

TOXIC
EMOTIONS
at WORK

HOW COMPASSIONATE MANAGERS
HANDLE PAIN AND CONFLICT

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PROLOGUE

IN MARCH OF 1997, on a Friday evening, I received a phone call just as my wife and I were preparing to go out for a walk. The call was from a doctor at the British Columbia Cancer Agency. “I’m sorry to have to call you with this news,” he said, “but the needle biopsy we took from your neck this afternoon has shown up melanoma cancer. It’s in your lymph system.” As I stood there listening to the doctor tell me I needed to call my oncologist to arrange a consultation with a surgeon—hearing him say the words “surgery” and “removal of the lymph nodes”—it was as if my body suddenly lost its skeletal structure. Everything inside me felt liquid and tractable. I could not quite believe this was happening to me. My visit to the doctor had been a routine checkup.

As I hung up the receiver and moved away from the phone, I actually stumbled. (Later, during our subsequent troubled walk, I would slip on an embankment and fall down.) I glanced around the living room; the objects there looked just as they always had. My wife, who was at the door buttoning her coat—still unaware of the news I’d just learned—appeared the same as she had before the phone rang. But everything had changed. You’re never the same after a message like this. In an instant, life as I knew it had altered irrevocably.

Yet I would come to believe, over the next several months and years as I dealt with an aggressive form of cancer, that this ostensibly instantaneous alteration in my life had possibly been a long time in the making. My illness—a trigger for changes, obviously, in my personal life—also set in motion my thinking about the kinds of hidden forces that determine our well-being, even to the point of acquiring disease. And in particular, how the behavior of organizations and the people in them can affect the health of certain individuals.

A few weeks after that evening call from the doctor, I had surgery to remove the infected lymph nodes in the right side of my neck, and I took several weeks off to begin the work of healing. (There are no radical treatments for melanoma cancer beyond surgery; it isn't particularly responsive to radiation or chemotherapy. And although the odds aren't good for recovery from melanoma cancer that has metastasized into the lymph system, I'm glad to report I've had no recurrence.) During this period of rest and recuperation, I found myself trying to understand the meaning of this onset of cancer, given my life experiences in the previous few years.

I assumed no direct responsibility for having caused the cancer, nor did I feel any guilt because I had cancer. However, from my reading of the health literature, I did know that illnesses like cancer can be triggered by high levels of stress that depress the immune system and weaken the body's resistance to illness. Given that I had been working in a high-stress environment for several years prior to my cancer episode—I had been an associate dean in my school and had also been involved in numerous other demanding projects—it seemed possible that that had been a factor in my illness. I felt motivated to identify elements in my work habits and lifestyle in those years that I might need to change.

At the same time, I became alert to any practices and treatments that could keep my immune system healthy. That is how, a few months after my surgery, I found myself at a week-long seminar on health and healing. That is where my ideas about emotional pain in organizations, and its effects on people who try to manage that pain for the organization, began to crystallize.

The seminar, which was attended by a number of doctors and nurses interested in cancer treatments, was led by Joan Borysenko,

cofounder of the Mind/Body Clinic at the New England Deaconess Hospital at the Harvard Medical School. Trained as a doctor in anatomy and cellular biology at Harvard, she is well known for her book *Minding the Body, Mending the Mind*, which pioneered some key ideas in mind/body medicine.¹

About midway through the week, Dr. Borysenko spoke about the effects of emotions on people's immune systems, noting that strong negative emotions such as anger, sadness, frustration, or despair can be particularly "toxic" to the human body and affect the immune system's ability to protect it. What really got my attention, however, was something she said almost as an aside: that there are people who take on the emotional pain of others for the benefit of the whole system. "They are like psychic sponges for a family or for a work system," she said. "They pick up all the toxicity in the system." (In some societies, Dr. Borysenko noted, they have been called "sin eaters," taking on the sins of the group so that the whole community can be healed.²)

As I wrote all this down I got goosebumps, recognizing how it tied directly into my recent thoughts: that maybe some leaders, more than others, assume the pain in their organizations for the benefit of everyone—essentially handling all the company's emotional "toxicity," as Borysenko had put it. (Of course, people other than leaders within organizations sometimes play this role, but for the purposes of this book I will focus on the particular problems the phenomenon presents for managers and leaders.)

