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## SPEAKING OUT

## Learning From the Director's Role: Leadership and Vulnerability\*

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## Abstract

In 1990, immediately following the A. K. Rice Institute's (AKRI) National Residential Group Relations Conference, the organisation went through significant turmoil resulting in the Board's public firing of the conference director from his contract, with no reasons given. The founder of the organisation, Margaret Rioch, and many other senior people resigned from AKRI in protest. All of the participants in this crisis felt that they were acting ethically and responsibly within a tradition committed to clear boundaries, focus on the primary task, and attention to the potential for the unconscious projective use of an individual by the group. Yet, the damage was considerable. I was that conference director.

In 1991, one year following these events, I became the Medical Director/Chief Executive Officer (CEO) of the Austen Riggs Center. That same year, the Board of AKRI elected me as a Fellow. Twenty-five years later, following my retirement from Riggs, the AKRI Board again appointed me to direct their annual International Residential Conferences from 2013-2015.

All of these events provided opportunities to learn about vulnerability, projection, and the importance of clear roles and an agreed upon task. The primary task of group-relations conferences is to "provide opportunities to learn through experience about authority, leadership and organisational life". This paper reviews some of that learning "from the director's role". What are the risks and opportunities when the director is publicly vulnerable? What are the applications of group relations conference learning for directing a real world organisation?

*Key words:* leadership, group relations conferences, Tavistock, authority, task.

Tavistock-style residential group relations conferences sponsored in the US by the A. K. Rice Institute (AKRI) offer opportunities for people to construct a temporary organisation to learn about organisational

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dynamics and the sources and nature of institutional irrationality (Aram et al., 2015; Coleman & Bexton, 1983; Coleman & Celler, 1985; Gould et al., 2001; Krantz, 2006; Rice, 1965; Shapiro & Carr, 2012). Since 1974, I have either directed or served on the staff of over forty group-relations conferences in the US and abroad. I have directed five AKRI national and international residential conferences: two in 1989–1990 and three from 2013–2015. Directing these conferences is both stimulating and stressful. A lot happens in a short, intense period and, though the primary task is member learning, the director also has an unusual learning opportunity. In addition to these conference roles, from 1991–2011 I directed a real world organisation. My learning from both settings is the focus of this paper.

In 1991, I became the Medical Director/Chief Executive Officer (CEO) of the Austen Riggs Center, a small psychodynamic hospital focusing on so-called “treatment resistant psychiatric patients” in Stockbridge, Massachusetts. It was a stressful job; many of the patients had serious suicide attempts prior to admission and the work was intensive, long-term, and psychodynamic. The treatment setting was completely open with no restrictions, seclusion, or restraints. We managed our work within a therapeutic community organised by the patients where the focus was on the patient’s authority. We formulated our primary task in one sentence: “to help ‘treatment resistant patients’ become people taking charge of their lives”. “Taking charge” is a phrase about authority—and authority is the centre of group relations work (Shapiro & Carr, 2012).

Over the next twenty years, we reshaped the organisation’s culture and its structures, formulating marketing and development functions, downsizing over a third of the workforce, renovating and redesigning the entire campus, facing lawsuits, suicides, difficult regulators, and personnel problems, and working with a responsive Board of Trustees. By the last ten years of my tenure, this small institution had raised a significant endowment, developed working relationships with Harvard and Yale, found a consistent place on the *US News & World Report’s* Best Hospital’s list, initiated the Erik Erikson Institute for Education and Research, invited several organisational consultations from Tavistock trained consultants, published a number of books and papers, and sent scores of staff members to group relations conferences (Plakun, 2011; Shapiro, 1997, 2001a,b,c, 2005, 2009, 2012, 2013; Shapiro & Carr, 2006; Shapiro & Fromm, 1999; Shapiro & Plakun, 2009).

Riggs stood for a psychodynamic systems approach to treatment in a clinical world increasingly focused on the behavioural and biological; the President of the American Psychiatric Association referred to us as “the gadfly of American psychiatry”. Despite all of the stress,

I loved the work; it was a role that allowed me to fully engage the staff, the patients, the board, and a broad range of external organisations around a primary task that mattered a great deal to me. On reflection, I do not believe that I would have dared to undertake this job without everything I had learned directing and staffing group relations conferences.

