

The Consultant as a Performer: Walking the Walk¹

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There is a distinct difference between the skills required to be a successful studio musician and a concert virtuoso, a forensic pathologist and a surgeon, an insurance actuary and a successful insurance salesperson. Although both individuals draw from the same informational databases, knowledge sets and expertise, the element of time and interaction differentiate between them. In the pairs named above, it is the latter person who steps into the role of being a performer.

In a similar fashion, there is a distinct difference between the skills required to teach, research or write about performance psychology and those skills required to be a successful performance consultant. As a consultant assisting performers, you yourself are a performer. Your success as consultant will be determined largely by *how you perform* as a consultant, rather than how much you know. All of the principles, skills and techniques that you have learned about enhancing performance and helping others are applicable to your own performance.

This presentation reviews common elements of peak performance and addresses how those elements apply to the context of performance consulting. I will provide examples from a variety of consulting situations, including one of the most demanding aspects of being a performance consultant – making public presentations. I conclude by

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offering some specific recommendations for those interested in pursuing this area of consulting.

There are three works that serve as foundation for my presentation today. The first is the book that I had the pleasure of co-authoring with Kate Hays, *You're On! Consulting for Peak Performance*, published by APA in 2004. This book was one of the first to formally investigate whether the principles of peak performance that had been researched and validated in sports and with athletics were applicable to other non-sporting areas of performance. We interviewed some of the top performers of North America from three performance domains – the performing arts, business, and high-risk occupations such as medicine and law enforcement – as to what distinguished between those performances that were truly exceptional, and those that were simply okay. I highly recommend the book to any person considering performance consulting. The second resource is an article that was published in *The Sport Psychologist* in 2005 in which I discuss the importance of making contextually intelligent decisions, and offer a framework for beginning to think contextually. The core of today's presentation comes from the chapter that I am contributing to *Performance Psychology in Action*, edited by Kate Hays and scheduled for publication by APA in either late 2007 or early 2008.

Please note that I am not providing paper handouts today. Instead, I am providing a link on my web site where they will be posted. Please either take one of my cards or simply copy down the address and you can download a summary of my notes, and can find additional references and topics of interest.

Learning to Walk the Walk

Common Elements of Peak Performance

Our research (Hays & Brown, 2004) indicates that top performance includes certain features: a foundation, preparation, mental skills, the capacity to cope with stress, and the process of performance. (For a more detailed review of the literature and topic, the reader is referred to the original source.) Each of these elements has particular relevance for the psychologist as a performer.

Foundation

Regardless of the performance domain, certain features serve as a *foundation* for successful performance: *basic abilities*, a *coherent sense of self*, and *care of the instrument*.

Basic abilities. For the performance psychologist, basic abilities are often learned in the classroom; they are the common foundation from which all performance psychologists draw. They differ from those of traditional psychology training by virtue of the breadth of knowledge that is required. Most graduate programs in clinical or counseling psychology will provide an excellent foundation of relationship skills as well as change skills – a framework for helping clients do things differently. Many graduate programs will also provide basic knowledge and models for consulting with systems.

When I first embarked into the world of performance consulting, I considered myself proficient in these three basic abilities and initially assumed that I would be ready to jump right in and performance consult with the best of the pack. But I rapidly discovered that there was a fourth area, an entire body of knowledge of performance excellence, that was not part of my traditional clinical training (Csikszentmihalyi, Abuhamdeh, Nakamura, Elliot, & Dweck, 2005; Hanin & Hanin, 2000; Hardy, Jones, & Gould, 1996; Jackson & Csikszentmihalyi, 1999; Nideffer, 1985). Knowing how to

sustain excellence over time and under pressure is different from either alleviating suffering or helping people lead normal lives. Although positive psychology has offered a much-needed shift from the field's traditional pathological focus, it still does not provide sufficient for working with elite performers.

