

# Impact of Organizational Conversation on Organizational Health Conversation as Lifeblood of Organizations



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*Conversation is the core process by which human beings think and coordinate their actions together. The living process of conversation lies at the heart of collective learning and co- evolution of the human affairs. Conversations are our human way of creating, sustaining or transforming the realities in which we live (Raghav, 2017). Conversation lay the foundations of social interactions. Social interaction is the primordial means through which the business of the social world is transacted, the identities of its participants are affirmed or denied, and its cultures are transmitted, renewed and modified (C. Goodwin and Heritage, 1990: 283). Conversations play a very important role in shaping of organizations. These conversations can be between peers, leaders, leaders and teams etc. Also, these can be within as well as outside the organization. Often these conversations play a pivotal role in determining how effectively can organizational teams' function and how desired goals are achieved. Effective and powerful conversations in organizations lead to a strengthened organizational culture, driven by the core ethical values in the organization. Similar to organizational conversation is the subject of organizational health. Organizational health (OH) as a term, exists in literature and has been explained differently by different set of researchers. Miller et al. used OH to describe occupational stress, while Cotton and Hart interpreted (OH) more generally as the wellbeing of an employee in the working environment. Alternatively, in Lencioni's words "The single greatest advantage any company can achieve is organizational health. Yet it is ignored by most leaders even though it is simple, free and available to anyone who wants it". Although subjects of organizational communication less conversation and organizational health have been independently discussed in literature, through this paper, we try to establish a coherent link between how effective organizational conversation impacts the organizational health. The paper includes brief review on the topics of organizational conversation and organizational health. Further, we try to explain how we see the relationship between "Conversation" and "Health". Thereafter, we try to propose a model and suggest certain propositions that we intend to test in future.*

**Keywords:** Organizational Conversation, Organizational Health, Talk, Discourse

## 1. Introduction

### Organizational Conversation

Only in the 1960s and 1970s did organizational communication enter the language of organizational studies. When compared to established fields of organizational theory such as sociology, social psychology, and management theory, it was dubbed "poor cousin" (Redding, 1985; Redding & Tompkins, 1988). Organizational communication has had to break free from the prejudices of its sister disciplines, both spoken and unspoken, and emphasize the fact that organization is based on communication, rather than the supposition that organization is an entity that exists independently of its communication realization. (Taylor, 1999). Various researchers' overtime has tried to explain the subject of "conversation" within the broad area of organizational communication. Communication has been seen as a combination of "conversation" and "text" (Taylor 1999, Appendix Figure1). Taylor in his paper on organizational communication claims that organizational communication is a consequence of mapping of the interactive or "conversational" dimension onto the textual in order to produce organization seen through the knowledge shared amongst its members and the activities that they are involved in (Taylor 1999). This has been further elaborated through various works on explaining the subject area of communication through the lens of conversation like classical information theory, speech act theory, conversation theory, works in discourse analysis and speech pragmatics, Language action perspective (Shannon, 1948, Taylor 1993, Austin 1955 lectures in Cooren, 1995 and Taylor & Cooren 1997, Halliday 1985, Van & Taylor, 1998, Gordon Pask 1976) etc. Schegloff (1991) explained conversation as an interaction of talk and gesture across all the species with humans having the added instrumentality of language. Furthermore, the concept of "the business of talk" (Boden, 1994) gets transacted through language as can be seen in the studies of conversational analysis and ethnomethodology. Furthermore, the subject of conversation was explored through the in-depth work on the subject of "conversational analysis" by researchers like Sacks, Schegloff, Jefferson, 1978, Moerman, 2010). The subject of "talk" in conversational analysis and the idea of looking at conversation through "talk and social structure" (G. Psathas, 1995, Dierdre Boden and Don Zimmerman, 1991) was an attempt to use conversational analysis to study everyday organization talk and also understand the bearing of talk on social structure. As Moerman explains in his book the "Talking Culture"; *Conversation*

