(3):88-92.