There is an incredibly rich array of models of performance excellence that historically have been investigated in the exercise and sport sciences. The performance consultant needs to know these models, and to integrate one or more models into a coherent framework for helping others achieve performance excellence. We (Hays & Brown, 2004) also found that performance psychologists need to have fundamental knowledge of the physiological aspects of performance. The breadth of knowledge required may vary according to the physical demands of the particular performance domain. At the very least, it is imperative to recognize when a performance issue may be physiologically-based rather than a result of cognitive or emotional factors. For example, focus and concentration in business settings may improve simply by eating more prudently during the day; musicians may audition better by having an energy drink rather than water when the interview process lasts over 3 hours.

Part of a performer's foundation includes having a coherent sense of self. In interviews with elite performers and successful consultants, we consistently heard that it is important to "know yourself" (Hays & Brown, 2004). As applied to the performance psychologist, this goes beyond having a "toolbox" of basic abilities; it involves having a clear sense of one's personal and professional philosophy, as well as clarity in one's values. Perhaps most importantly, it means that one's actions are consistent with their values and philosophy.

The third foundational aspect is care of the “instrument.” In order to be an elite performer, you not only have to “know your stuff” and have a good sense of who you are; you also have to take care of yourself (the “instrument”). This means attending to your physical and emotional health, nutrition, and allowing down time to recover.

Preparation

Preparation includes three dimensions: knowledge, active intentional learning, and practicing the delivery.

Elite performers prepare, in part, by acquiring knowledge of (a) what one is offering, (b) the targeted audience and (c) oneself. If you are a performance psychologist, what exactly are you offering? How does it differ from psychotherapy? Proposing that you will “improve performance” sounds nice--but offers little substance. This is where knowledge of one or more models of performance excellence is required. For example, in my consulting I rely extensively on Nideffer’s (Nideffer, 1985) attentional model of performance. This framework proposes that success in any situation is dependent upon three factors : (1) knowing the key elements that are essential for success, (2) maintaining attention to those essential elements, and (3) ignoring distractions.

Successful performance also requires knowledge of the audience. Prior to any major encounter, intervention or presentation, one needs to engage in a thorough, detailed audience analysis (Mandel, 1993). This involves clarifying your objectives and goals for the activity, as well as clarifying issues that crucial in navigating the system in which you will be operating. Is the audience receptive, challenging or hostile? How familiar are they with the concepts and terminology that you typically use? Do they have preconceived opinions about the subject matter or of you as a speaker? What are the

constraints of your interactions? In addition there are a series of issues that are essential in selecting effective communication: What are their values? What are arguments and examples that are likely to elicit a positive response? What are examples that are likely to result in a negative reaction? By simply taking the time to clarify these issues, you can increase you effectiveness and avoid many well-intended, but careless blunders.

Within every performance domain, performers' lives and livelihoods are impacted by similar issues, concerns, and themes. For example, all performing artists must address the stresses of auditioning; performers in the business world wrestle with the speed of change, expanding global markets and the seductive power of wealth. In the world of performance psychology, current issues include credentialing of performance/sport consultants, how traditionally trained psychologists can develop proficiency in this new and emerging area, and how to address the diverse backgrounds of individuals currently practicing in this area.

Knowledge of the audience also requires familiarity with the language of the performance domain. A person can be extremely knowledgeable but painfully ineffective if he or she does not know the language. For example, imagine attempting to consult in France and not understanding or speaking the French language. In a similar vein, every performance domain has its unique language and customs – business people have 360's, medical residents have M & M's, and dancers wish others good luck by saying a word that is an obscenity (in French, of course). The best consultants, however, go even beyond learning the language: they learn how issues that are common to the particular performance domain play out and impact the unique context or setting in which they

consult. This ability to tailor interventions to the specific setting is an aspect of contextual intelligence (Brown, Gould, & Foster, 2005; Sternberg, 1985; Terenzini, 1993)

The third area of knowledge essential for peak performance is knowledge of self. Every performer has a unique “recipe of emotions” when he or she performs optimally (Hanin, 2000; Hanin & Hanin, 2000). Contrary to popular belief, being extremely relaxed does not always result in optimal performance; many performers excel when the emotional mix includes what would typically be considered negative emotions – nervousness, fear and anger. Knowing your personal ideal performance state is essential for consistently achieving that state. The reader is referred to the work of Finnish sport psychologist, Yuri Hanin for an in-depth discussion of this topic.