analysis studies the organization of everyday talk, what talkers orient to in producing its orderliness. By explicating elements of the social organization of speech, conversation analysis provides a component that has been critically missing from such issues as how language relates to thinking, how "structure" relates to "practice," and institutions to experience, or how actors can be both agents and objects in the social world. Through the years, the focus has shifted from seeing conversations as merely transactions between a speaker and receiver to understanding subject matters like dialogue in organizations (Isaacs, 1999), motivation through leader conversations (Mayfield, J. & Mayfield, M. (2017), Effective Leadership interaction through organizational conversation (Groysberg, Slind, 2012), Changing conversations to create intended changes in organizations (Codreanu, A, 2012), focusing on ideas of conversational intelligence (Glasser, 2016), Conversations when stakes are high (Patterson, 2002) etc. Thus, the idea of looking at conversation is not merely as a speech event with talking and listening, but rather seeing organizations being talked out into existence through the conversations and also recognizing members in the organization who identify themselves as coming from these conversations. Organizational conversation isn't just "talk". In the recent times start-ups and small companies have come to conversations leading to organizational excellence and becoming a hallmark of high performance. From an era where leaders at the senior positions used to issue orders that the middle and bottom-line managers were to act on, the organizational life today has significantly changed. The people and the energies and capabilities that drive them have become far more important in giving organizations a sustainable competitive advantage. The traditional command and control model seems to lose its hold giving way to a more interactive and "better conversed" system.

### Organizational Health

Organizational health (OH) as a term, exists in literature and has been explained differently by different set of researchers. Miller et al. used OH to describe occupational stress, while Cotton and Hart interpreted (OH) more generally as the wellbeing of an employee in the working environment. However, moving from the focus of organizational health only on occupational and work stress, there are other important variables to be looked at to better understand the interaction with the environment. There have been researchers that have worked on looking at the subject of organizational health differently. In Lencioni's words "*The single greatest advantage any company can achieve is organizational health. Yet it is ignored by most leaders even though it is simple, free and available to anyone who wants it*". An organization's capability to function and adapt to a dynamic internal and external environment, as well as its intrinsic ability to perform efficiently in a dynamically changing context, has also been seen as organizational health. (Xenidis & Theocharous 2014). There have been specific independent studies in organizational behavior around the concepts of organizational performance, organizational capability, organizational resilience, strategy formulation, organizational culture etc and organizational health can be seen as a collective representation of all of these together, ensuring organizational robustness. Xenidis and Theocharous very explicitly state how attributes of organizational appraisal namely Organizational capability, Organizational performance and Organizational resilience help in determining organizational health. Organizational capability seen in terms of efficient use of resources, organizational performance seen through various parameters like financial indicators, economic and non-economic factors, innovation, strategy etc and organizational resilience seen through the recovery of organizations from a crisis situation (Xenidis & Theocharous 2014). The world health organization defines health as "*state of complete physical, mental and social wellbeing and not only the absence of disease or disability*" (Xenidis & Theocharous 2014). This same idea of health can also be extrapolated to understand the concept of organizational health. Lencioni in his book "The Advantage", talks about two basic questions on "smart" vs "healthy" organization. Where he looks at "healthy" organizations through attributes like minimal politics, Minimal confusion, high morale, high productivity and low turnover. His view on "smart" organizations is seen through attributes like strategy, marketing, finance and technology (Lencioni, 2012). Further more, he talks about three important types of biases that often lead to ignorance of the subject of organization health namely, *sophistication* (increased focus on complexity and missing the focus on easily evident and less sophisticated attributes of health), *adrenaline* (building health takes time and organizations focused on achieving faster results) and *quantification* (mere inability to measure single aspects of OH does not make it less tangible or real). Lately, there have been research works on looking at organizations as living systems. Books like "The Living Company" by Arie de Geus and "The Living organization" by Normal Wolfe, have been emphasizing on seeing organizations as having parts that are exclusive but connected, systems which are divided but related and this mutuality and relatedness leading to ensuring wholeness of the system. The appropriate and adequate transmission of energy makes health a continuity. When system or parts of the system starts behaving beyond more for the self and less for the whole, there could be disorder and chaos. This could result in a confusion in the system, energy misdirection and the system will lose its seamlessness, putting parts on the discomfort and disease. Wholeness is a process, it's a state arrived through process and the state influences the process. A healthy living system can have physiological, biological, psychological and may be spiritual dimensions interplaying. The cooperation and the mutual inclusiveness determine the effectiveness of this interplay. This interplay makes the system learn, gain knowledge, become stronger and attain longevity.

