EFFECTIVE LEADERSHIP: DECENTRALIZATION AND PARTICIPATIVE MANAGEMENT

Leadership & Institutional Practices: Leadership in Armed Forces is institutionalized through the powers of the Commanding Officer (Commandant in Training Units) who is the senior most rank officer and the hierarchy is maintained down to the junior most Airmen(Jawan). The Institute of Aerospace Medicine (IAM), is a military unit under the direct administrative control of the Air Officer Commanding-in-Chief, Training Command IAF, who vests the power of heading the Institute to the Commandant, an Air Force Medical Officer in the rank of an Air Commodore who is also the Principal of the Institute. The roles and responsibilities of every person in the Institute are well delineated and laid down as per the philosophy of Command and Control in the Armed Forces. All Institute policies and practices are a reflection of the Commandant's leadership qualities and every decision although collectively taken, is considered to emanate from the highest office. The Institute's stellar performance as a Nodal Centre for Aerospace Medicine and significant involvement in programs of National Importance over the last 65 years is demonstrative of the effective leadership of this Institute. However, such heights of glory cannot be achieved by a single individual and contribution of his/her team is equally important.

Institute Structure: The team at IAM is well decentralized consisting of Principal Staff Officers each heading a separate Division. These Divisions namely the Training Wing (headed by the Dean aka The Chief Instructor), the Research Division (Headed by the Chief Research Officer), the Clinical Evaluation Division or the MEC (Headed by the President of MEC). All three are IAF Medical Officers of the rank of Gp Captain. Furthermore, the Technical Division and Administrative Divisions are headed by IAF Officers of Technical and Administrative Branches. All five officers report independently to the Commandant and they are responsible for performance of the respective departments of their Division through the HoDs. The Research Division has three Aeromedical Departments (Human Engineering and Human Factors, Acceleration Physiology and Spatial Orientation and High Altitude Physiology and Hyperbaric Medicine each headed by an Aerospace Medicine Specialist Officer of the rank of Wing Commander. In addition, the Department of Aviation Psychology and the Department of Environmental Physiology is headed by a DRDO Scientist (Sc 'F') who also report to the CRO on professional matters. The President MEC is ably aided by the HoDs of Medicine, Eye, ENT, Radiology, Aviation Pathology and Toxicology Departments. The Dean is aided by two training Officers (Medical Officers of Wing Commander Rank). The Technical division is further subdivided into Logistics and Engineering sections. The Institute Administrative Officer(Gp Capt) has a deputy the Adjutant (Wg Cdr) who is responsible for general administration and discipline of the Institute. A new department, Department of Space Medicine was recently constituted to provide aeromedical support the Human Space Program and ISRO. Each department of the Institute has various Officer-in-charges who handle specific portions of the department and their roles are effectively defined to provide them autonomy of day-to-day functioning. They have senior and junior airmen working under them to help discharge their roles and responsibilities.