



PATRICK TOMLINSON ASSOCIATES
DEVELOPING PEOPLE AND ORGANIZATIONS



LEADERSHIP

- 1. The Leadership of Organizations Providing Services for Traumatized Young People**
Patrick Tomlinson (2015)
- 2. The Value of Providing a Facilitating Environment**
Patrick Tomlinson (2018)
- 3. Emotional Containment (Relevant from Families to Presidents)**
Patrick Tomlinson (2018)
- 4. Shifting Boundaries: Therapeutic Work and Leadership**
Patrick Tomlinson (2020)

THE LEADERSHIP OF ORGANIZATIONS PROVIDING SERVICES FOR TRAUMATIZED YOUNG PEOPLE (2015)

If a leader needs people who can think about difficult problems, it is no use simply telling them what to do.

The leader of the organization is often between a rock and a hard place. Like Janus, the Roman God of gateways, sitting on the boundary of the organization with one eye looking out and one looking in – both views can seem equally challenging and hopeless. (Barton, Gonzalez and Tomlinson, 2011)

Rudy Gonzalez, Executive Director at the Lighthouse Institute asked me if I would write this blog on leadership (<http://goo.gl/eoadFw>). For over 20 years, Lighthouse who are based in Melbourne have provided a service for young people who have experienced homelessness. This is an achievement of leadership. I feel privileged to be asked to write on the subject and it didn't take me long to realize I could only scratch the service. I will mention some important aspects but leave out much more. Even so, this blog will be longer than usual!

Services for traumatized young people, as well as adults, are fraught with difficulty. Partly because of this, their history is one of controversy, sometimes including cases of abuse and scandal. We know that preventing the re-enactment of trauma is a challenge. It is a sad fact that just as in a family, where those who are supposed to protect and nurture children can end up abusing and traumatizing them, the same can also apply to organizations that are supposed to help the traumatized child.

Therefore, there has been a strong need over recent decades to try and discover what works and what doesn't (see Clough et al., 2006). Can we identify the factors that are most likely to correlate with positive compared with negative outcomes? The UK has had numerous Government initiated investigations into the 'Care System' for children and young people. Often these have been reactive, following the exposure of child abuse. The Warner Report in the 1990s identified two factors that correlated with positive outcomes for children in residential care. These are having a coherent philosophy of care and strong leadership.

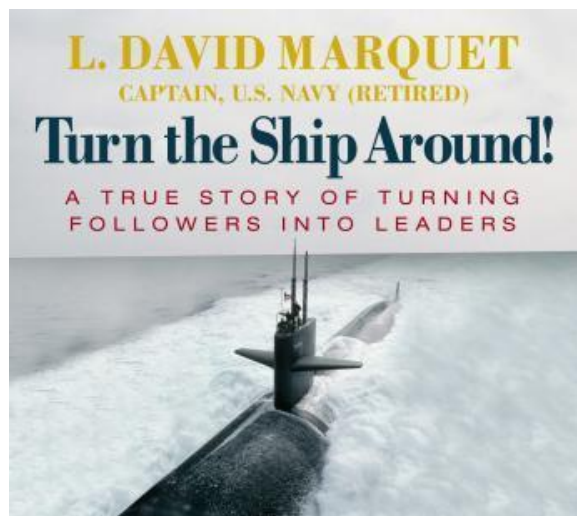
Given the challenge of leadership in such organizations and the identification of its importance, it is surprising how scarce the writing on it is. Although, I may have missed a few publications I can think of very little. There are many publications about work with traumatized young people. Some of these have excellent sections on leadership, but there are few specifics about leadership. Adrian Ward's recent book, which I refer to later is an exception. In the wider world, leadership must be one of the most written about subjects. I believe that leaders of organizations who serve traumatized young people would be very well placed to contribute. There could be little else that is so complex and challenging, and such rich ground for learning about leadership.

From the start of my career in 1985 in an English Therapeutic Community (The Cotswold Community) for emotionally disturbed boys, I soon learnt the importance of leadership. At a basic level, effective leadership could mean the difference between chaos and an appropriate level of stability. The difference between the two could mean: getting children to bed and asleep by 10 pm, compared with 3 am; having a satisfying day with young people compared with being physically assaulted and injured; feeling supported and understood, compared with feeling isolated and misunderstood or not even valued.

We had homes with 10 boys in each, a staff group of 5 and worked 60-70 hours (or more) per week. Each home manager reported to a senior management team of 4 people. I guess that on average 50% of home managers didn't last more than 1-2 years. Leaders had to be resilient and create a sense of safety for the staff team and young people. From its beginning, in the late 1960s, this community had consultancy from the Tavistock Institute of Human Relations. The 'Open Systems' theory developed at the Institute had an emphasis on issues related to role, responsibility and authority, and how these related to the primary task. This helped me to realize that the way a leader worked was as important as achieving successful short-term results. Short-term results can be achieved in ways that are not always helpful in the long-term.

For example, in any organization that works with traumatized young people, there will be an inevitable desire for a day without too much drama. The kind of difficulties experienced in these organizations can be extremely anxiety-provoking with high levels of risk. However, preventing the drama can be achieved in ways that are not congruent with the primary task. Some leaders do create order that feels safe. However, they might do it in a way that is based on the power of their personality and which creates dependency. Everything seems fine as long as they are present. The dependency on the 'powerful' leader might stifle the development of the staff team and more importantly the recovery of the young people.

Short-term gains can be sacrificed for long-term ones. How should a leader be evaluated in terms of effectiveness? I think it is important to consider success while the leader is in the post, but also what happened after the leader had gone. Had the leader established a way of working that could be sustained after his/her departure? Had the leader created a culture in which new leaders emerge? For the personality-driven leader, a collapse after his/her departure can even be gratifying. It may feel like confirmation of how good and indispensable he/she was. Some organizational cultures encourage a focus on the short-term and only reward leaders on that basis. Therefore, there may be little to encourage a leader to take the risk of devolving responsibility in others.



Recently a colleague recommended a book on leadership - Turn the Ship Around! A True Story of Turning Followers into Leaders, by L. David Marquet (2012). While Marquet talks of running a nuclear submarine the essence of his story is remarkably relevant to leadership in the organizations I am talking about.

