

colleagues, it can be complicated because you're editing someone else's editing, so it's important to check your ego at the door. Dr Herron suggested specifically that freelancers try to find another editor that they can trust and learn from because, most of the time, freelancers are working alone. Ms Bohn also added to this by emphasizing the importance of having a more organized approach when meeting with someone and suggested cross-teaching so you can learn from each other.

### Working Remotely

Ms Bohn began by mentioning that the skills are the same, but mentoring someone that you aren't in the same room with requires a unique approach. Ms Goodoff chimed in and agreed that the core editing skills are the same, but the presentation of the information is different when working remotely. She had to learn a lot of new technology and noted that you don't get the same chance to rely on audience reactions, but you can write a tentative script while presenting on Zoom. Dr Herron added the suggestion that you can post a sticky note with a person drawn on it near your camera; that way you have "someone" to talk to and look at near the camera, which will help your audience connect with you. Ms Bohn closed by suggesting a fake commute at home, something that signifies the beginning and the end of your workday.

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## REMOTE BUT NOT ALONE: NAVIGATING DIFFICULT PERSONALITIES WHEN YOU WORK FROM HOME

### Speaker

**Melissa Christianson, PhD**, *Whitsell Innovations, Inc., Chapel Hill, NC*

### By Stacie Marsh, MPA, CPH, GPC

Collaborative medical writing requires leadership from professional medical writers to guide teams of people toward the common goal of completing documents with clarity, precision, and adherence to third party guidelines, often within challenging timeframes. Medical writing teams typically include groups of individuals from widely varying backgrounds, areas of expertise, priorities, pressures, and

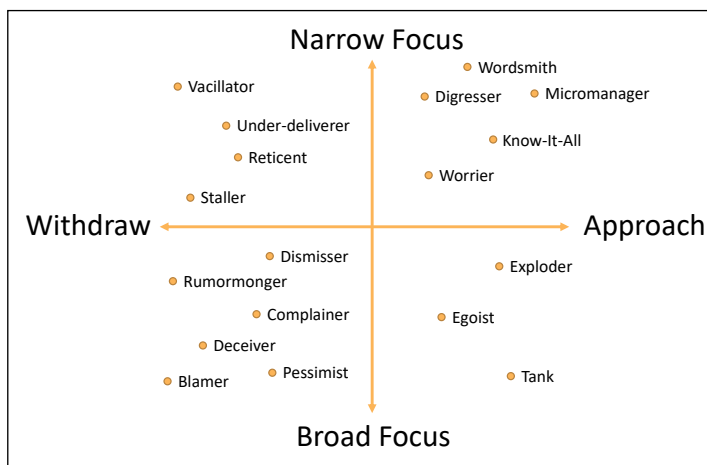
communication styles. Medical writers must foster effective teamwork in order to successfully lead their teams toward achieving their common goal.

The pandemic has forced more writing teams to collaborate in a virtual environment, requiring medical writers to recognize and navigate team dynamics and interpersonal intricacies in creative ways. Dr Christianson's presentation at the American Medical Writers Association (AMWA)'s 2021 Medical Writing and Communication conference identified the most common personality types among difficult members of medical writing teams and provided specific strategies for navigating these traits in a virtual environment.

### Defining and Recognizing Difficult Behaviors

The first step in dealing with difficult behaviors is recognizing that they exist. Although perceptions of difficult behaviors vary by the individual assessing the behavior, difficult behaviors and attitudes typically refer to those that are misaligned with the expectations of the writer and the team.

Dr Christianson illustrated the most common types of difficult behaviors in a behavior categories axis (Figure). Group 1 includes those who are narrowly focused with tendencies to approach a project in a way that mismanages the writers time, attention, and processes, and ultimately impedes the writer's ability to move a project forward in an optimal timeframe. Examples of Group 1 traits include micromanagers, digressers, know-it-alls, worriers, and wordsmiths. Those in Group 1 may be concerned about proving their own worth or getting blamed for less-than-optimal outcomes for reasons such as job vulnerability or being new in a position with perhaps lesser credentials than other team members.



**Figure.** Top left (Group 3); top right (Group 1); bottom left (Group 4); bottom right (Group 2).

Group 2 includes those who are more broadly focused but aggressively approach projects. These behaviors conjure

an elephant barreling through a meeting, causing chaos in their wake. Examples include those with strong egos, often short tempers, and who are prone to derail a team's progress in unpredictable ways. Individuals displaying these tendencies may not realize the value of writers in handling important team functions.

Group 3 includes those who are more narrowly focused on a project yet withdrawn or disengaged from specific tasks at hand. These individuals tend to be reticent to voice their opinion or make an important contribution until a problem arises, vacillate, and fail to provide clarity to move forward, stall a meeting's progress, and generally under-deliver on their intended roles and contributions. Reasons for these behaviors can be attributed to cultural complexities, competing priorities, and simple unawareness of what is expected of them as part of the medical writing team, among others.

Finally, Group 4 includes those who approach a project from a broad perspective but whose actions withdraw from the functions or goals of the team. Individuals displaying these characteristics tend to be pessimists, complainers, rumormongers, blamers, deceivers, and dismissers. Unfortunately, these are often the most common types of difficult behaviors and influence the tone and dynamic of entire teams in a negative manner. These behaviors are often exacerbated by—and sometimes a result of—ineffective communication from project leaders, including medical writers leading cross-functional teams.

### Dealing With Difficult Behaviors

Learning to proactively identify potentially challenging team dynamics and communication styles—and the context in which these behaviors may be based—can help writers anticipate and prevent problems before they arise, or at least limit their impact.

Dr Christianson suggested early actions, ongoing strategies, and meeting solutions for each of the 4 groups. Following these practical tips will ensure that cross-functional teams collectively and efficiently achieve their common goal of producing a clear, compelling, and compliant final product. The presentation included practical strategies to assert writers' leadership roles and assess team member characteristics in order to identify potentially difficult behaviors and mitigate their impact early in a project. For example, writers should confidently

articulate their qualifications and their roles as writers and project managers at the outset of a project, followed by detailing the roles, expected contributions, and associated timeframes for all other team members.

Writers may want to consider holding a pre-kickoff meeting with a team representative prior to the formal kickoff in order to get a feel for team dynamics and personality traits. During the kickoff, writers should encourage team members to turn their cameras on in order to match voices/behaviors/tones with names and visibly monitor problematic behavior. The kickoff meeting should establish ground rules and timelines expected of all team members for the project duration. Writers may also want to consider assigning a note taker for meetings so they can focus on the task at hand as they tune in to team dynamics.

**Medical writers have immense power to lead writing teams in a way that fosters productive, collegial behavior.**

Clear and consistent communication is paramount. Writers should be very clear about what they need from individual team members and communicate with them directly if needed. Timed agendas sent in advance of each meeting, as well as emails using the “bottom-line-up-front” approach are also helpful in keeping difficult behaviors in check.

Medical writers have immense power to lead writing teams in a way that fosters productive, collegial behavior. If difficult behaviors arise despite adherence to these proactive strategies, writers should remain professional, positive, solutions-oriented, firm, and confident in their leadership to keep teams moving forward toward their common goal.

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