PRÉCIS

Solving the wrong problems precisely is the central topic of Dirty Rotten Strategies. If problems are wrongly stated to begin with, then what good are the answers? It is little wonder that we fail repeatedly to make headway on important issues and problems.

Because they are especially fertile sources of errors and because they are so important in their own right, we examine how health care, national security, the media, academia, and religion routinely solve the wrong problems. Even more important, we examine how they routinely foist the wrong problems on us. As a result, we are worse off because what we need are the *right answers* to the *right problems*, and not wasted effort on getting the right answers to the wrong problems. Needless to say, there is no end of other important issues that we could have chosen to examine.

Given that each of these topics reflects our own particular interests, our choices are to a certain extent arbitrary. However, in an important sense our choice of topics is also anything but arbitrary. Health care, national security, the media, academia, and religion are almost guaranteed to appear on anyone's list of major issues. (Although the environment is of paramount importance, and thus

is a critical topic in its own right, we discuss it in the context of other issues.)

Although the divisions between the body, mind, and spirit are no longer as clear-cut and sacrosanct as they once were, we examine the health, safety, and security of the body (health care and national security), the mind (the media and academia), and the spirit (religion). The divisions are no longer clear-cut, because any and all of our key problems could be grouped simultaneously under body, mind, and spirit. The latest evidence from the neurosciences shows how strongly connected, and interconnected, the various aspects of humans are.1

In addition, all of our problems are simultaneously political, psychological, philosophical, spiritual, and so on. Therefore, no single discipline or profession has a monopoly on how we ought to define our key problems. As a result, the solutions also are not to be found in any single discipline or profession.

AN OPENING EXAMPLE:

ARGUABLY THE BEST IN THE WORLD

American doctors—and more generally, American professionals of any stripe—are arguably the best educated and best trained in the world. Throughout their educations and careers they are exposed to the latest and most advanced technologies. Most important of all, they study under some of the best educators at some of the most prestigious medical schools and research institutes in the world.

Becoming a professional means learning to think and practice in certain highly prescribed ways. Professionals learn to understand and apply highly complex templates, or maps, to complex problems and situations. Both the templates and the problems to which they apply are defined as precisely as possible. Ideally these templates cover the vast majority of problems and situations that the fledging student and beginning practitioner are likely to face—and for the most part they do.

Not only do these templates work but they generally work quite well. Instead of having to remember thousands of separate and disconnected cases and facts, professionals use these maps to reduce the buzzing, booming complexity and confusion of the world—reality itself—down to hundreds of highly stylized situations in as coherent and integrated a manner as possible. The maps make the world comprehensible, and thereby manageable.

In the course of becoming a professional, one learns to think critically, but only within the tight boundaries and narrow confines of accepted thinking within one's chosen field. One does not generally learn to think expansively across different disciplines and different professions. In this sense, one's thinking is also bounded.

Consequently, when one inevitably confronts a problem at the edge, especially a novel problem or a case outside the bounds of accepted thinking, one either is stymied to the point of paralysis or falls back on the only resource one has, thus reducing a novel situation to a problem one already knows how to solve. The trouble is that the problems one already knows how to solve may bear little resemblance to the problems one actually needs to solve. As a result, extreme cases and outlier problems and situations pose real and serious challenges to professionals and to the accepted modes of thinking of their professions. In the extreme they lead to serious errors, catastrophic failures, and major disasters and crises.

WHY DOCTORS MAKE SERIOUS ERRORS

We cannot emphasize strongly enough that American doctors are generally acknowledged to be the best trained and best educated doctors in the world. For the most part they perform admirably. Nonetheless, in a highly engaging and important book, *How Doctors Think*, Harvard hematologist Jerome Groopman argues convincingly that, like all professions, the medical profession does not always handle extreme situations and outlier cases very well, because these are precisely the situations that fall outside the generally accepted maps of medical training, research, and practice.² Far more frequently than one would like to believe, and certainly far beyond any acceptable standard of adequate care, in dealing with extreme and novel cases, doctors make many bad decisions, serious errors of judgment, and major medical mistakes. As bad as this is, however,

it is not the main thrust of Groopman's argument. Much more significant is why they make them.

Groopman shows that the vast majority of bad decisions, errors, and mistakes that doctors make are not the result of sheer malice, gross incompetence, or downright stupidity. Instead they are the direct result of the highly standardized ways in which doctors are educated and of the enormous pressures placed on them to think and act quickly and decisively. Although Groopman doesn't use our concepts, it is clear nonetheless that he agrees that the narrowness of medical education—and of professional education in general—and the strains of practice force doctors into solving the wrong problems precisely.

Instead of exercising critical thinking, and hence considering multiple options and diagnoses of important issues and problems, doctors are forced by their medical education and by the severe strains of medical practice to use simple checklists and canned diagnostic procedures (algorithms) to treat complex conditions. In other words, checklists and canned procedures substitute for critical thinking. The result is not only the impairment of the health of patients but also, in many cases, serious injuries and even the loss of lives.

THE MORE GENERAL PHENOMENON

Make no mistake about it: Groopman's book is very important. Nonetheless, it is just one example of a much more general and troublesome phenomenon. What is true of medicine is true of every profession, but as a result it is truly astounding that the general phenomenon of solving the wrong problems precisely has received virtually no attention or extended discussion. What differentiates this book from others is that solving the wrong problems is its main concern. Indeed, it so important that it deserves its own analysis.

GOING BEYOND

This book goes beyond the individual forms of abuses, crises, and disasters that have overwhelmed us in recent years and that have understandably been overanalyzed, such as the war in Iraq, Enron,

Katrina, and so on. To be sure, it touches on and discusses some of these issues. More important, however, is that it generalizes across each of these individual cases and shows that the problems we face are deep and pervasive.

Just beneath the surface of all the seemingly disparate abuses, crises, and disasters there is a relatively small set of common patterns. By explicitly exposing and analyzing these patterns, we can help to lessen their grip. In short, this book is not a rehash of the books that in recent years have overwhelmed our collective psyche. Instead, it is an analysis of how we define, shape, and make sense of our political and social realities, often to our detriment.

We don't have to accept the narrow and limited definitions of problems that others (single-issue interest groups, big and powerful businesses, academic specialties, and so on) force on us. In other words, there are grounds for hope.

If we couldn't recognize when we were solving the wrong problems precisely, and if there were no ways of assessing when we were doing it, then the situation would truly be hopeless. Furthermore, if we couldn't formulate the concept of solving the wrong problems precisely, then we would have no way of ever knowing what we don't know but desperately need to.

Nonetheless, we would be incredibly naive (which, depending on the topic, all of us are) if we thought that by itself a single book was sufficient to change fundamentally how we formulate, let alone solve, our key problems. All we can hope for is that we have made a good beginning and, as a result, will have stimulated—indeed provoked—others to go beyond where we are.

Whether we have the political and social—and dare we say spiritual?—will and desire to think and act differently is another matter.

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