### DIRECTING CONFERENCES

I want to focus on two residential conferences that I directed, one in 1984 and one in 1990, both prior to my taking on the directorship at Riggs. I will conclude with some comments about the most recent conferences I directed in order to show application in the other direction: from leading an institution to directing a conference.

In 1984, two days before the beginning of a weeklong residential conference sponsored by the Washington Center, the director (a senior, white, military man) resigned because of the sudden illness of his wife. I was the associate director. I had never directed a conference before. I was faced with a staff I had not hired, an administration I had not directed, a venue I did not understand, a design I did not create, openings I had not written, a membership I did not know, and a role I had never experienced (Shapiro, 1985). I was anxious and uncertain—but the conference turned out to be manageable, and members and staff learned about the dangers of a world where minorities (a Jewish director, black staff members) take over authority, and whites begin to experience themselves as a minority. My vulnerability in the role illuminated the scary dynamics of inter-racial transformation.

This experience was strikingly different from the conference I directed in 1990. That was the second of a series of three AKRI National Conferences that I was to direct. By the time it began, I had already directed many conferences, served on the Board of AKRI, helped found the Boston Center, had written a book about group relations thinking with Wesley Carr (Shapiro & Carr, 1991), and felt ready to have the first training group in a residential conference in America. I thought I knew what I was doing. The resultant conference was chaotic. Wesley, as associate director, resigned from his role in the middle of the conference, a member became psychotic, and the Board of AKRI took an inappropriate decision to survey former conference members and staff about my work, ultimately deciding to fire me from my contract to direct a third conference. It was wild—and I learned a great deal.

So what happened in these two conferences? What were the differences between them, what did I learn, and how did I apply it?

In 1984, though I had begun to write about organisational dynamics (Shapiro, 1982, 1985), I had no formal role in AKRI. There were few projections into me as a person; I was relatively unknown. At the first staff meeting, I was overwhelmed and they knew it. I was one of them, elevated on the battlefield to a leadership position. Open about my anxiety, I made it clear how much I needed them. They were amazing. The experience taught me about interdependence, leading from the task, listening to how the other is right, relying on the work capacities of others, and negotiating a leadership role. The stress proved manageable, the learning was widespread, and it all seemed to work well.

By 1990, I was very visible in the larger organisation, which was more integrated and political. Margaret Rioch, who had founded the A. K. Rice Institute and developed Tavistock conferences in America, had primarily mentored men to help her develop this work. Her apparent gender bias contributed to an underlying organisational tension. I was the last one on her list. Margaret had asked me to help her establish a centre in Boston and had invited me to direct its first conference. Chairing a national scientific meeting, publicly linked with other more senior men and working intensively with several prominent senior women, I was firing on all burners and—like Icarus—was flying high (Carr & Shapiro, 1989; Shapiro & Carr, 1987).

As I approached my second conference as the National Director, I knew from my Board experience what the organisation was up against politically and I felt the Board's authorisation. The gender issue was on the table. As Margaret's protégé, I was paired with her and experienced as representing white male authority. The President of AKRI—a Jungian analyst—invited me to "take up my female side" as director. As the organisation moved away from Margaret's prominence, there was pressure to eliminate what was called the "old boy network", where former directors chose new directors without public scrutiny of their qualifications. Finally, the Board had undertaken a deepening discussion about conference administration and the ways it was demeaned. Administration was seen as "woman's work" and second class to the consultant role. I took on all of these issues as part of my authorisation in 1990.

Though I had never experienced a training group either as member or staff in a conference, I invited Wesley Carr from England to run such a group. I asked him to develop a system of public criteria to authorise trainees to be consultants in the conference. I invited the President of AKRI, an experienced senior consultant, to take up the role of associate administrator in order, I thought, to underline the value of the administrative role and make public the opportunity to learn from that role.

