adult ADHD in a leader 6–7 see also Javaman, Jason
Americans with Disabilities Act
and DTS/DTO (danger to self/danger to others) diagnosis 145
protections 119, 121, 129, 188
anthropological approach to consultancy 5–7
antisocial personality disorder 132–155
abusive behavior permeates the organization 141–142, 145–146
Americans with Disabilities Act 145
challenges of DSM use in management 149–153
company faced with an abusive leader 132–133
consequences of inadequate assessment 134–135
consultation approach 138–139
consultation with an abusive leader 142–144
danger to self (DTS), danger to others (DTO) diagnosis 143–145
dangers of trivializing pathologies 133–155
degrees of toxicity in leader and company 134–135
DSM-IV-TR application to organizational systems 149
DSM-IV-TR guided differential diagnosis 143–144
ineffectiveness of internal systems 132–133
interdisciplinary approach to toxic leadership 152–155
interplay of individual and systems pathologies 147–149
lack of DSM expertise in organizational researchers 149–153
need for DSM assessment in high-toxicity cases 134–135, 136–138
need for external expertise 132–133
personal history of an abusive leader 139–140
physically and emotionally abusive leader 140–142
research studies addressing toxic leadership 133–134
Rick Boulder case study 138–155
Rick Boulder diagnosis 19–20, 143–144
search for objective standards of assessment 136–138
situation after the leader resigns 145–146
threat from pre-existing pathology in a leader 146–147
training required for DSM application 149–153
use of DSM within the management discipline 136–138
Arthur Andersen 27
assessment instruments
client preoccupation with 4–5
looking beyond 13–14
Beach Harbor Heart Institute see narcissistic personality disorder (Dr. Gina Vangella)
Bear Stearns 27
Black Valley Enterprises see leader sabotage
Blackman, Dr. Hudson, passive aggressive personality disorder 19–20 see also leader sabotage
body dysmorphic disorder (Josh Julia) aftermath of Julia’s dismissal 185–187
Americans with Disabilities Act protection 188
corporate background 177–178
consequences for the organization 180–181, 182–184, 185–189
consultant’s formal assessment of behavior 181–182
counterproductive workplace behaviors 184–185
decision to call in external consultants 181–182
definition 176
index 211

American University Press
978-0-521-71734-2 - Destructive Leaders and Dysfunctional Organizations: A Therapeutic Approach
Alan Goldman
Index

More information

diagnosis 19–20, 176, 181–182
DSM-IV-TR diagnosis 176, 181–182
dysfunction in the R&D division 180–181, 182–184, 185–189
early successes 177–178
emergence of dysfunctional behavior 178–180
extremes of toxic leadership 174–176
future research into disturbed leadership behavior 189
leader’s withdrawal from the workplace 178–181
morphing into division-wide pathology 187–189
organizational challenge of a disturbed leader 175–176
somatoform disorders 176
transformation of an exemplary leader 175–176
borderline personality disorder [Favio Burnstein]

Americans with Disabilities Act protection 119, 121, 129
coexisting brilliance and pathology 113–114
company’s desire to retain Burnstein 119–121
creative leader steeped in psychopathology 122–123
decision to seek external expertise 119–121
depression 19–20
DSM-IV-TR diagnosis 123, 128–129, 130–131
dual leadership intervention 127–128
dysfunctional background narrative 114–116
employee complaints and grievances 116–119
erratic dealings with employees 116–119
humiliation and harassment in the workplace 116–119
impacts of a transient organizational culture 124–125
individual and organizational toxicity 130
influence on the organization 116
interventions for individual and organizational pathology 125–126, 127–128
need for specialist expertise in high-toxicity cases 130–131

needs assessment consultation 119–121
personality disorders among US leaders 129
pre-existing pathology 123–125, 129–130
satisfying individual and company needs 124–125
triggering factors in the organizational environment 124–125

Boulder, Rick see antisocial personality disorder

Burnstein, Favio

Americans with Disabilities Act protection 119, 121, 129
borderline personality disorder 19–20, 123–125
coexisting brilliance and pathology 113–114
company’s desire to retain Burnstein 119–121
creative leader steeped in psychopathology 122–123
decision to seek external expertise 119–121
depression 19–20
DSM-IV-TR diagnosis 123, 128–129, 130–131
dual leadership intervention 127–128
dysfunctional background narrative 114–116
employee complaints and grievances 116–119
erratic dealings with employees 116–119
humiliation and harassment in the workplace 116–119
impacts of a transient organizational culture 124–125
individual and organizational toxicity 130
influence on the organization 116
interventions for individual and organizational pathology 125–126, 127–128
need for specialist expertise in high-toxicity cases 130–131