One other reference in the workshop fed my excitement and triggered a second insight. Dr. Borysenko talked about the work of Larry Dossey, whose best-selling book *Healing Words* cited empirical evidence of the healing effects of prayer.³ But it was his second book, *Be Careful What You Pray For*, that provided an important piece to my puzzle about leadership and emotional pain.⁴ In it, Dossey's research suggests that people can also be *harmed* by prayer, if it comes in the form of negative wishes directed at them by others. Other researchers have explored a related phenomenon, the contagiousness of emotions. Daniel Goleman (author of *Emotional Intelligence*) refers to the contagiousness of emotions as having to do with the fact that how people are feeling can rub off on others.⁵ For example, people in a work unit tend

to pick up on the mood of their manager. If the boss is feeling optimistic and enthusiastic, those feelings can transmit to subordinates and may be observable in the office.

Emotional contagion has been examined in several studies: between individuals, in work teams, among burned-out high school teachers, and between leaders and their followers.⁶ Their findings tend to support Dossey's hunch.

Dossey's observation that prayer might be a negative or positive influence was my trigger at the time and suggested to me that the whole area of pain and suffering—and any attempts to help others—was fraught with danger. I began to ask myself what the cost might be to “toxin handlers”—leaders who deal with something as potentially volatile as emotional pain in the workplace.

While Goleman's early work, at least, focused on the positive effects of high emotional intelligence (i.e., awareness of one's own and others' emotional condition and an ability to manage both), what became most salient to me after hearing of Dossey's work was that contagion could be positive *or* negative, and that emotions experienced by one person might also be *absorbed* by the person who attempts to help. Trying to ease another person's pain thus might prove a psychological and even physiological threat to the handler. This seemed to me particularly important since handling such “emotional toxins” is a competency for which most managers—unlike therapists and social workers—are not trained.

All of this implies that the people who handle the emotional pain of others might themselves become vulnerable to that very same pain. In effect, handling emotional toxins can be as hazardous as working with physical toxins. This becomes particularly true if, per Dossey's research, the person in pain associates the cause of that pain with the toxin handler himself—and thus wishes him ill. For example, if the handler also happens to be a formal leader in an organization, he might be seen as responsible for the pain and thus become the focus of negativity from both roles.

After the workshop, I began to reflect on these ideas in the context of my own experience. For four years, in the early to mid-1990s, I was associate dean in my business school. I started this job with the portfolio of faculty development (an HR-like function) and later took on the

additional role of associate dean for our professional and management development programs (the executive training arm of the school). I was in a team of four senior executives in the school, led by our then-dean. It was a time of rapid change, fueled partly by many initiatives that came out of the dean's office and partly by ongoing budget cuts that hit the university. I had been a practicing manager in an earlier part of my career. Now, with my background as a professor in organizational behavior, I was having a chance to practice what I preached—and I enjoyed this new role very much, despite its pressures and fast pace. As I discuss later in this prologue and as will become evident in later chapters, it is unrelieved intensity of such pressures, especially over prolonged periods of time, that tends to wear people down and to let toxins into their systems. When at the end of my term the dean invited me to continue as associate dean, I was tempted but also felt burned out. I decided to take a sabbatical break and returned to research and teaching.

So what had I done that might be related to the ideas I was learning about toxicity? I began to see that emotional pain, or toxicity as I was now naming it, was quite prevalent in my organization. It was evident among professional staff who often lacked flexibility or sufficient funds to do their jobs as well as they wished. It could be seen (and heard) among faculty dealing with changes initiated from the dean's office. It was embedded in the debates regarding policy changes that inevitably suited some members of the organization more than others. It stemmed from many sources, among them the frustration that comes when dedicated academics have to teach and do research in an environment that is constantly being squeezed for resources—which the dean's office is powerless to provide. It came from constraints but also from opportunities: People could become angry, frustrated, or despondent as a result of what was *added* to their work as well as what was taken away. In fact, all the work of the organization seemed to involve some level of emotional pain. Toxicity, I began to realize, was simply a normal by-product of organizational life. The word *toxicity* may sound overly dramatic applied to aspects of everyday life, but in many ways it is uniquely appropriate. It suggests elements that can poison, whether a person or an entire system; toxins spread and seep, often undetected, in varying degrees. And toxins can be eliminated if you know the cure.