It takes 10 years or 10,000 hours of active intentional learning to become an expert in any area of performance (Ericsson, 1996). This is the essence of preparation: putting in the time to practice one’s craft, developing familiarity with the process to recognize patterns and develop automated responses, and over-learning the process so it can easily be replicated under pressure.

The final dimension of preparation involves practicing the delivery. Imagine a football team that scouts the opposing team, decides what plays to run, but never actually practices its plays before the conference championship. Or a musician who selects the music for a performance, reads through the music, but never picks up her instrument to actually practice the piece. Such behavior sounds ludicrous. Every budding performance consultant knows that the closer practice conditions replicate actual performance conditions, the greater the likelihood of success when performing under

pressure. Nonetheless, I am constantly amazed with the number of bright, intelligent psychologists who never actually practice delivering their presentation.

If presenting a program on managing stress, it is not sufficient merely to design the program or even write out in detail what you want to say; a person needs to actually practice the delivery. This is crucial for formal presentations, but equally applicable for events that are routinely experienced within individual consultation. For example, clinical practicum training traditionally involves extensive practice of active listening techniques. The performance consultant needs to be knowledgeable not only about the content of performance consulting, but the process of communicating that content as well. As the consultant rehearses how to explain concepts or provide instructions and directives, these actions become more fluid and efficient for delivery under pressure. The closer that practice conditions can replicate the actual performance conditions, the more effective the practice.

When I mentally rehearse a presentation, I am incredibly brilliant, poised and smooth in my delivery – at least in my mind’s eye. Periodically, I hold a reality check by videotaping a presentation. I become brutally aware of the lack of congruence between self-perception and what is revealed by the camera. Video analysis is a common tool in performance consulting; I highly recommend it for the consultant.

Mental skills.

Top performers in business, performing arts, and high-risk performance domains all employ the same array of mental skills as those of elite athletes (Hays & Brown, 2004): goal setting, activation management, imagery, thought/attention management, having a performance focus plan, refocusing strategies, and a pre-performance mental

readying plan (Weinberg & Gould, 1995; Williams & Krane, 1997). Because the consultant is also a performer, these same mental skills are equally applicable to the consultant who wants to consult at a peak level on a consistent basis.

In my early training, I was fortunate to have supervisors with clinical and systems orientations who helped me learn strategies for “dealing with problem situations.” From a performance framework, I would now describe these methods as “refocusing.” If a client challenges and attacks, my supervisors coached me to breathe, relax, and move closer to the individual. If possible, they suggested, actually change seats, so as to be next to the person and attempt to understand his or her perspective. If I wanted to persuade a person and repeatedly encountered an argumentative “yes; but...” response, I learned to accept that I was embroiled in a “power struggle.” I was coached to back off; laugh to myself; admit “defeat” and then both compliment and apologize to the individual. “I’m sorry, but I obviously have been trying to persuade you to do something that does not feel right at this point in time. You are far too strong-willed for me to make you do anything that you do not want to do...”

Coping with stress

Stress is experienced when perceived demands exceed perceived resources in a situation, and the outcome is considered important (McGrath, 1970). Not only does the consultant need to be able to help other performers deal with stress; one must also deal effectively with the stress that is experience in one’s role as a consultant.

For example, I recall the first time that I demonstrated activation management techniques to a professional golfer. When working with clients I routinely demonstrate how centered breathing (Nideffer, 1985) can be used to manage adrenaline and reduce