In some ways, his challenging messages are even more powerful, because no-one can doubt the risk of operating a nuclear submarine, during a war, with over 100 people on board. Yet Marquet says things, such as,

Our greatest struggle is within ourselves. Whatever sense we have of thinking we know something is a barrier to continued learning. (p.1)

Resist the urge to provide solutions.... despite the time it would have taken, I should have let my officers figure things out. (p.91)

And,

When I, as the captain, would 'think out loud,' I was in essence imparting important context and experience to my subordinates. I was also modelling that lack of certainty is strength and certainty is arrogance. (p.106)

This reminds me of the concept of Negative Capability coined by the poet John Keats back in 1817. Keats described negative capability as the art of remaining in doubt *"without any irritable reaching after fact and reason"* and *"the willingness to embrace uncertainty, live with mystery, and make peace with ambiguity"*.

The British psychoanalyst Wilfred Bion elaborated on this, describing negative capability as the ability to put aside preconceptions and certainties, and tolerate the pain and confusion of not knowing. Bion also knew about leadership in challenging circumstances. By the age of 21, he had been promoted to Captain of a tank section fighting in World War 1.

More recently the child psychotherapist and psychoanalyst Adam Phillips (2013) in discussing parenting has said,

.... that the parents, the authorities, are at their most dangerous when they believe too militantly that they know what they are doing.

So, the thoughts of a poet in the early 1800s, which have been embraced by the world of psychoanalysis also provide an effective principle in the leadership of a nuclear submarine. In all these cases, 'not knowing' doesn't mean doing nothing. It means acting when we have given time and thought to the problem. 'Being with' the problem is doing something. Where

possible it also means involving others. It also means being clear about people's competence, so we have a realistic sense of what can be asked of them and when we need to 'take charge'. As Marquet (p.128) states, 'control without competence is chaos'. However, when we jump quickly into action with a sense of certainty it may well be that we have defended ourselves against the real difficulties involved. Not only is there a significant risk of mistakes, but we have also deprived others of an opportunity to contribute. Marquet explains,

How many times do issues that require decisions come up on short notice? If this is happening a lot, you have a reactive organization locked in a downward spiral. When issues aren't foreseen, the team doesn't get time to think about them; a quick decision by the boss is required, which doesn't train the team and so on. No one has to actually think through the issue, (p.92)

Steve Covey who writes the forward for Marquet's excellent book, states,

We are in the middle of one of the most profound shifts in human history, where the primary work of mankind is moving from the Industrial Age of 'control' to the Knowledge Worker Age of "release." As Albert Einstein said, 'The significant problems we face cannot be solved at the same level of thinking we were at when we created them.' They certainly won't be solved by one person; even, and especially, the one 'at the top.' (p.xxi)

This approach to leadership means a shift from a top-down leadership-follower to a less hierarchical leader-leader model. This is also reminiscent of what has been described in the world of therapeutic communities as a 'flattened hierarchy'. This approach can greatly encourage the development of authority and responsibility throughout the organization and most importantly in the young people. Menzies Lyth explained (1985, p.239),

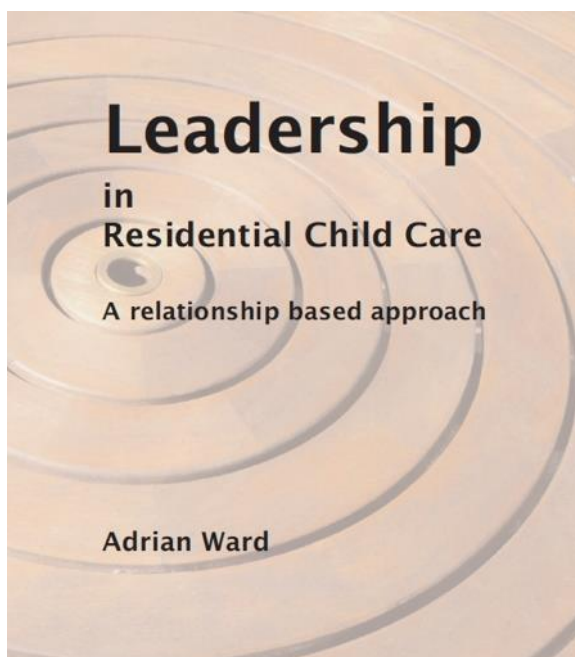
It is in general good management practice to delegate tasks and responsibilities to the lowest level at which they can be competently carried out and to the point at which decision-making is most effective. This is of particular importance in children's institutions, since such delegation downwards increases the opportunity for staff to behave in an effective and authoritative way, to demonstrate capacity for carrying responsibility for themselves and their tasks and to make realistic decisions, all of which are aspects of a good model.

About 15 years into my career I studied for an MA in Therapeutic Child Care. Adrian Ward was the course leader and along with his team provided a model of leadership through the way they ran the course. The training was experiential, and we learnt from this as much as from anything we were 'taught'. All our days at the University began and ended with a reflective group meeting. Ward (1999) has referred to this as the 'matching principle'. The mode of training must match or reflect the mode of practice. The way the course was provided matched key elements of what we needed to provide traumatized children. The same can be argued to

apply to leadership. If a leader needs people who can think about difficult problems, it is no use simply telling them what to do.

The leader of services for traumatized children is not just someone who will help the organization achieve results. Unlike many other businesses, industries and professions the way that he/she does this is of direct relevance to the service user. Traumatized young people have suffered a kind of authority that has been central to their difficulties. Those in positions of authority and power, instead of looking after them, in many cases abused, neglected and exploited them.

The leader represents an authority figure with specific meaning to traumatized young people as a parental figure. The way the leader does things will set the tone for the culture of the organization. Even if the young people don't experience much of the leader directly, they will experience him/her indirectly through the culture. Traumatized young people, like all traumatized people, have experienced a loss of control and a sense of helplessness. Therefore, leadership needs to be sensitive to these issues and encourage a culture that promotes self-control and choice. Trauma also often involves the violation of personal boundaries. Therefore, attention to and respect of boundaries is especially important. Trauma causes mistrust, so establishing trust is important. Denial and 'turning a blind eye' are often the defensive responses to trauma, so it is important to pay attention, listen and hear. All of this can only happen within the context of meaningful relationships. It could be argued that the way leadership is exercised provides young people with a template for healthy relationships.