## 2. Relating the Concept of Organizational Health and Organizational Conversation

Living systems converse. Attending, knowing, enquiring, understanding, learning, attuning, responding, and sharing are all ways in which they communicate. This continuous flow of meaning is analogous to the river's flow, which keeps the two banks connected and in touch, acknowledging and recognizing their interconnectedness. Conversing means coming together, coming together in the form of shared interests, inclusive growth, collective wisdom, purpose, and the path to get there. Increasingly good and effective conversations are seen as positively impacting organizational performance (Groysberg & Slind, 2012),

stakeholder trust (Lencioni, 2012), Motivation of employees (Mayfield, 2018), managing crisis situations well (Karin et al 2020, Coombs, 2007) Organizations that are healthy have a healthy ecology. Trust, respect, creation, achievement, and a positive outlook are all valued in a healthy setting. These organizations, which function with candor and a nonpolitical culture, are productive, purposeful, and have higher morale and motivation among their stakeholders. Conversations that are healthy result in organizations that are healthy. Healthy discourse is comprehensive in nature, encompassing all players in the game. Maintaining a suitable and sufficient flow of information, ideas, concepts, values, vision, strategy, and purpose, among other things, all with the goal of ensuring that the unit is producing the intended results. If a healthy company requires leadership cohesion, then discussion is the way to achieve it. If a healthy company needs clarity and wants to reinforce it, it's time to have a talk (Lencioni, 2012).

### Building a Conversation Model

In order to develop a conversational model to ensure organizational health, we have tried borrowing different concepts across the subjects of organizational conversation and organizational health. The model is divided into two sections with the first talking about the “Environment that creates the need for conversation” (Isaacs, 1999) and the second that defines the different “behaviors and enablers leading to organizational health” (Isaacs, 1999, Lencioni, 2012).

We have tried to understand the concept of “Habits of thought” and the “Principles” that follow from William Isaacs book “*Dialogue – the art of thinking together*”. Furthermore, we have tried to relate the habits and principles to our model linking conversation behaviors to organizational health. We have defined 4 conversation behaviors (REAL) (Stroker, 2013) and given propositions on how these conversation behaviors, moderated through the conversation enablers, ensure organizational health (Slind, Lencioni, 2012).

### 3. Conversation – Organization Health Model

1. Environment: “Habits – Principles”
2. Independent variable: “*Conversation behavior*”
3. Moderator: “*Conversation Enablers*”
4. Control variable: *Gender, age, vintage*
5. Dependent variable: “*Organizational Health*”

#### Environment: “Habits – Principles”

William Isaac in his book on Dialogue has looked at the “Habits” of thought that lead individuals in thinking alone. For each of the habit, he offers a “Principle” to overcome the very same habit. In our model, we try to look at those habits and define them at an organizational level. Moreover, we take the interplay of the “Habit – Principle” to build our conversational model.