© in this web service Cambridge University Press
www.cambridge.org
Burnstein, Favio (cont.)
separation anxiety disorder 19–20
triggering factors in the organizational
environment 124–125

Cavendish & Bodark Haute Couture see
histrionic personality disorder [Markus
Rene]
client–consultant interactions 20–25
client resistance see leader sabotage
couching for leaders, prototypes 25
companies on the edge 1–2
company narratives
information from 8
range of 3–5
consultancy approaches
anthropological approach (“gorillas in the
mist”) 5–7
companies on the edge 1–2
complexity of dysfunctional scenarios 2–3
consultant engagement and emergent
insights [wild cards] 7–8
detective work in the diagnostic phase 7–8
DSM-IV-TR diagnosis 3, 6–7
encouraging self-disclosure 6–8
exploitative consultancy companies 7–8
focus on a high-impact problem 3
information from company narratives 8
leader’s psychological history 6–7
one hundred day assessment and
intervention phase 6–7
participant observer consultant 5–7
psychological evaluation and treatment
3, 6–7
psychological history of the leader 6–7
psychotherapy and psychiatry issues
1–2, 6–7
range of consultation narratives 3–5
search for a nexus 3
tackling the dark side of leadership 9
why companies seek external experts 1–3
wild cards [emergent insights] 7–8
consultant engagement and emergent
insights [wild cards] 7–8
Cornelius Ltd. see unintentionally toxic
leader
danger to self [DTS], danger to others [DTO]
diagnosis 143–145
dark side of leadership 9, 12–13
depression, Favio Burnstein 19–20
detective work in the diagnostic phase 7–8
diagnosis
approaches to toxic leadership 20–25
detective work 7–8
high-toxicity leaders 19–20
hypodermic needle [top-down] approach
20–22
participatory approach 20–25
psychological disorders in leaders 17–19
see also DSM-IV-TR
disturbed leadership [Elia Engineering Ltd.]
aftermath of leader’s dismissal 185–187
Americans with Disabilities Act
protection 188
corporate background 177–178
consequences for the organization
180–181, 182–184, 185–189
consultant’s formal assessment of
behavior 181–182
counterproductive workplace behaviors
184–185
decision to call in external consultants
181–182
definition of body dysmorphic
 disorder 176
diagnosis of body dysmorphic
disorder 19–20, 176, 181–182
DSM-IV-TR diagnosis 176, 181–182
dysfunction in the R&D division
180–181, 182–184, 185–189
career successes 177–178
early emergence of dysfunctional behavior
178–180
extremes of toxic leadership 174–176
future research into disturbed leadership
behavior 189
leader’s withdrawal from the workplace
178–181
morphing into company-wide pathology
187–189
organizational challenge of a disturbed
leader 175–176
somatoform disorders 176
transformation of an exemplary leader
175–176
DSM-IV-TR [Diagnostic and Statistical
Manual of Mental Disorders]
antisocial personality disorder 143–144
application to organizational systems 149
body dysmorphic disorder 176, 181–182
borderline personality disorder 123, 128–129
challenges of use in management 149–153
Cluster B Personality Disorders 128–129
consultancy approach to diagnosis 3, 6–7
diagnosis of toxic behavior 17–19
histrionic personality disorder 169, 173
interdisciplinary approach to toxic leadership 152–155
lack of DSM expertise in organizational researchers 149–153
narcissistic personality disorder 40–41, 49–51
need for DSM assessment in high-toxicity cases 134–135, 136–138
obsessive compulsive disorder 107
obsessive compulsive personality disorder 107
somatoform disorders 176
training required for DSM application 149–153
use within management disciplines 136–138, 153–155
usefulness in high-toxicity cases 130–131
destructive impacts on the organization 108–109
DSM-IV-TR diagnosis 107
early days of the new leadership 91–92
forewarning of toxicity 95–96
gaining awareness of emotional cost 104
HR recruitment process shortcomings 99–101, 112
impact of change of manager 90–91
implications of change at senior level 112
leadership coaching sessions 102–104
leadership therapy 105–107
leadership therapy following diagnosis 110–112
micromanagement and destructive behavior 96–99
needs assessment interviews with consultant 99–101
obsessive compulsive disorder diagnosis 107, 108–109
obsessive compulsive personality disorder diagnosis 19–20, 107, 108–109
organizational culture 89–90
organizational impacts 108–109
“perfection or destruction” attitude 102–104, 105–107, 108–109
personal costs 108–109
public alterations and staff discontentment 96–99
search for a replacement 109–110
signs of culture clash 91–93
signs of deeper problems 96–99
Geffen, David 40
Global Crossing 11, 17
Greystone, Sidney, histrionic personality disorder 19–20 see also leader sabotage
highly toxic leaders 132–155
abusive behavior permeates the organization 141–142, 145–146
challenges of DSM use in management 149–153
company faced with an abusive leader 132–133
consequences of inadequate assessment 134–135
consultation approach 138–139
consultation with an abusive leader 142–144
highly toxic leaders (cont.)
danger to self (DTS), danger to others (DTO) diagnosis
143–145
dangers of trivializing pathologies 153–155
degrees of toxicity in leader and company
134–135
DSM-IV-TR application to organizational systems 149
DSM-IV-TR guided differential diagnosis
143–144
ineffectiveness of internal systems
132–133
interdisciplinary approach to toxic leadership 152–155
interplay of individual and systems pathologies 147–149
lack of DSM expertise in organizational researchers 149–153
need for DSM assessment 134–135, 136–138
need for external expertise 132–133
personal history of an abusive leader 139–140