To conclude by tying a few threads together. Adrian Ward (2014) who I mentioned earlier, published a book on leadership last year. The well-respected researcher and author on residential care, James Anglin, in his recommendation of the book, called it an 'Instant Classic'. As the title suggests, Ward's book has an emphasis on relationships. Childhood trauma takes place within a relational context and one of the central elements is attachment difficulties. There is a vicious circle. The lack of attachment makes a child more vulnerable to trauma and trauma causes attachment difficulty. Therefore, the culture of an organization for traumatized young people must be one where relationships are central. Therefore, the culture needs to be both Attachment and Trauma-Informed. The

leader in this context becomes a role model for the culture of relationships within the organization. This will influence the way everyone relates to each other, including the relationships with and between the young people.

As with Marquet in 'Turn the Ship Around!', Ward also urges that rather than being a problem fixer and someone with the answers, the effective leader works alongside others to find solutions. It is not that a leader shouldn't have solutions, but he/she should resist the urge to jump quickly into that role. While the leader is ultimately 'The Leader' this approach will also bring out the leadership qualities in others including the young people.

References

Barton, S., Gonzalez, R. and Tomlinson, P. (2011) *Therapeutic Residential Care for Children and Young People: An Attachment and Trauma-informed Model for Practice*, Jessica Kingsley Publishers

Clough, R., Bullock, R. and Ward, A. (2006) *What Works in Residential Child Care*, London: NCERCC and National Children's Bureau

Covey, S. (2012) Foreword, in Marquet, L.D. (2012) *Turn the Ship Around! A True Story of Turning Leaders into Followers*, Penguin Group: New York, USA

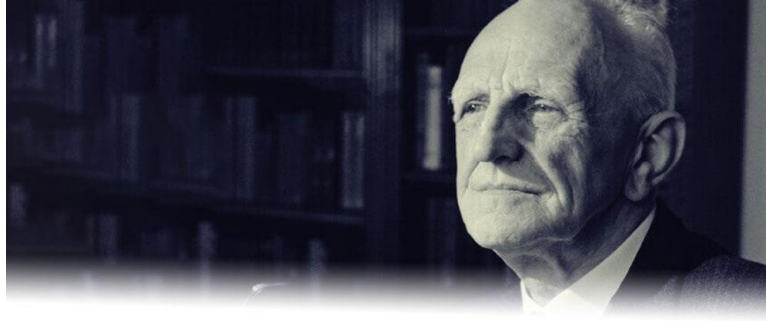
Menzies Lyth, I. (1985) The Development of the Self in Children in Institutions, in *Containing Anxiety in Institutions: Selected Essays Vol. 1*. London: Free Association Books (1988)

Phillips, A. (2013) The Magical Act of a Desperate Person: Adam Phillips on Tantrums, *London Review of Books*, Vol 35, No 5, 7 March 2013, p.19-20, <http://goo.gl/y5xHWL>

Ward, A. (1999) The 'Matching Principle': Designing for Process in Professional Education, in *Social Work Education*, 18 (2) 161 – 170

Ward, A. (2014) *Leadership in Residential Child Care: A Relationship-Based Approach*, Norwich: Smokehouse Press

Warner/Dept. Of Health (1992) *Choosing with Care: Warner Report - The Report of the Committee of Inquiry into the Selection, Development and Management of Staff in Children's Homes*, London: Stationery Office



(Donald Winnicott)

THE VALUE OF PROVIDING A FACILITATING ENVIRONMENT (2018)

Often what is desired today - is a step-by-step guarantee to success. How often do we see and get attracted to an article heading something like the '9' things you need to do to become an outstanding (or even world-class!) manager. It seems that putting a number in there is part of the appeal. Maybe because it alludes to the finite and quick fix, rather than the infinite and ongoing. The same formula is applied to all aspects of life – parenting, cures for health problems, diets, healthy living, etc.

Having guiding principles may be helpful, but every situation, including everything within it is a unique moment in time. People and the dynamics between them are less predictable than the laws of gravity. In life and work, we need to hold onto a balance of knowing and not knowing. In general, too much certainty tends to be an unhelpful position when working with people. There is an irony if we take that too far too – like the only thing certain in life is that nothing is certain. Warning against the potentially destructive nature of certainty, McNamee and Gergen (1999) go as far to claim that,

Certitude walks hand in hand with the eradication of the other.

And Adam Phillips talking about child development says that,

.... the parents, the authorities, are at their most dangerous when they believe too militantly that they know what they are doing.

Confidence is important, but real confidence includes having an open mind. An open mind includes the ability to doubt, question and not know. Learning from experience is powerful. Mentors and Gurus are most useful when they help mentees make sense of and learn from their own experiences. This might include taking something useful from the mentor but not being instructed. Instruction has its place but can be unhelpful where development is the task. People, teams, organizations cannot be instructed to grow, change and develop.

These are processes that take place within what can be called a facilitating environment. Where under the right conditions people learn and grow from their own experience. In my

working life, this concept has its roots in the work of child psychiatrist and pediatrician Donald Winnicott (1965). He developed the concept in his work on child development and treatment of developmental disturbances. A facilitating environment is a place from which things unfold, emerge and evolve. Winnicott captures the essence of it, which I think can be applied to many diverse settings,

....it has as its aim not a directing of the individual's life or development, but an enabling of the tendencies which are at work within the individual, leading to a natural evolution based on growth.

Increasingly I come across concepts like this being applied in business organizational settings. What I mean is that rather than focus on fixing and managing people, there is a shift to creating environments in which the capabilities of people will emerge. Back in 1996, the organizational consultant and executive coach, Lionel Stapley argued,

...what Winnicott refers to as 'A Facilitating Environment' one which encourages (or facilitates) the development of the child - seems to be the sort of organisation holding environment that is required in today's organisation.

Winnicott's work which spanned the 1920s-1970s was focused on the issue of change. What change is possible? And what might make it possible? Much of the 20th Century work environment was dominated by the manufacturing industry and the means of production that went with it. Instruction and repetition were central to this. Now that the pace of change in the world is rapid, constant innovation and adaptation are vital for success and survival. In this environment, curiosity and thinking outside the box are increasingly important.



These qualities can be facilitated, encouraged and supported but not instructed. They require freedom rather than restriction of thought. Instruction by its nature is confining and limiting. If the above qualities are important when do people feel at their best to work in that way? What are the ingredients of a facilitating environment? Firstly, safety and security are essential. This is why John Bowlby (1988) in his work on attachment theory, defined a 'secure base' – i.e. a caring and reliable parent, to be the starting point for human development. And after that, the permission to be curious is the second vital ingredient, just as the secure infant begins to discover and explore the world around her.