I was naïve. First, I was too ambitious. Asking the President to become the associate administrator put him in a complicated position, since he represented the authorising body. He was in a role conflict and neither of us saw it. Choosing Wesley as associate director was complicated since he and I had just published our jointly authored book and we were a very public pair and open to envy. Taking on an unprecedented training group in an American conference as director without having experienced one was risky. And, I was blind to my own limitations. I was in the midst of a painful life transition and had denied the potential impact on my directorship.

All of this affected the conference dynamics. Early in the conference, a group of women staff members met to discuss the glass ceiling and the dilemmas of female leadership. They did not see their discussion as conference related and refused to bring it into the staff work, undercutting their authorisation of me as director. It was as if their conversation related to an event that I was not directing. Was this early staff rebellion a dynamic of the gender split in AKRI finding its way into our conference? Was this a displacement from their anger at Margaret Rioch, who had chosen me? We could not find a way to address it.

In the midst of the conference, Wesley felt that the staff was blurring the two of us and he abruptly resigned as associate director in order (in his own mind) to clarify my role as director while keeping his role as director of the training group. Since he announced his resignation to the staff without consulting with me, I was faced with the possibility of firing him, appointing someone else as associate director, or taking his action as a consultation and opening my work more clearly to the staff. I chose the last option. Both of these events—the defiantly covert meeting of the women staff and Wesley's abrupt resignation—challenged my authority and opened my vulnerability, making me anxious and contributing to staff anxiety. Then, a member became psychotic, mobilising—among others—the associate administrator and increasing his anxiety about AKRI in his outside role as President. And finally, the training staff decided to recommend all but two of the trainees to consult, labelling them in public as not having met the new criteria.<sup>1</sup> This had a profound impact on them.

So, there was vulnerability all around: my own vulnerability stemming from my outside life, AKRI organisational and gender dynamics infiltrating the staff, an envied male leadership pair with a new conference design, role conflict in the associate administrator, vulnerable trainees, and a psychotic member. It was a lot for the staff to manage. But we did manage, and our struggles were visible to the members and usable for their learning. In the application groups, there was much evidence of members learning about their own role contributions to

their frequently vulnerable and irrational outside organisations. Their learning about authority and leadership under stress was profound. One member wrote, "The learning is that which few have because the price is so dear." The psychotic member went home safely (he had been psychotic prior to the conference), and the staff and the director, though deeply stressed, survived—sort of.

Following the conference, the President of AKRI and the Board decided to carry out an unprecedented and inappropriate post-conference survey of those staff and members who were also members of AKRI about the "functioning of the director of the conference". This was a stunning move. The Board knew that the staff was collectively responsible for the conference; they had no criteria for evaluating the director beside the formal contract; and they were aware of the propensity of groups to use personality variables as foci for projection, leaving unbearable aspects of the group dynamic in individuals. In addition, their survey only called upon a sector of the conference (some members and some staff), and they were reaching across an ending boundary that we understood as crucial to member learning.

Despite all of this—and for reasons that were never named—I became the target of the Board's unprecedented and publicly shaming inquiry. I was not happy about it.

Responses to the Board's survey were fragmented, most being focused on their experiences of small and large groups, with only distant and confused images of the director. Staff members were a bit clearer. One wrote, "You explicitly eschewed the traditional male heroic stance, ultimately to everyone's consternation and reactive rage. While we may have agreed to join with you, we were left to create an alternative. We could not agree to authorise this degree of openness of self and institution and defensive splits evolved." A female staff member wrote: "Women would have been more comfortable with the traditional male authoritarian style". The AKRI Board was left to contend with the images and experience of my public vulnerability and anxiety during the conference, significantly impacted by the President through his experience as associate administrator.

When the Board then summoned me to a meeting in California to face an unprecedented inquiry, I asked for a consultant to be present to help keep the conversation rational. When my request was refused, I mailed a detailed conference report to the Board (as my contract required) and to every centre President, did not come to the Board meeting, and resigned as director of the next conference. The Board refused to accept my resignation and, in a 4:3 vote, decided to fire me from my contract (with no reasons presented), and to keep their deliberations secret. All of this evoked a prolonged period of organisational gossip

marked by formal presentations and a book chapter attempting to make sense of the 1990 conference and the organisation's response (Fraher, 2004; Lofgren, 1991, 1992).