physically and emotionally abusive leader 140–142
research studies 133–134
Rick Boulder case study 138–155
search for objective standards of assessment 136–138
situation after the leader resigns 145–146
threat from pre-existing pathology in a leader 146–147
training required for DSM application 149–153
use of DSM within the management discipline 136–138
histrionic personality disorder (Markus Renee)
allure of the toxic leader 170–171
Cavendish & Bodark organizational culture 157–159
CEO’s desire to salvage Renee 167, 172–173
constant need to be the center of attention 163–165
debriefing and de-escalation of dysfunction 171
decision to call in a consultant 167–168
diagnosis of histrionic personality disorder 19–20, 169, 173
DSM-IV-TR diagnosis 169, 173
emotional volatility in the workplace 156–157
employee complaints and grievances 161–162
emulation by employees 164–165
end of the honeymoon period 161–163
followership empowers toxicity 170–171
hire of Markus Renee 159–161
hiring criteria for Cavendish & Bodark leaders 159–161
individual and organizational interventions 169–170, 171
leadership coach and psychotherapist assessment 168–169
leadership style of Markus Renee 162–163
MBWA (management by walking around) 162–163
melodrama and instability in the organization 164–167
organizational fit of Markus Renee 159–161
reducing toxicity to functional levels 167, 172–173
spread of the disorder into the organization 169
timely detection delayed by allure and charm 172
histrionic personality disorder (Sidney Graystone) 19–20
hubris and leadership fantasies, Black Valley Enterprises 77–78
hubris and narcissism in leaders 11–26
and organizational dysfunction 20
client–consultant interactions 20–25
damaged, pathological, troubled leaders 15–17
diagnosing high-toxicity leaders 19–20
diagnosing psychological disorders 17–19
diagnostic approaches 20–22
DSM-IV-TR diagnosis of leader behavior 17–19
empowering the client in the diagnosis 22–25
extreme hubris of toxic leaders 11–12
hypodermic needle (top-down) approach to diagnosis 20–22
looking beyond metrics 13–14
narratives of toxic leadership 14–15
negative aspects of leadership 11–12
negative impacts on the organization 15–17
nexus of dysfunction 15–17
organizational context of toxic leadership 15–17
participatory approach to diagnosis 20–25
psychological complexity of toxic leadership 14–15
psychopathology behind the behavior 17–20
unethical behavior in leaders 11–12
unexpected psychopathology 17–20
unveiling the dark side of leader and company 12–13
hypodermic needle (top-down) approach to diagnosis 20–22
intermittent explosive disorder, Jason Javaman 19–20
Javaman, Jason 6–7
adult ADHD diagnosis 19–20, 34–35
clinical psychotherapy 34–35
consultant meetings with CEO 31–32
dysfunctional leadership behavior 28–39
enigma of the toxic leader 31–34
from needs assessment to intervention 32–34
impact of the toxic leader 29–31
inability of the organization to assess behavior 38–39
individual and organizational interventions 35–36
intermittent explosive disorder 19–20
leadership coaching 34
salvaging a toxic yet productive leader 36–37
source of unintentional misbehavior 34–35
spread of toxic behavior 31–32, 34–35
toxic behavior in remission 37–38
unintentional misbehavior 38–39
Jobs, Steve 40
Johnstone-Mumford International Bank see obsessive compulsive leader
Julia, Josh [body dysmorphic disorder]
aftermath of Julia’s dismissal 185–187
Americans with Disabilities Act protection 188
company background 177–178
consequences for the organization 180–181, 182–184, 185–189
consultant’s formal assessment of behavior 181–182
counterproductive workplace behaviors 184–185
decision to call in external consultants 181–182
definition of body dysmorphic disorder 176
diagnosis of body dysmorphic disorder 19–20, 176, 181–182
DSM-IV-TR diagnosis 176, 181–182
dysfunction in the R&D division 180–181, 182–184, 185–189
eyear successes 177–178
emergence of dysfunctional behavior 178–180
extremes of toxic leadership 174–176
future research into disturbed leadership behavior 189
leader’s withdrawal from the workplace 178–181
morphing into division-wide pathology 187–189
organizational challenge of a disturbed leader 175–176
somatoform disorders 176
transformation of an exemplary leader 175–176
Kozlowski, Dennis 11, 16, 17
Lay, Kenneth 11, 16, 17, 40
leader as nexus of dysfunction 15–17
psychological history 6–7
leader sabotage (Black Valley Enterprises) 55–85
company history 57–59
complex probing of psychopathology in leadership 80–83
consultation assessment 71–73
consultation with VP Graystone 59–63
deep source of toxicity 66–67
defiant, resistant client 64–66
dysfunctional HR hiring process 74–75
earlier unsuccessful Zenton consultation 73–74
leader sabotage (cont.)
   erratic and defiant CEO behavior 55
   failures of a deeply toxic culture 55–56
   histrionic personality disorder in Sidney
      Graystone 19–20
   hubris and leadership fantasies 77–78
   incremental approach to the problem 69–71
   negotiating a small wins rapid-cycle
      consultation 67–71
   passive aggressive personality disorder in
      Dr. Blackman 19–20
   power of toxic leadership 84–85
   rapid interventions in recruitment and
      selection 78–80
   recruitment and hiring failure rate 55–56
   resistance to an employee assistance
      program (EAP) 62–63
   results of interventions 80
   spread of toxicity 84–85
   systemic dimensions of the problem 69–71
   toxic effects throughout the company 74–75
   toxic nexus in leadership 75–77
   upper-echelon sabotage 56–57
   leadership, tackling the dark side 9
   leadership coaching prototypes 25