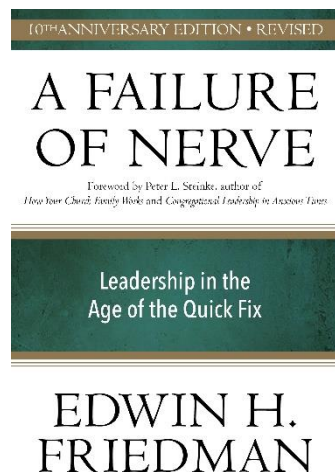
In the workplace this means that people must: feel connected in relationships; feel safe and trusted; be encouraged to be curious and innovative; be listened to; be encouraged to express

themselves. Clearly, there also needs to be boundaries. A lack of boundaries is generally not containing and does not feel safe. The challenge is working out where the boundaries should be. For instance, what is safe and clear, but not too restrictive? What is the line between innovation and recklessness? Working this out is a matter of judgement. And once it is worked out it won't stay the same for long. Systems that are working well, grow. The boundaries need to adapt accordingly, or the next stage of growth will be hampered. So, the process of boundary setting is one of continual review and negotiation.

Unfortunately, what many people experience at work is the opposite of what is needed. They experience constant disruption of relationships, reactive cultures and decision making, a lack of communication and trust, and an autocratic leadership style that puts people tightly in their little box. Of course, this is not universal, but it is common. The primary reason is that the rate of change among other factors has inevitably raised societal anxiety levels. We have not simultaneously raised our ability to live and work with increased anxiety.

Edwin H. Friedman (1999) wrote about this in his book, *A Failure of Nerve: Leadership in the Age of the Quick Fix*, when he claimed that society had become riddled with anxiety. Since then it has only got worse! It could be argued that we now live in a culture of alarm. Going back to the false solution of '9' steps, it can be argued that what is needed more than ever, is a focus on the containment of anxiety. For example, a leader who can do this effectively provides the beginning of a facilitating environment. Just as a parent's ability to think about, make sense of and respond to an infant's anxiety provides the beginning point of human growth, emotionally and physically.

If we agree with this, the next question is to consider what it looks like? How do we identify the qualities and skills involved? In an already anxious system, this task might feel too challenging. For instance, when it comes to recruiting a suitable person, ticking a few easily measurable boxes might seem an attractive method, however much we know it doesn't work. How do we strive towards what will work and create environments where it is safe to use our judgement?



As Friedman said with the title of his book, the biggest problem of leadership from families to presidents, is a failure of nerve. He also pointed out that those leaders who do hold their nerve can expect to be derided and attacked to an extreme level. Exactly as we now see daily in the media. These are symptoms of a chronically anxious society or system. Friedman saw these attacks on a 'self-differentiated' leader as a natural response when he or she makes a stand. He referred to it as sabotage and a sign that the leader was probably doing a good job. As long as the leader survives these attacks in a non-reactive manner the system will begin to regulate itself and function better. As with Winnicott's facilitating environment, the leader must be able to make a stand and accept that being tested is part of the work.

For these reasons leadership in the modern age is extremely difficult, whether we think of it at the level of family, organization or society. It is also why the concept of the facilitating environment is so important and relevant.

References

Bowlby, J. (1988) *A secure base: Parent-child attachment and healthy human development*, New York: Basic Books

Friedman, E.H. (1999) *A Failure of Nerve: Leadership in the Age of the Quick Fix*, New York: Church Publishing, Inc.

McNamee, S. and Gergen. K. (1999) *Relational Responsibility*, Thousand Oaks, CA: Sage

Outside of the Box pic - <http://gritnwit.com/>

Phillips, A. (2013) On Tantrums: The Magical Act of a Desperate Person, *London Review of Books*, Vol 35, No 5, 7 March 2013, p.19-20. For podcast of this article, <https://www.lrb.co.uk/v35/n05/adam-phillips/the-magical-act-of-a-desperate-person>

Stapley, L. (1996) *Personality of the Organisation*, London and New York: Free Association Books

Winnicott, D. W. (1990) *The Maturation Process and the Facilitating Environment*, London: Karnac Books.

EMOTIONAL CONTAINMENT (RELEVANT FROM FAMILIES TO PRESIDENTS) (2018)



Edwin H. Friedman (1999) in, *Failure of Nerve: Leadership in the Age of the Quick Fix*, made the point that leadership qualities are necessary in all walks of life, from “Families to Presidents”. He discussed how self-differentiation is the key quality required of leaders at home, work and in society. A well-differentiated person achieves a healthy balance between the needs for individuality and togetherness. The emotional containment provided by this is essential for healthy functioning, whether we are thinking about the leader as a parent or president.

.... a leader functions as the immune system of the institution or organization he or she ‘heads’. (Friedman)

So, what does this look like? A secure sense of self, self-confidence, ability to relate well with others, ability to tolerate difference? An insecure person tends to need sameness, agreement, and compliance to affirm their fragile sense of identity. A secure person is more able to hold onto their own identity, opinions, views, self-worth, while allowing others to be different and even directly challenging. They tend to remain calm and thoughtful when challenged, rather than become defensive and reactive. They are able to be separate and close in relationships at the same time.

Being clear without being certain, recognizing that for the most part, views and beliefs are opinions rather than absolute truths. Any truth is usually truth with a little t. Whereas insecure people tend to act as if their views are the Truth. This is an anxious defence, as the thought of not knowing or being wrong is too threatening. These initial thoughts begin to show how we might develop ways of identifying whether a person has a secure, but not a rigid sense of self.

A secure sense of self develops through attachment to others, primarily parents and other caregivers during the formative years. Such a person tends to have a coherent narrative of their life history. A coherent narrative that might include serious difficulties, is a more reliable indicator of healthy development, than the absence of difficulty on its own. It is the coherence that is most important. This most likely means that the person has been able to integrate their life experiences. It is not difficulty or adversity that is the issue, but the person’s ability to make sense of and integrate experience. We can only make use of experience that has been integrated into our personality.