Following the Board's action, many senior people in the organisation, including Margaret Riach, resigned from AKRI in protest. The subsequent organisational disarray lasted for decades. Leadership in the organisation, I was told, was moving away from what was called "charismatic" leaders.

### DIRECTING RIGGS

One year later, I took up the role as Medical Director/CEO of the Austen Riggs Center, and the following year, the AKRI Board elected me as a Fellow in "recognition of my contributions to AKRI".

The application of my learning from the 1984 conference to my new role at Riggs was straightforward. As in the conference of 1984, I had never led a real world institution. I was faced at Riggs with a staff I had not hired, an administration I had not directed, a venue I did not understand, an institutional design I did not create, and a patient population I did not know.

My opening experience, though challenging, was familiar to me from conference life. I had learned that leadership derives from a clear primary task. So, before I arrived I asked groups in the institution about the mission of the Austen Riggs Center. When I got back confused responses about the clinical operation, financial survival, and the like, I realised I had work to do. During the year prior to my arrival while I was still living in Boston, I invited the patients, the staff, and the Board to meet in separate groups to articulate their role-related view of the institution's mission in one paragraph. Then, I asked each group to authorise representatives to meet to integrate their differences—again in one paragraph. Finally, I asked them to negotiate the final product with me, since I was bringing in an outside perspective. What we came up with together was further clarified over the next several years into one sentence ("... where 'treatment resistant patients' become people taking charge of their lives") (Plakun, 2011; Shapiro, 2001a, 2009; Shapiro & Plakun, 2009). Over the next twenty years, this clarity of task made all the difference.

Thanks to my learning from 1984, I could enter the institution with my ignorance up front. I needed staff, patients, and Board to educate me. Recognising the inevitable transferences to authority, I had to convince the staff that I was dependent on them to confront me with my blind spots. I noted that significant problems in institutions were caused by such blind spots in leaders. Unaddressed, these could be experienced

by the staff as power operations. It was not easy for them to take the risk. But when I was able to listen and learn from them in public, making my dependency clear, we could begin to learn together.

At the beginning, I had to be consulted on everything. I demonstrated my belief that leadership belonged to the system not just to the formal leaders, by suggesting that we all might follow the person who could most clearly articulate the task. One senior staff member told me, "Few executive gestures cost so little and have such immense impact as recognising task leadership in employees" (Shapiro, 2001c).

So, what did I use from the 1990 conference? In that conference, I learned to take seriously my own limitations and vulnerability as a leader. I saw how my personality and leadership style invited projection and I had endured the impact of those projections. I learned that my narcissism and grandiosity—and what the AKRI Board called "charisma"—could escalate an attack when I failed my colleagues. I experienced the risky dynamics of pairing and envy, learned about the need to be careful and explicit around role assignment and its relation to the task, and felt in my bones the complexity of institutional authorization. I had been personally shaken by the 1990 conference and AKRI's destructive and persecutory use of me. I had seen how a collective regression could damage a beloved organisation. But I had also learned that institutional projection into a leader, though painful, was survivable. As Margaret Rioch taught me: "If you hold to the task like the mast of a ship in the storm, you can ride it out." That was my experience in the 1990 conference—and it helped shape my experience at Riggs.

So I want to tell you a story from my first year at Riggs in 1991.

In negotiating the details of the medical director's residence, I had inquired about a piano. The retiring medical director had decided that the patients were not using all of Riggs' five pianos and that one of them could be located in the new medical director's residence and used for formal occasions. The hospital community was in some disarray around the management of resources, given the transition in leadership. One consequence was that, while one of the pianos was moved to the residence prior to my arrival, no discussion about it had been carried out with the patients.

When I arrived for my new job, the patients greeted me with outrage that I had "stolen" their piano. In their experience, I was the CEO with all my perks and they were the abused victims of forceful power. As I saw it, they were reacting powerfully to me in a way I could not grasp. So the patients and I met—forty of them and me. We attempted to negotiate a shared reality, with frustration on all

sides. The discussion initially focused on power—who controlled the pianos, they or me?