1. **Abstraction - Participation:** Abstraction comes from the word “abstract” that means “pulling out meaning” (Isaacs, 1990). We often see the idea of abstraction playing in organizations. This can be seen when individual divisions in an organization start seeing themselves as distinctive units rather than a complete living system (Wolfe, 2011). Due to the assumed distinction, often conversations across divisions becomes difficult and ability to appreciate shared concern on organizational goals diminishes. We often see individual, teams and groups poorly performing due to lack of coordination and thus arises the need to ensure certain conversation behaviors and types that ensure seamlessness. To manage the habit of abstraction, we look at the principle of participation. Participation focuses on looking at parts as a whole rather than objectively separating parts from the whole. Thus, in an organizational framework, if the different divisions look at each other as coexisting in the overall organizational framework and collectively “participate”, they can do away with the problems that arise from “abstraction”.
2. **Idolatry – Unfolding:** We define the concept of “Idolatry” as a collection of certain perceptions, representations that we believe to be “real”, however may not exist. We often hold these beliefs and notions so close to us, that eventually they start unquestionably guiding us. Looking from the organizational lens, these can be certain experiences, values, beliefs, deceptive messages that the people or divisions in the organization may have misinterpreted and held close to themselves, guiding their action towards organizational goals. This may limit their understanding and ability to relate with contingencies and hence requiring effective conversations to give direction. To manage the habit of idolatry, we look at the concept of unfolding. Unfolding looks at looking within oneself which no longer confuses who we are with an image with what we believe ourselves to be or what we were told we should be (Isaacs 1999). In the context of organizations, it looks at individuals, teams, group, divisions looking at certain prior held beliefs and ideals that may be hampering achievement of desired organizational goals. With effective conversations, these long held beliefs get revisited and reworked through the continuous process of folding and unfolding.
3. **Certainty – Awareness:** Certainty refers to holding on to certain beliefs, ideas and practices that we see as unchangeable or impermanent. This is a particularly striking phenomenon in organizations that form “visions” (Isaac 1999). Often these visions may get incorporated in ways that weren’t intended to be. With changing times, these may need to be revisited to adapt with changing needs of the organization. However, due to the preoccupation arising from the idea of certainty of these visions, organizations may see their intended goals not being achieved. This may also limit the future growth of the organization and decreased motivation among its employees. To manage the habit of certainty, we look at the concept of awareness. Awareness entails developing the capacity to see the living processes that underlie all things. It is about doing

away with our long-held assumptions and being able to look at the dynamic changes within and across. Effective conversations help in revising these assumptions by facilitating peers, leaders, teams etc to discuss these assumptions and look at revisiting the same through collective interaction.

4. **Violence – Coherence:** This last of the habits of violence may be one of the most pertinent habits seen in organizations over a period of time. The habit relates to the fact that we may impose our views on others and the world (Isaacs 1999) We often get into delivering judgements without being cognizant of the context. This may lead to the feelings of disrespect both at individual and organizational levels and hamper individual and organizational growth. Violence can be effectively managed with coherence. With coherence, we look at focusing on the complete whole rather than parts. This however does not mean that keeping the parts together would in-turn create the whole. Rather we need to see the interdependence and coherence among the parts to avoid isolated judgements being delivered. Effective conversations facilitate the idea of establishing coherence and induce the ability of looking at the whole rather than the parts, by appreciating the interlinkages and making them visible

#### **Independent Variable: “Conversation Behavior”**

We define the conversation behaviors identified as our independent variable. There are 4 conversation behaviors we look at namely, “Recognizing & Suspending, Expressing, Asking and Listening” (Stroker, 2013).

- Recognizing and suspending your thinking or judgments
- Expressing your thoughts, feelings, experience, or opinions without creating resistance in others
- Asking questions to increase your understanding
- Listening and attending to the messages that others are expressing verbally and nonverbally.

#### **Moderator: “Conversation Enablers”**

We believe the conversation enablers in our model act as the moderators in strengthening and reinforcing the relationship between the conversation behaviors and organizational health.