stress. As the client watches, I use an inexpensive heart rate monitor to demonstrate how I can reduce my heart rate by 8+ beats per minute within 12 seconds. Just prior to starting the demonstration with the golf pro, I thought to myself, “Oh boy! If I can help this guy, the word will go out to the entire golfing world and I’ll have referrals for life!” Visions of golf pros willing to pay thousands of dollars for my expertise flashed momentarily in my mind. The next thing I knew, I was standing there watching my heart rate *rise* rather than fall, undoubtedly a reaction to the perceived importance of the outcome. Of course as the numbers rose, my initial response was, “Oh CRAP!” which triggered yet another surge. The pro cocked his head to one side and raised his eyebrow, as his gaze slowly rose from the monitor to my less-than-placid eyes. The pro knew pressure--and he knew I was experiencing it at this very moment. I laughed and commented on the situation, “No pressure here!” Time to draw on a refocusing strategy and build upon an over-learned response. I returned to my chair, explaining, “I usually practice this sitting down.” It is impossible to force relaxation. I knew that one must let go. And I did. I also used my knowledge of physiology to stack the deck in my favor: a person’s heart rate tends to be lower while sitting than when standing. This time the pro watched as the numbers descended. A slight smile on my face brought the decrease to ten. The experience served as a foundation for our subsequent work together. He knew that I knew what it was like to perform successfully under pressure.

The Process of Performance

Performance consulting is a dynamic, interactive process. It requires an on-going dance between a number of elements: assessing the situation and the impact of one’s efforts; being mindful of the manner in which one presents him- or herself; being willing

to risk; maintaining an optimal performance state; focusing on the present; adjusting to feedback; and dealing with mistakes. This is the moment when “You’re on!” You are performing. One’s knowledge, skills, preparation (and sometimes a good dose of dumb luck) will determine one’s success.

CASE EXAMPLE

In the section that follows, I present an actual experience from a consulting presentation that demonstrates the process of performance. The events and individuals are all typical experiences from my work as a performance consultant, although specific identities and identifying features have been changed to protect confidentiality.

The upcoming book chapter shares this experience in detail, so for the program today I want to limit our scope to the challenges during the process of performance. This presentation was an invited Grand Rounds lecture for a medical training facility where I hoped to establish a relationship that involved research, intervention, collaboration and funding. For this presentation I had done my homework, knew myself, my audience and my materials. I had engaged in active intentional learning and practiced my delivery. I was ready.

The morning of the presentation I did my normal pre-performance routines, which always conclude by my saying to myself, “It’s going to look great on my vita and no one will really know if I was spectacular or if I bombed. Let’s go have fun!”

I just delivered a fantastic presentation in which I reviewed the research on mental skills and performance, compared the mental demands of medicine to those of other performance domains, reviewed the current trends for developing the mental skills of surgeons, and then described ways in which assessment of performance-relevant mental

skills and interpersonal style has been used in performance settings, including recent efforts using similar instruments with surgeons.

Overall, it went well; I was on autopilot and “in the zone” during the formal presentation. Even though we started five minutes late due to the Director’s announcements, I finish with a good eight minutes left for questions. As the first individual steps up to one of the two microphones that are positioned in the audience, the Director of the program (Dr. Bones, who invited me to present) identifies the speaker as Dr. Richards, the Director of the Orthopedic Residency program.

“Dr. Brown I appreciate your most interesting and informative presentation. I am reminded, however, that the great basketball player, Bill Russell, used to throw up prior to any major competition. In fact, his teammates knew that if he didn’t throw up, they got a little worried and knew they were in for a long hard night. To my knowledge, Dr. Bones has never thrown up prior to a procedure and he seems to be have been quite successful in his career. [Laughter throughout]. Furthermore, I understand that other athletes frequently report that during peak performances they are unable to recall what occurred. I don’t know about my colleagues, but I would be a bit concerned if I could not remember a procedure and describe what I had done. [More laughter]. I am also aware that there is a movement in medicine to use fighter pilots, who can leave no room for question or doubt, as the model for training surgeons. I think we should exercise caution in considering whether these concepts and expectations are appropriate for our residents. We need to be careful about what we are teaching our residents and the expectation that they have to perform at super-human, fighter pilot, or Olympic levels. I constantly tell my residents that you are simply expected to do your best, and we work hard to reduce those

expectations of having to be superhuman. While this may all be very interesting, it seems to me that we need to be extremely careful about the expectations that we are setting and whether it is truly appropriate for residents.”