On the face of it, the question seemed perplexing, since pianos were a resource of the institution and I was in charge of resources. Asserting that, however, would have been a power operation, and giving it back to them without a working context made no sense to me. The primary task of the institution was treatment and, since I could not at the moment discover the treatment link and I was not about to act without understanding what we were involved in, we were stuck. I tried to listen to how they were right, but could not find the appropriate context.

But then one patient spoke movingly of the terrible sense of helplessness she had felt when the piano was arbitrarily moved without her consent. Though she did not play the piano, she felt strongly that something terribly important had been taken away. With a barely perceptible shift, we suddenly found ourselves talking about money, insurance, third-party payers, and managed care. The patients had entered the hospital and begun their engagement in treatment. Suddenly, without their participation, their financial resources were ripped away, arbitrarily and irrevocably. The piano had suddenly become less important. We had discovered a larger context for this discussion: there was a "third". We were now talking about the task of treatment and the resources for providing it. I could join them, not by projecting negative images about power away from me and into managed care companies, but by working with them on the feelings of helplessness and vulnerability they had in their patient role about the encroachments of reality and limited resources. These were feelings I also had in my role as medical director. In fact, some of these feelings had contributed to my anxious wish to provide a formal space in my home to bring in outsiders and raise money for the hospital.

When we returned to the piano, the patients and I found that we could negotiate a process for its review, discussion, and decision. We had found a context for negotiating an interpretation of reality: the shared task of treatment we were all engaged in through our various roles.

But how could I be sure that my interest in the metaphor of limited resources, and the apparently negotiated interpretation of the third party payers, was not simply self-serving and designed to allow me to displace my own arbitrariness and rigidity and facilitate my keeping the piano? Given that the patients and I together represented a system in enormous flux, it may have been too much to expect that they and I alone could hold to the task of treatment

long enough to negotiate a view of reality without bringing in the rest of the system. After all, just like in the failed conversation between the AKRI Board and me in 1990, the patients and I did not have a consultant. But unlike 1990, the patients and I understood our role relatedness and agreed on the primary task.

Perhaps one of the functions of a shared task is to integrate what might seem on the surface as competing experiences. The patients were regressively experiencing a repetition of unempathic, arbitrary power; I was in a similar regression, feeling misunderstood by them. In this mutual experience of empathic failure, both sides felt hurt, abused, and unable to learn from each other (I trust you hear the echoes from the 1990 conference?). Our discovery of the shared treatment task allowed us all to recognise our connections, recover from mutual regression, and join in an interpretation of a shared reality.

The evidence that we had found at least the beginnings of such a negotiation came five months later. The patients left me a Christmas stocking on my office door that contained a beginning integration of ambivalence. Inside the stocking were two offerings: a lump of coal—and a beautiful tiny carved wooden piano with a tag that said, “This one is on us!”

Twenty years later, when I began to transition out of my role as Medical Director, I could see the power of the generational issues, the hunger of the next generation to take up authority, and the difficulties in sustaining connections with those who had once been in charge. And strikingly, as I and the other four senior men were beginning to retire, the next generation of women that we had trained was in place to take up the leadership roles—just as in the 1990 conference.

My experience at Riggs had taught me the value of articulating a mission that stood for a recognisable set of values and beliefs and linked the institution to the needs of the outside world (Shapiro, 2001c, 2004, 2005). With such a mission, staff, patients, and Board could feel connected to something beyond themselves, allowing them to join in meaningful work across different roles. Our collective discovery of that mission—and our recognition of the need for an outside perspective when we lost our way—allowed us to survive the crises, tensions, and conflicts that accompanied the institution’s growth and development (Shapiro, 1997, 2009, 2013).