That which is not integrated is split off and unavailable. These split off and unconscious parts of our history can also disrupt and inhibit healthy functioning. The reason that experience is not integrated is usually to do with it being overwhelming. Not that the event itself was impossible to integrate, but it overwhelmed the person’s capacity at that moment in time. Capacity is related to the combination of individual resource + support available. Trauma is in the system, not the event. The event cannot be experienced and that is why disassociation is a common

reaction to trauma. Disassociation can be thought of as putting the event outside of the self, as if it is not happening to the person. The response to the event becomes a bigger long-term problem than the actual event. Back in 1893 Freud and Breuer said that,

Psychological trauma or more precisely the memory of the trauma – acts like a foreign body which long after its entry must continue to be regarded as the agent that still is at work.

Contemporary trauma research by neuroscientists such as Bessel Van der Kolk, Peter Levine, and Bruce Perry confirms this. This does not mean that trauma always prevents adequate functioning in life, relationships and work. It does mean that psychic and physical energy may be taken up as a result, depleting an individual's energy and mental space.

When life around us is challenging, it is more likely that we become overwhelmed. This also correlates with the quality of support available. Given the environments that many people live and work in, where challenges are great, and support is little, unresolved trauma can be a significant difficulty. Therefore, it makes sense to recognize this and build in ways of supporting people.

Events that can lead to trauma may not have increased over the years, they may have even reduced, but our collective capacity to cope with these events has reduced. For example, by the fragmentation of family, industry and community life. Frank Furedi (2004) also argues strongly that cultural changes in perception of trauma have also weakened our resilience. This is what has led to an increase in trauma. Solutions need incorporating into many spheres of life, including the workplace. Leaving trauma simply as a 'medical' issue to be taken up only when symptoms become unbearable is not adequate. In the workplace, the consequence is often a workforce unable to carry out its task efficiently, prone to its own symptoms of dysfunction. Leaders and managers must be healthy in their own functioning, and able to maintain and grow their abilities. They must have a strong support network around them - family, colleagues, friends, mentors, consultants, etc. Friedman goes as far to say,

That all leadership begins with the management of one's own health.

A secure person is more likely to stay reasonably calm in challenging and threatening situations. Staying with and being able to think about a difficult situation is more likely to have a positive outcome. Reacting, which by nature is thoughtless does not bode well for finding constructive solutions. Acting firmly and decisively in an informed manner is different from reacting. However, there may be a fine line between the two and it is a matter of judgment to know when one may be reacting. Not reacting does not mean being indecisive.

The ability to set clear boundaries that are not too rigid is a crucial skill. One way of dealing with anxiety and risk is to create tight restrictive boundaries. To give a simple example – someone not allowed to get out of bed for a day risks little chance of injury. If a child is not allowed out of sight, an accident may be less likely. Anxiety led environments tend to focus on the immediate

rather than the longer-term bigger picture. Too much control may reduce risk in the short-term but can have negative long-term side effects. What starts as risk-reducing and survival enhancing, if it is prolonged becomes life-limiting and risk producing. Again, the balance between the two can be a fine line and a matter of judgment.

In the case of the over-protected child, development will be stifled, with possibly serious consequences to potential and well-being. An anxious environment will not be too concerned about this as the main priority is to survive the next minute, hour and day. Once an individual, family, team, organization or any system becomes locked into this state, effective decision-making is compromised with potentially disastrous long-term consequences.

The ability to think about complex issues, short and long-term is very important. Many decisions and interventions that might seem appropriate in the short-term can have negative consequences down the road. For instance, an appropriate boundary is one that allows enough space for consistency and exploration, but not so open-ended that it leads to a lack of safety. The skill is in the judgment, supported by processes of assessment and risk management. To some extent, this skill can only be demonstrated. The 'proof is in the pudding' as the saying goes. And because each situation is new and unique, what was demonstrated to work before, is not an absolute guarantee of success now or in the future. This is one reason why we might be surprised by a leader who achieved great success in one situation, only to fail in another.

A person who can set appropriate boundaries will also recognize that those boundaries need to change and adapt over time. Effective boundary setting will facilitate development, and development will push the boundaries. For example, a parent does not usually have the same boundaries with a five-year-old as with a teenager. At each point of growth/change, where the boundary needs to adapt, there is always the uncertainty of 'by how much'. This means anxiety is inevitable. Being able to manage anxiety is an essential task of parenting and leadership in general.

The easy and unhelpful solutions are 1) have rigid and unchanging boundaries, or 2) have none. In other words, to be overly authoritarian or overly permissive. Both are likely to produce fear and not promote development. As can be seen with this issue of boundaries, the environment needs to be interconnected and integrated. For instance, an insecure person is likely to struggle with changing boundaries, with all the new territory, risks and uncertainty involved. The fear of things 'falling apart' both internally and externally is great. Awareness and consistency of everyone involved are essential.

Understanding and conceptualization can inform the way we think about everything we do. Kurt Lewin's (1943) view, that there is nothing so practical as a good theory, rings true. For instance, we can look at how we understand a child's needs and how this will then inform a chain of connected matters.



Clifford-Poston in her book 'Successful Parenting', stated that the foundation of child development is a secure base and the permission to be curious. If our view is that children need understanding and encouragement, as well as clear boundaries to develop curiosity – what kind of people do we need for the child?

In the workplace if we know the qualities needed for a specific task - how might we look for these qualities in the process of staff selection and development? Do we have the right process, are we asking the right questions, looking in the right areas? If we are confident about our selection process, how do we then support development?

While I have referred to child development, the principles apply widely. People tend to do better and grow, in well-led and organized environments – which provide emotional containment.