In my experience as a manager at the university, then, I spent a great deal of time listening to people who were upset. Sometimes the issues were work-related; sometimes they were personal. Often, I was a listening post for the pain or became involved in trying to alleviate it. Other times, as an administrator, I was the initiator of or accomplice to unhappiness. Often the intensity of the pain being expressed in my office was high, and while the visitors might leave feeling better, I often found myself carrying their pain around with me later, especially if I felt that I had somehow contributed to it.

For example, hours after the event, I might continually replay in my head a stressful encounter that took place in my office. I'd often feel a degree of sadness or frustration for the rest of the day. Or I might wake up at 3 A.M. with a visceral memory of a meeting the previous afternoon in which I had intervened in a conflict between colleagues. Whatever anger had been expressed at the meeting would keep me awake and restless in the early morning hours, thinking about how I might have dealt with the situation more effectively. Over four years, I found it increasingly difficult to let go of the pain that others presented me (though I was not really aware of the extent of that "wear and tear" until later). Issues that once might have stayed with me emotionally for only a few hours soon began to keep me awake for nights on end. Clearly, I was not dispersing the pain or the negative emotions. I was building up a residue of toxins, if you will, that made it more difficult to bounce back each day.

The more I thought about the seminar and my own experience, the more plausible it seemed that handling toxins for too long or in too intense an environment, without respite—as I'd done in my position at the university—can begin to penetrate the handlers' defenses: They take in the toxins. Faced with someone else's rage or cry for help, toxin handlers tend to confront the pain (the "fight" part of the fight-or-flight stress response). Although helping others to cope can carry its own sense of accomplishment, the bursts of adrenaline that occur in this role will, over time, wear down the helper's immune system. The result? Physical and mental ill health. (This is apparently true even for experienced pain handlers such as therapists and social workers, who despite their training can burn out and become very sick as a result of

this toxic contamination.⁷) So, while the supportiveness of my dean and my family were important modifiers of this effect, they were not enough to protect me from the long-term result of working so intensely with the emotions of others.

I recall vividly the first time I spoke publicly about these ideas. I was ending a morning session on leadership with some thirty managers, from a variety of countries, who were attending a three-week residential program at my school. All had successful track records in their companies and were being groomed for senior management posts. I decided to take the last ten minutes to sketch my ideas about toxicity in organizations and on the role and costs of toxin handling. The room went very quiet, and I wondered if it was because they were intrigued or because they thought I was crazy! I offered to continue the conversation over lunch with anyone who was interested. I added that I was starting to interview managers about their experiences with toxic situations and that I would be happy to include anyone in the class who wished to volunteer for the study.

At the end of class, I was mobbed by participants wanting to talk about these ideas. Many volunteered to be interviewed, and they typically had powerful stories to tell about toxicity in their organizations. The source of the pain might be other managers, organizational interventions, or simply change. Sometimes they saw themselves as a source of the pain and were astute enough to have caught the situation and dissipated the pain. Often, they described situations in which they were toxin handlers. Their backgrounds confirmed my hunch that the people who fill this role include line managers running projects, people in charge of operational units, and people who champion a product or service in their companies. Several participants recounted examples in which the toxin handlers themselves were “contaminated” by the emotions they were working with. Eventually, they became ill or they burned out.

Later, I began to distinguish between the formal and informal leaders in organizations who handle others’ pain, and those leaders who actually *create* pain for their subordinates and peers—whom I call “toxic bosses.” But I also began to see that sometimes there’s an inherent duality in this whole phenomenon: that it’s possible for a leader to

be both a handler of emotional pain *and* a source of that pain. This is an important point: Handlers of toxins can become so infected with others' pain that they, in a real sense, become "toxic" themselves, and begin inflicting pain on others. As I began to include these ideas in my presentations to management groups throughout Canada, in Australia, and in the United States, I found people connecting emotionally to the topic again and again. That encouraged me to expand the reach of our developing sample of interviewees, and soon the first publication of these ideas appeared in the *Harvard Business Review*.⁸

The Inevitability of Pain in Organizations

THIS BOOK focuses on the pathological effects of organizational toxicity and how to handle them. It also examines the compassionate actions of managers and leaders who strive to deal effectively and humanely with toxicity. However, it is critical to recognize that toxicity, or emotional pain, is a *normal by-product* of organizational life. All organizations, and indeed all managers in organizations, generate emotional pain as part of the normal process of conducting business—creating new products or services, setting new benchmarks for performance, and so on. Getting there is rarely painless. A decision by a company to go in a new direction or to acquire a competitor, or even to disperse benefits in a new way, may hurt some employees. A manager under heavy pressure to deliver results may come down hard on his team when the numbers aren't showing on the scoreboard. Another manager may start to micromanage her employees in the middle of a crucial new project, driving her subordinates to distraction.