#### RETURNING TO CONFERENCE LIFE

Shortly after I retired as Medical Director/CEO in 2011, the AKRI Board again appointed me for three years to direct their annual international

residential conference. Though I had remained a member of AKRI and worked on staff in a number of conferences in the US and abroad while I was at Riggs, I had not directed a conference since that fateful one in 1990. I had, however, become involved in several outside organisations that were applying systems thinking to social problems (Shapiro, 2001b; Shapiro & Carr, 2006). I had written a paper on the political dynamics of terrorism after 9/11 and was increasingly interested in the psychodynamics of international conflict and the trans-generational transmission of trauma (Shapiro, 2003). The political polarisation in America and escalating international conflicts across differences led me to create related sub-themes of my three conferences, beginning with “What do I stand for” and finishing with “Working across differences”.

In 1990, the AKRI Board had told me that I stood for privileged white male authority at a time of transition. That image affected how they ultimately treated me. Though I recognised and understood the projection, I had thought I represented something a bit more textured and task related. At Riggs, the patients, the staff, the Board, and I found a way to negotiate more fully what I stood for as director. I had learned that what you stand for is contextually determined, and I brought that learning back to group relations work. In 2013, my director’s opening read as follows:

“What do I stand for” is a question only an individual could ask. The question is a powerful one because it is linked to values, ideals, commitment, and passion. But once I as an individual, ask this question, I begin to think, “How can I possibly know what I stand for? What if what I want to stand for and what I think I stand for is not the way others see me?” Even to raise the question of what I stand for requires me to consider the group. If I’m to live in a world with other people, my effort to discover the connection between what I *want* to stand for and what I *actually* stand for requires me to listen to and negotiate with the people who matter—in relation to the issues that are important to me. And those people are inevitably defined and shaped by a social context—a family, an institution, a political entity.

Amazingly, that 2013 conference, where a third of the members came from abroad, began in the first small group event with stories about the now legendary 1990 conference almost twenty-five years prior. It was an early challenge to my authority as director. Focusing on what members referred to as my “failure and firing” in 1990, it looked like the reawakening of a chosen trauma. The staff and I reworked the details of those ancient events, re-awakening my anxious memories and allowing us to grasp the underlying current conference-related question about whether the patriarchy (which I symbolised in my role) had anything to offer to the next generation of women. The conference was asking if senior men and women were compelled to compete with each

other for the hearts and minds of the next generation or whether the gender wars of the past could be sufficiently addressed so that the older generation of men and women might mentor younger people together. The conference had looked for and found my vulnerabilities as director and was using them as a learning opportunity. Given my past conference experiences and my irrational role in AKRI, I found this a deeply moving exploration.

My second and third conferences (2014–2015) focused on “Working across differences”. In the second conference, members felt that I represented “aging white authority”, a turn-around from my having represented (in 1985) a youthful minority takeover from the established white majority. I recognised that in each of these conferences my vulnerability in the director’s role was usable for member learning. The pressures on me were about making that vulnerability available without losing my role. In this conference, each assault on the authority boundary was hidden under the guise of loving kindness, gentleness, political correctness, and “thoughtfulness”. The final staff hypothesis to members was about their fear of the aggression necessarily involved in competent management.

In my opening comments to the staff at my third and last conference in 2015, I noted that authority is not just a feared boundary to be avoided, but also a longed-for boundary with inevitable vulnerability on both sides. Given my experience in 1990 and my work at Riggs, I felt I knew something about public vulnerability and the ways it could be used as a focus for projection. I had also recognised in 1990 that vulnerability on all sides (mine, Wesley’s, and the AKRI President’s), uninterpreted in relation to the task could contribute to chaos (Shapiro & Carr, 1991). The *mutual vulnerability of the authority boundary* became a theme in this conference. The wish of the next generation to take up the reins, their longing for contact with senior authority, the wish of the elders to pass on what they have learned, the shared anxiety about death, the embarrassment of needing, the rage about dependency, and the envy and longing in both directions all factored into this vulnerability. Strikingly, the conference opened with an idealisation of me as director, which appeared to replace the more familiar envy—and was more difficult to sort out, given its seductive power.