References

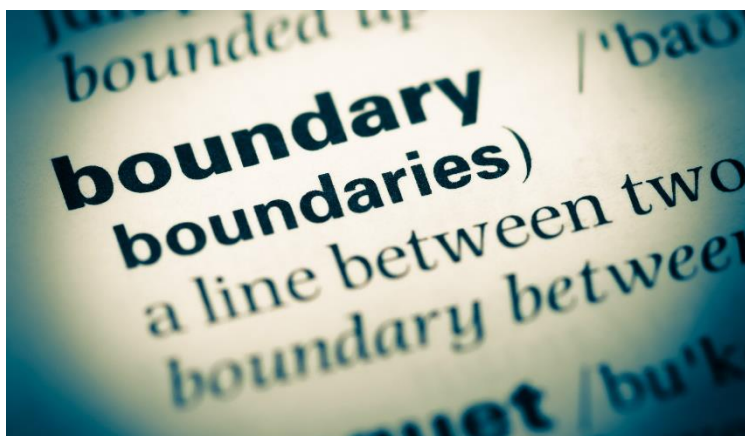
Breuer J, Freud S: On the Psychical Mechanism of Hysterical Phenomena: Preliminary Communication (initially published in *Neurol Zentralbl* 1893; XII:4-10, 43-47); in *The Standard Edition of the Complete Psychological Work of Sigmund Freud*, London, Hogarth Press and The Institute of Psycho-Analysis, 1966, vol II, pp 13-17

Clifford-Poston, A. (2001) *The Secrets of Successful Parenting: Understand What Your Child's Behaviour is Really Telling You*, Oxford: How To Books

Friedman, E.H. (1999) *A Failure of Nerve: Leadership in the Age of the Quick Fix*, New York: Church Publishing, Inc.

Furedi, F. (2004) *Therapy Culture: Cultivating Vulnerability in an Uncertain Age*, London and New York: Routledge

Lewin, K. (1943). Psychology and the Process of Group Living. *Journal of Social Psychology*, 17, 113–131. Reprinted in *The Complete Social Scientist: A Kurt Lewin Reader*, (Gold, Martin, Ed) (1999) (pp. 333–345). Reprinted (in part) in Cartwright, 1951, Chapter 7



SHIFTING BOUNDARIES: THERAPEUTIC WORK AND LEADERSHIP (2020)

I cannot think of anything in the last 50 years that has caused such a sudden and widespread disruption of global life and work. The invisible virus and our responses to it have redefined our lives in a very tangible way. Previously unimaginable restrictions have been put in place. Our boundaries in life and work have been redrawn. In some occupations, work has been made impossible. For example, air travel. In others, there has been a rapid reorganization, with many implications, which we do not know yet. Ordinary, everyday experiences have a beginning, a middle and end. In this situation, while there will be an end, we do not know when it will be or what it will look like. We are in a daily situation of huge uncertainty. However, at the same time the restrictions put in place, seem to have provided containment for some traumatized young people, and maybe others, who have found the narrowing down of daily life to be less challenging. Joana Cerdeira, a psychologist and supervisor in residential care, Portugal, commented,

Some children who are usually very disorganized appear to have settled quite well. It is almost as if the physical containment that arises as a result of the pandemic, provides safety.

The Importance of Boundaries

My work has always been with services to children and young people who have suffered from trauma and other adversities. I no longer work directly with children but with individuals and organizations who do. In work with traumatized children, the establishment of clear and appropriate boundaries is a central part of the work. This is true of all therapeutic work. One of the main reasons for this is that complex childhood trauma involves a lack of boundaries. The child may be treated as if she has no personal boundary, for example, in abusive situations. The child may not be recognized as a child with her own needs. She may be used to gratify an adult's needs. Therefore, the boundaries between people and roles are confused, muddled, inconsistent and sometimes non-existent. Bessel van der Kolk et al. (2007, p.424) summarize why this is so important,

“Since interpersonal trauma tends to occur in contexts in which the rules are unclear, under circumstances that are secret, and in conditions where issues of responsibility are often murky, issues of rules, boundaries, contracts, and mutual responsibilities need to be clearly specified and adhered to (Kluft, 1990; Herman, 1992). Failure to attend strictly to these issues is likely to result in a recreation of aspects of the trauma itself in the therapeutic situation.”

In therapeutic work, there are many reasons why clear boundaries are so important. A person without personal boundaries is an undifferentiated person, or what Donald Winnicott (1962) called an unintegrated person. A sense of personal identity and self is usually well on the way to being established in early infancy. The infant begins to know that her mother is a separate person with her boundary. This is a difficult and even frightening realization. The infant may try to control and merge with the mother as a defence against this. Growth takes place because of the mother’s firmly held boundary and containing presence. Her containing presence is not one that is free of anxiety, but one in which anxiety can be thought about rather than reacted to.

Boundaries that are firm, clear and consistent help contain anxiety. In other words, boundaries help provide structure. Events in daily life that have a clear beginning, middle, and end can be understood and internalized. Those that work with clients whose boundaries are weak or undeveloped, and who have difficulty containing anxiety, know the consequences where boundaries become unclear. One person I work with, Rui Lopes who is a Director of a therapeutic residential home for young people told me recently,

It has never been so evident how the emotional state of the adults affects the states of young people. When an adult is anxious, nervous, and sad, kids are reacting to that – mirroring the state of mind and the emotional states – I have never seen that so strongly before.

Once an adult in the work situation becomes unable to contain his anxiety, this also becomes uncontainable for the child for many reasons. An adult who cannot contain his feelings, will not be able to contain a child’s. A child’s past traumas may be associated with an overwhelmed adult – when adults were most likely to lose control and become unsafe. Consistency, the ability to think and to be non-reactive are all challenged when overwhelmed. What is felt inside is all too suddenly felt on the outside and vice-versa. The boundary between internal and external worlds is lost or weak. Improving this boundary is a major task of therapy. So, the person is more able to distinguish between the two. For example, what a traumatized child feels about herself may also be what she believes others and the world to be like, and vice-versa. For instance, I am dangerous – the world is dangerous. I am unlovable – others do not love me. Experiencing that the two can be separate is a slow and fragile process. The steadiness of an adult with a clear sense of their boundaries, but receptive and attuned to the child is the basis for growth.