- **Leadership:** We believe the leaders in the organization, be it team specific of the senior management, are an important enabler in facilitating and ensuring that the behaviors get practiced and used in the organizations. Moreover, leaders play a pivotal role in guiding conversations within and outside the organization and ensuring that the conversations are coherent with the vision and mission of the organization and its strategic goals. Leader cohesiveness and clarity in driving conversations within organizations are crucial for ensuring organizational health (Lencioni, 2012)
- **Culture:** “*Culture is how organizations do things*” (Katanga). Quality and the nature of conversations, do play an important role in determining and understanding the culture of an organization. Some organizations may encourage and provide an environment for open and constructive conversations. Such organizations experience greater collaboration, exchange of ideas, better adaptations during times of crisis etc. However, we also have organizations that may be extremely bureaucratic and may not see transparent conversations as important for their business. Thus, culture that breeds within the boundaries of organization may play an increasingly important role in facilitating the nature, type and instance of conversations.
- **Conversion Artifacts:** Organizations have enumerable ways in which they converse. Here we use the term “conversation artifacts” to define the stated (mission, vision, business principles, management practices etc.) and unstated (beliefs, values, culture etc.) elements in the organization, that may guide organizational conversation. The most important of the stated ones are the mission and vision statements of the organization that come from their core ethical values. The long-term goals that decide where the organization would like to go in the competitive landscape are driven by vision statements. Mission statements are more detailed and concrete in terms of an organization's competitive advantage, and they are utilized to prioritize actions. (Bowen, 2018). In terms of the unstated elements, the beliefs and values that define the organizational culture, play the most important role in determining the environments that facilitates and encourages conversations.
- **Management Practices:** Management practices here refer to both business and people management practices and how conversations are embedded in the same. These may refer to the performance management practices, recruitment techniques, exit job interviews, compensation discussions, financial review and audit practices etc. All the above elements of leadership, culture, artifacts get reflected predominantly through this practice and thus have a bearing on the nature of conversation prevalent.

#### **Control Variables: “Gender, Age, Vintage”**

#### **Dependent Variable: “Organizational Health”**

- **High Motivation:** Increased levels of motivation in an organization may positively contribute to the performance and overall health of the organization (Lencioni, 2012). Various studies have been done to see how organizations that have increased employee motivations lead to self-efficacy and increased performance (Schunk, D. H. 1995).
- **Minimal Politics:** (Lencioni, 2012) in his book talks about the “healthy” organization in terms of seamlessness in the nature of work. He sees minimal politics as an important attribute in determining how healthy an organization and its environment is. More transparent the organization and more collaborative it's activities, better is the organizational overall development.

- **Low Turnover:** Turnover is generally seen as a loss of trained talent for the organization. It can be said that organizations that have low turnover will see employees being retained and contributing towards organizational goals effectively. This will in-turn lead to the ensuring a healthy organization.
- **High Productivity:** As defined by OECD, “*Productivity is commonly defined as a ratio of a volume measure of output to a volume measure of input use*” (OECD Manual, 2001). Measures of productivity may differ across industries with differing nature of work. Some elements that we see through literature for productivity measurements in workplace are namely output & performance, absenteeism, engagement and self-assessed productivity (Bortoluzzi et.al, 2018).

### Propositions

On the basis of the model proposed and the variables identified, we try suggesting 4 propositions that we intend to test as a part of future research agenda. In these propositions we try relating the 4 types of **conversation behaviors** identified (Respecting & Suspending, Expressing, Asking, Listening) to the 4 **attributes of organizational health** (High motivation, Lesser politics, Low turnover and Increased productivity), moderated through the 4 identified **conversation enablers** (leadership, culture, conversation artifacts and management artifacts).

**P1:** The 4 types of **conversation behavior** moderated by the **conversation enablers** lead to increased motivation and ensures better **organizational health**.

**P2:** The 4 types of **conversation behavior** moderated by the **conversation enablers** lead to lesser politics in the organization and ensures better **organizational health**.

**P3:** The 4 types of **conversation behavior** moderated by the **conversation enablers** lead to lower turnover and ensures better **organizational health**.