Right after Dr. Richards starts speaking, before the first blow has even landed, I feel my body tighten and my heart quicken in automatic response to an attack. My initial thoughts include a cacophony of expletives and mental counter-attacks: Doesn't this jerk know the difference between automated physical responses and those requiring fine motor skills; and selective rather than automated response?!!! I could rip his comments to shreds with data! Oh CRAP! Not only are they not buying what I said; they are attempting to rip apart all my credibility! This is not even a question! He's just pontificating his own erroneous opinion! So much for working with these guys!

The above internal monologue takes place in nanoseconds. Breathe. Smile. Relax the shoulders. My response will be pivotal to whether or not I can be effective in this challenging environment. It might feel momentarily satisfying to contradict and correct my attacker with reams of data, but I know that criticism of his comments is not likely to provide any benefit. If I do anything that corrects or contradicts the challenger, I want to allow him a way to save face and back off rather than engage in a knockdown drag out. I remind myself of my goals and performance plan: Persuade the audience that there may be some benefit to addressing mental skills as part of their training program; build upon the research with other performers in high risk professions. I choose my words carefully, intentionally using “we” rather than “you” when talking of training residents. I want to be perceived as part of the training team rather than an outsider.

“Dr. Richards, you bring up several good points and I welcome the opportunity to discuss them at greater length. We definitely need to be careful about the expectations and perceived demands of being a physician. That being said, residents are having to learn these mental skills, whether through serendipity or a more structured approach. The research with Navy SEALs has indicated that simply having an assessment and a 15-minute feedback session on mental skills and one’s most likely mental performance error significantly impacts the ability to pass the SEALs’ training program. In light of the demands of the 80-hour training week, I propose that the SEAL data alone merits exploring whether the same may be true with surgical residents. I welcome discussing this topic with you at greater length. Next question?”

Much to my relief, an elderly gentleman steps to the microphone and comments on how wonderful the presentation had been and how, as a former director of the program, we should also be addressing the impact of training on relationships and families.

I try not to look too relieved as the tone shifts to one of support and interest, but I know I have just dodged a bullet that could have been a deathblow. I am now back on ----
---- Once the Director officially ends the program, I still have a crucial task that requires immediate attention. Contrary to my natural inclination to put as much distance between me and the challenger as possible, I return the congratulatory handshakes of those immediately around me and then go in search of Dr. Richards.

I know that it is critical to move *towards* the authority figure who shows the most resistance or challenge to my efforts. Rather than view that person as resistant, I choose to think of him or her as being protective. I seek to understand the person’s concerns,

demonstrate respect, and indicate that I will do my best to protect the things that the individual values. If I can create an ally, amazing things can follow. If I avoid or move away from the individual and the issues that have been raised, I will be ineffective in working with the system. It is not a natural tendency for me, but neither is leaning downhill while skiing. I know it is the right thing to do; I have prepared and practiced, and now my performance as a consultant is dependent on how well I execute the process.

I catch my challenger mid-way up the aisle. “Dr. Richards, I truly appreciate your comments. Obviously, you have given a great deal of thought to preparing residents for the stresses of practice. Can I treat you to either coffee or lunch sometime to hear more about what you are doing?” We exchange cards and target getting together the following week.

Recommendations

If you are contemplating performance consulting, I strongly recommend the two books that I have mentioned today – *You’re On! Consulting for Peak Performance* and the upcoming *Performance Psychology in Action*. This recommendation is more than shameless marketing and self-promotion; I truly believe them to good resources that make significant contribution to the field. I would like to go further, however, and offer two specific recommendations.

First, if you have identified any area of your performance as a consultant that might be improved, I encourage you to enlist a new client – yourself. Treat yourself as a client and apply your knowledge of performance enhancement to yourself. Take the area that you have identified and set specific written goals, devise an action plan, and establish

some form of accountability. Apply what you know to yourself, and you will be a better consultant.

Finally, if you want to be a successful consultant you need to remember to “P.”

1. Clarify your **Personal Philosophy**
2. Maintain **Perspective**
3. **Periodically Pause** and take inventory to assure that you **Protect** your **Priorities**
4. **Practice** what you **Preach**: keep your **Personal Practices** consistent with the **Performance Paradigm** that you **Promote**.

You may forget most of what I have said today; but if you remember to “P” you will always perform better.

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