Setting and Breaking Boundaries

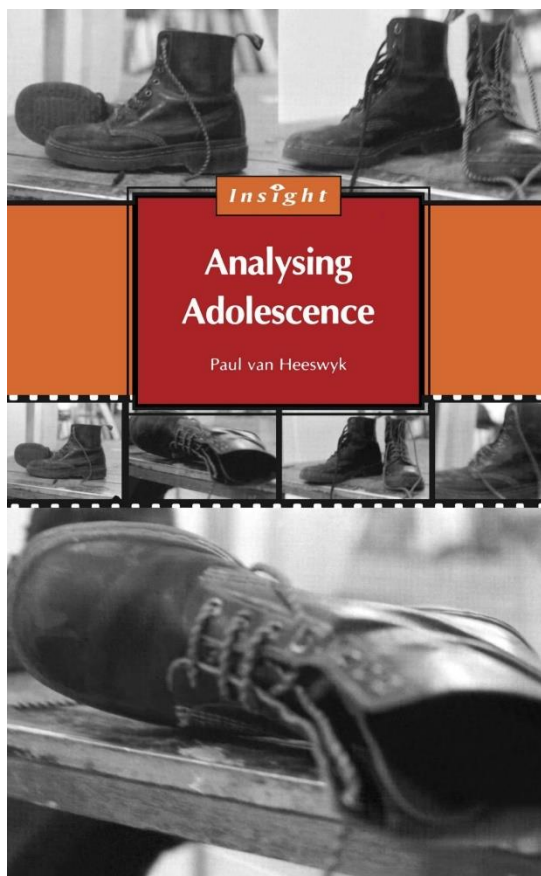
Different boundaries have different levels of permeability or flexibility. Some boundaries must not be broken or crossed under any circumstance. These may be described as absolute limits.

There are other boundaries, that we expect to be tested and crossed. Emotional growth may not even be possible without testing and crossing boundaries. A boundary draws a line between what is allowed and what is not. The line must be flexible enough to allow enough of whatever is desired but not too much. For example, saying to a young person, you can go out but need to be back by 9 pm. This may be containing for the child and it may also create an interest and curiosity in what happens after 9 pm? It can be argued that the boundary sustains desire of something a little out of reach. We want children to be protected from negative external influences, but we also want them to explore and learn how to manage themselves in the world. The child psychotherapist, Phillips (2009, p.1), in his paper 'In Praise of Difficult Children', said that,

The upshot of all this is that adults who look after adolescents have both to want them to behave badly, and to try and stop them.

Phillips (p.2) says that the adult provides something to truant from and the adolescent discovers something to truant for. In therapeutic work as well as in ordinary development, there is often hope when boundaries are challenged. When a true sense of self starts to emerge in a previously compliant child, for instance. We start to see the 'true' rather than 'false' self

(Winnicott, 1960). Child and Adolescent Psychotherapist, Van Heeswyk (1997, p.3) explains the ambivalence involved in this kind of boundary setting,



“Typically views held by adults in regard to adolescents are, to say the least, ambivalent. We see them as vulnerable victims, or as young sadists who inflict terrible damage on others; we fear them as posing grave danger to our cars, property, jobs, morals and way of life, or fear for them as an endangered species requiring special protection; we envy their freedom and hopefulness, or cling to them as the only hope for ourselves and the planet; we curse and constrain their wild impulsivity, or seek to facilitate and encourage their escape from the repressive convention that constrains the school-children that they were and the adults they will become.”

The same kind of ambivalence towards the restrictions imposed by the virus situation has become clear. Protesters (boundary breakers) are both criticized and praised. It all depends on which side of the fence you are sitting.

Different Types of Boundary

The following are different examples of boundary that we need to be aware of and manage in a way that is supportive of the therapeutic task.

- Boundaries between the worker/caregiver and child
- Boundaries between children
- Boundaries between workers, professional disciplines, roles, and departments
- Physical boundaries, within the home, marking personal spaces, e.g. a child's bedroom
- Personal and professional boundaries
- Boundaries around behaviour, i.e. rules and the limits of what is acceptable and what is not
- The boundary between the conscious and unconscious

To support the therapeutic task the whole organization will need to be clear about its boundaries (Barton, Gonzales, and Tomlinson, 2011, p.129). Boundaries can be literal and tangible, like a fence or wall or they can be implicit. In one home I worked in we were replacing the garden fence. Even when the old fence was knocked down the children still asked if they could step over the boundary, to get a ball for example. The boundary was still clear despite the removal of the physical marker. The children were contained inside the boundary not literally by the fence but by their relationships with the adults. With young people who have suffered complex trauma, physical and tangible boundaries can be especially important. Menzies Lyth (1985, p.245) explains how having a clear boundary, such as a door where permission to enter must be given, can have a positive effect on the development of identity,

It gives a stronger sense of belonging to what is inside, of there being something comprehensible to identify with, of there being 'my place', or 'our place', where 'I' belong and where 'we' belong together.

Boundary Changes Due to the Virus Situation

A profound characteristic of a virus is that it is invisible as it travels from one person to another. There is a complete lack of boundary for the virus. The virus cannot live without infiltrating a host. A person we are close to may also be toxic with potentially disastrous consequences. The virus does not discriminate between people. So, someone who looks after you may also be a danger by being too close. There is a parallel to the root of complex childhood trauma. Where those who are supposed to love and look after you, hurt you. The psychological, as well as biological implications, are clear for those who work closely with vulnerable people. In therapeutic work with traumatized children, the concept of emotional contagion is familiar. As Lanyado (1989, p.140) described,

“Disintegration is catching – and the staff are prone to it too. At times staff may feel anxious that they too could collapse like a house of cards. This is an extreme situation – but I am sure there are few of us working in these settings who don't feel this way at times. The child's extreme anxieties can eventually threaten the integrity of their closest adults.”

This is relevant to the concepts of vicarious trauma, secondary traumatic stress, toxic stress, and burnout. Now alongside the potential emotional contagion, there is also the risk of physical contagion. The two also feed into each other. The physical risk can cause anxiety, which if it is chronic can weaken the immune system. A person's life may be at risk due to anxieties about the virus, rather than the virus itself. Therefore, the management of anxiety is vitally important to contain and hold such a fragile situation. This is central to the task of everyone involved – leaders, managers, carers, and therapists. It always is important but is brought so sharply into focus during a crisis. A calm, regulating presence is required.

The family therapist and leadership consultant, Friedman (1999, p.232) uses the metaphor of a transformer in an electrical circuit to describe the process of containment. The electrical current (anxiety) enters the transformer. The transformer can either be designed to step-up or step-down the current. He refers to a comment made to him,

My mother was a step-up transformer, all right. If there was anxiety in the room and she was present, you could count on it escalating. It went into her at 110 and came out at 11,000.

Friedman claims that it is presence rather than action that tends to calm down anxiety. He believed that it is presence and being that counts, not technique and know-how. He argued that this is true for parents, leaders and therapists. But as he explains (p.232) this is not easy, "Part of the conceptual leap from action to presence is that all leaders, parents, or presidents, have been trained to *do* something – that is to *fix it*."