**P4:** The 4 types of **conversation behavior** moderated by the **conversation enablers** leads to increased performance and ensures better **organizational health**

## 4. Discussion & Conclusion

Through this paper, we attempt to relate the two elements of “Organizational conversation” and “Organizational health”. We look at identifying and explaining the concepts of conversation and health through support from literature and our inferences on the individual subjects. Thereafter, we try proposing a model that identifies the variables we see as important to establish the relationship and the enablers that act as the moderators. We look at explaining the environment that creates the need for conversation and is the basis for the proposed model of conversation-health. The 4 propositions that follow from the model, aim at relating each individual element of organizational health to the 4 conversation behaviors and the 4 conversation enablers.

## 5. Limitations & Future Research

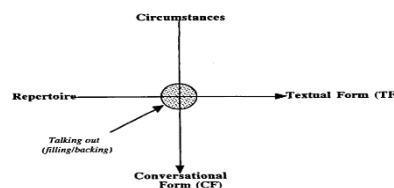
Since this is a conceptual paper, we haven’t attempted to collect data and empirically test the propositions. Also, we call for future researchers to extend the research and look at case examples across organizations through time to further develop the concepts of conversation and health. Furthermore, independent hypothesis can be proposed and tested for each of the elements in the identified variables of conversation and health, using qualitative or quantitative analysis for further robustness of the proposed model.

## 6. References

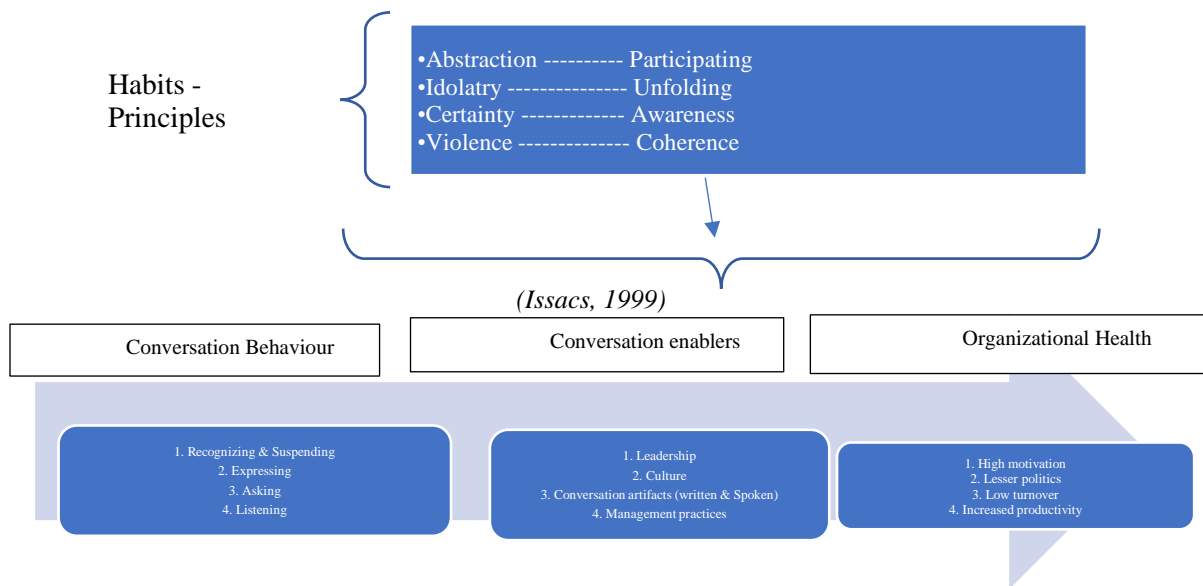
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**Figures**



**Figure 1** Communication as the Intersection of “Conversation” and “Text” (Taylor, 1999)



(Groysberg & Slind, 2010; Lencioni, 2010)

**Figure 2** Proposed Conversation – Health Model