While none of these events need be serious or enduring, they all produce some level of distress or disruption that needs attention if the system is to stay healthy. At "normal" levels of toxicity, the people on the receiving end may feel discouraged or deflated for a short while and then simply absorb it themselves. ("Joe's grouchy at the moment—he must be getting heat from the top. He'll get over it!") Or a manager herself might recognize that she has caused pain, and awaken in one of

those “3 A.M. moments” to think: “Oops, I really didn’t listen when Mitch was trying to make a point. I shouldn’t have jumped in with my opinion right away!”

But even though emotional pain is a normal by-product of life in the workplace, organizations that want to stay healthy need to learn to handle such toxicity effectively—or prevent it in the first place. Many biological systems demonstrate just that. While processing inputs, such as food and liquids that help it survive and get work done, the human system, for example, produces toxins—and then when functioning healthily, discharges or absorbs the toxins effectively. The kidney and the liver, among other components, act to eliminate toxins produced when a person eats, drinks, exercises, and so on. The problem arises, in any system, when the levels of toxicity become too high and remain at that level for a long time. In humans, ongoing stresses make it difficult for the natural toxin removers such as the kidney or the liver to function well. Over time they may wear down and become damaged, or the immune system may become compromised. Illness or even death can ensue.

In the case of organizations, the problem of toxicity generation, especially when it is intense and enduring, is magnified because most companies don’t see the role that debilitating pain can play in undermining their success. Or they often sweep it under the carpet as quickly as possible. They are even less likely to recognize the valid role of toxin handlers in the organization or to acknowledge and support the handlers when they need it.

This book, then, examines the various ways toxicity is handled in the workplace and offers ideas about how leaders, through compassionate actions, can help foster the health and productivity of their organizations and their people. Chapter 1 sketches a picture of the debilitating effects of emotional pain on individuals in organized settings—and what both compassionate and harmful responses to that pain look like. Chapter 2 examines the various sources of organizational toxicity, while chapter 3 looks in depth at the actual work of toxin handlers. The resulting emotional toll that managing toxins takes on handlers is the focus of chapter 4. Chapter 5 examines specific ways in which handlers can protect themselves from the toxins they help manage.

Chapter 6 describes how handlers can educate their organizations about the value of what they do and the ways in which they need support. This chapter also examines what organizations can do to protect these valued employees. Chapter 7 focuses on the compassionate role that leaders can take to manage toxicity in their organizations, and includes hands-on lessons for distributing the load beyond the designated toxin handlers. Chapter 8 looks at how organizations can create and sustain compassionate workplaces. This chapter offers specific steps that the organization itself, through its policies and practices, can take to prevent high toxicity by intervening effectively and enhancing the recovery of people affected by the toxins. Chapter 9 explores a variety of salient issues related to toxicity and presents a specific case to illustrate the potential of using emotional pain as a diagnostic or a lens into the sources of toxicity.

Given the opportunities and challenges facing organizations in the twenty-first century (including physical attacks unlike anything we've seen in recent times), good leadership more than ever requires the ability to anticipate pain and the skill to deal with it effectively and compassionately. At the very least, leaders need to understand how to clean up toxicity once it has been created. We can't prevent emotional pain in the workplace, but leaders who recognize that that pain indeed exists—and have compassionate systems in place for dealing with it—can create healthy organizations. It is my hope that this book offers the tools and the recipes to do just that.

To the reader: I am continuing to explore the role of emotional toxins in the lives of people and in their organizations. It is also my goal to gather more data (from stories and other sources) of the experiences leaders have in trying to prevent and deal with pain in the workplace. I welcome your reactions, your stories, your thoughts, and your insights that result from reading this book. I may not always be able to respond to every communication I receive, but I will enjoy hearing from you. Your feedback will enrich and be a contribution to my work on this important topic.

To reach me via e-mail, use frost@toxinhandler.com; or my Web site, www.toxinhandler.com. Thank you and be well. Peter Frost