In the institutional event, the staff’s final message to the members spoke to the vulnerability of authorisation. Conference learning had illuminated how any authorisation inevitably privileges those aspects of the self that are necessary for the work. Other aspects (ethnic identifications, race, sexuality, vulnerability) may remain unrecognised, contributing to feelings of confusion, disloyalty, and impairment. How much of the self can actually be brought to an authority boundary?

Does taking authority also signify loss—and can facing that loss strengthen authorisation?

## DISCUSSION

Mutual vulnerability at an authority boundary is a *fact*. It is ordinarily denied and managed on both sides through a series of defences contributing to a stance of *pathological certainty* and the assertion of a preferred perspective (Shapiro, 1982). When leaders use this more familiar authoritarian stance it pulls for rage, submission, or withdrawal, all of which limit engagement.

Acknowledging vulnerability at an authority boundary can, however, pull for idealisation, which also limits the possibility of engagement and learning. Though idealisation can be a useful stage in development, the idealising dynamic can unwittingly strip the idealiser of his positive capacities and hide the flaws of the one idealised. In this last conference, working through the idealising defence was not easy—the staff dynamics led to significant concealment of sexuality, competition, and aggression. We recognised that acknowledgement of an authority’s vulnerability is scary. It requires recognising the need for the “other”, and opens the possibility of love, hatred, envy, sexuality, fragility, and loss of role.

This focus raised many questions for reflection. Does vulnerability inevitably signify fragility? Can work deepen adequately in the face of this kind of affective availability? Is learning across differences and across generations so precious and fragile that potential damage might not be risked? Would open aggression, competition, and envy incapacitate a staff that was open to vulnerability and potentially seducible through idealisation? Would the presence of sexuality at a cross-generational authority boundary mobilise such unmanageable projections that groups would withdraw their authorisations, precluding the possibility of intimate learning?

My learning from the director’s role in conference and organisational life remains incomplete. I remain unclear about how much of the self can usefully be brought into the role, given the necessary projective use of the person. What is the impact of acknowledged vulnerability at different life stages? Is there a link between competence and vulnerability?

Despite these unanswered questions, my career-long exploration of the range of directorial vulnerability has been useful (Shapiro, 2000). It has deepened my capacity for interdependency, allowed me to recognise and affirm leadership from below and, most significantly, has illuminated the importance of discovering how the other may be right.

I did not emerge from any of my leadership roles unscathed. But I am very grateful for the learning that has come with the scars.

#### Note

1. There were three public criteria developed for this training group: the capacity to perceive and use oneself in role (combining intellect and feelings), evidence of learning, and social responsibility, or the capacity to move the group along (working to task in spite of personal discomfort or distress).

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## SPEAKING OUT

### Boarding School, Brexit, and Our Leaders' Judgement

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#### Abstract

This paper argues that the unexpected "Leave" result of the EU Referendum and subsequent political turmoil can be understood as a consequence of faulty decision-making by our leadership, which has been unable to use emotional intelligence when engaging with judgements that have an emotional component. Our leaders did not perceive the threats posed by the referendum and therefore had not planned for the "Leavers" winning the referendum. It is postulated that the reason for this inability to use emotional intelligence is to do with having cut off from feelings as a result of traumatic formative experiences involving prolonged separation from parents through being sent to boarding school as young children. A sample of test results of senior executives attending boarding school is compared with a sample of non-boarders to demonstrate how these experiences of prolonged separation impact on emotional intelligence.

*Key words:* referendum, judgement, emotional intelligence, separation, boarding school.

After weeks of unprecedented political turmoil and fallout following the EU Referendum, recent work on the capacity of our society to produce "wounded leaders" with faulty judgement through the British boarding school system, has never been more relevant (Duffell, 2014). We have seen the psychodynamics of political life in full swing with the shock result of the EU Referendum, the resignation of the Prime Minister, and the savaging of the Leader of the Opposition by his own Shadow Cabinet. Betrayal and back-stabbing led to the resignation from the leadership battle of a key and popular Brexiteer and the mobilisation of a new female head of the Conservative party who is also the new Prime Minister. No longer is a week in politics a long time, now each day or even each hour brings more shock revelations.

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