He continues, "To the extent that leaders and consultants can maintain a non-anxious presence in a highly energized anxiety field, they can have the same effects on that field that transformers have in an electrical circuit". One unhelpful and defensive way of appearing non-anxious is to shut-off or disconnect. As Friedman (p.183) states,

Anyone can remain non-anxious if they also try to be non-present. The trick is to be both non-anxious and present simultaneously.

What is the Impact of all this?

With the pandemic, we have experienced a huge change, along with fear. There has not been much warning or time to process all these changes. The impact upon us is potentially exhausting to deal with. Some people have remarked how tiring it is to be staring at a screen all day with online meetings. While there may be some truth that online work can be tiring, it is difficult to know how much of the tiredness is more a symptom of dealing with change. Change can be exciting, especially when we have time to make a choice. Change forced upon us without warning is more likely to provoke, fear, anxiety, and uncertainty.

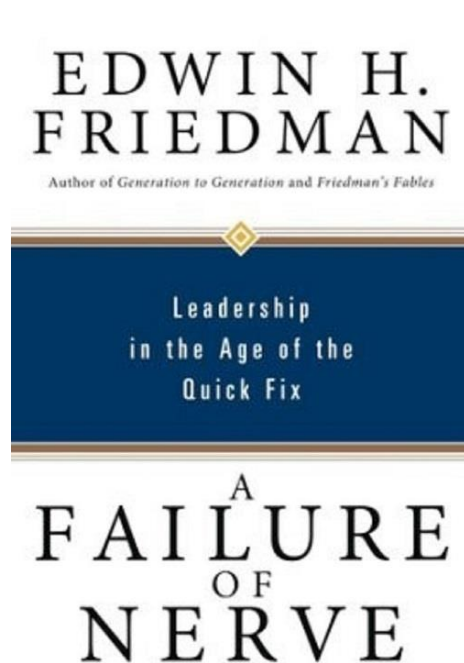
Therapeutic processes tend to have high levels of predictability and consistency. They are usually negotiated with a degree of control. It is part of what can make things safe. Now everything is suddenly different with so much unknown. Some of the boundaries are gone and

management of boundaries is less controlled. The space of the meeting room has suddenly changed into the family domain with all the potential interruptions and distractions. Of course, how these things are managed can be a valuable part of the therapeutic work.

Relationships, in general, can become less clear during this crisis. Who is the carer and the cared-for may not be so obvious? In therapy work, clients are likely to inquire about the health of their therapist, etc. In the present circumstances, these questions may be an objective and healthy concern rather than a neurotic symptom. These changes alter the nature of relationships. What is shared or not between people, changes. The normal hierarchies are challenged. This is not necessarily a bad thing, but it means we might be uncertain where the boundaries are. Friedman (1999, p.182) who referred to leadership as belonging to everyone from parents to presidents, claimed that,

Leadership begins with the management of one's own health.... and ...a leader functions as the immune system of the institution or organization he or she 'heads'.

Our health is largely influenced by the state of our immune system. This, in turn, is influenced by many factors, what we eat, exercise, how much we sleep, stress, and our support network. The Virus situation has disrupted our daily habits so there is a need to adapt to stay healthy. For example, we may need more sleep to process and recover from the challenges we are facing. We may need to find ways of exercising indoors. The way we keep connected and make use of support networks will have changed. To reduce stress some people have found it helpful to manage their exposure to news and social media. All of this is a vital part of self-management. This kind of adaptive response, as well as helping to manage a difficult time may also lead to personal growth.



Friedman argued (p.157) that an immune system is primarily not about fighting off threats but preserving the integrity of the organism. It is fascinating how he wrote over 20 years ago about viruses in a literal and metaphorical sense. He explained how a virus or 'parasite' impacts on cells, individuals, families, organizations, and societies. He claimed that the processes from cell to societal levels were universal and could only be managed at all levels by a healthy sense of self-differentiation. So, the first vital thing we need to do is to manage our self and do everything possible to be in a healthy mind-body state. To be a calming self-differentiated presence. Such a leader can be present amid emotional turmoil, actively relating while calmly maintaining a sense of direction. With this capacity, he or she can affect the whole system of relationships and reduce the level of anxiety in it, whether it is a family, organization, or society.

References

Barton, S., Gonzalez, R. and Tomlinson, P. (2011) *Therapeutic Residential Care for Children and Young People: An Attachment and Trauma-informed Model for Practice*, London and Philadelphia: Jessica Kingsley Publishers

Cerdeira, J. (2020) Psychologist, Supervisor (consultant), Residential Children's Home, Portugal – Comment on LinkedIn 13th April 2020.

Friedman, E.H. (1999) *A Failure of Nerve: Leadership in the Age of the Quick Fix*, New York: Church Publishing, Inc.

Herman, J.L. (1992) *Trauma and Recovery*, New York: Basic Books

Kluft, R. (1990) *Incest-Related Syndromes of Adult Psychopathology*, Washington, DC: American Psychiatric Press

Lanyado, M. (1989) United We Stand, *Maladjustment and Therapeutic Education*, Vol. 7, No. 3, p. 136-146

Lopes, R. – Director of Residential Care Home, Portugal, Comment – 2020 04 15

Menzies Lyth, I. (1985) The Development of the Self in Children in Institutions, in *Containing Anxiety in Institutions: Selected Essays Vol. 1.*, London: Free Association Books (1988)

Phillips, A. (2009) In Praise of Difficult Children, *LRB Vol. 31 No. 3*, London: London Review of Books

Van der Kolk, B.A., McFarlane, A.C. and Van der Hart, O. (2007) A General Approach to Treatment of Posttraumatic Stress Disorder, in Van der Kolk, B. A., McFarlane, A. C. and Weisaeth, L. (eds.) *Traumatic Stress: The Effects of Overwhelming Experience on Mind, Body and Society*, New York: Guilford Press

Van Heeswyk, P. (1997) *Analysing Adolescence* London, Sheldon Press

Winnicott, D.W. (1960) Ego Distortion in Terms of True and False Self, in *The Maturation Process and the Facilitating Environment (1972)* London: Hogarth Press and the Institute of Psychoanalysis

Winnicott, D.W. (1962) Ego Integration in Child Development, in, *The Maturation Process and the Facilitating Environment*, Hogarth Press and the Institute of Psychoanalysis: London (1972)