Messier, Jean-Marie 11, 16, 17
metrics
   client preoccupation with 4–5
   looking beyond 13–14

narcissistic personality disorder [Dr. Gina
   Vangella] 41–54
   allure of the toxic leader 40–41
   consultation 47–49
   criticism from colleagues and staff 44–47
   demand for adoration 42–47
   diagnosis of narcissistic personality
      disorder 19–20, 22–25, 49–51
   DSM-IV-TR diagnosis 49–51
   internal complaints and grievances 47
   leaders with mental and emotional
      duress 53–54
   narcissistic personality disorder criteria
      40–41
   organizational impacts 42–47, 52–54
   organizational inability to deal with
      53–54
   possibility of company-wide narcissism
      52–53
   pre-existing pathology 52–53
   self-diagnosis 49–51
   toxic leadership behavior 41–42
   treatment 51–52
   see also hubris and narcissism in
      leaders
   narratives of toxic leadership 14–15
   negative aspects of leadership 11–12
   nexus of dysfunction
   consultant’s search for leadership
      toxicity in Black Valley
      Enterprises 75–77
   toxic leaders 15–17

obsessive compulsive leader [Dr. Raymond
   Gaston] 86–112
   alternatives to dismissal 110–112
   attempt to address the problem internally
      93–94
   aversion to handling money 98–99,
      108–109
   background to the problem 86–87
   clinical diagnosis 107
   consultant’s initial impressions 101–102
   consulting and therapeutic interventions
      109–112
   customer service ethos of the company
      89–90
   decision to seek external expertise
      88–89, 99
   destructive impacts on the organization
      108–109
   DSM-IV-TR diagnosis 107
   early days of the new leadership 91–92
   forewarning of toxicity 95–96
   gaining awareness of emotional cost 104
   HR recruitment process shortcomings
      99–101, 112
   impact of change of manager 90–91
   implications of change at senior level 112
   leadership coaching sessions 102–104
   leadership therapy 105–107
   leadership therapy following diagnosis
      110–112
micromanagement and destructive behavior 96–99
needs assessment interviews with consultant 99–101
obsessive compulsive personality disorder diagnosis 19–20, 107, 108–109
obsessive compulsive disorder diagnosis 107, 108–109
organizational culture 89–90
organizational impacts 108–109
“perfection or destruction” attitude 102–104, 105–107, 108–109
personal costs 108–109
public altercations and staff discontentment 96–99
search for a replacement 109–110
signs of culture clash 91–93
signs of deeper problems 96–99
one hundred day assessment and intervention phase 6–7
organizational context of toxic leadership 15–17
organizational dysfunction and toxic leadership 15–17, 20
participatory approach to diagnosis 20–25
passive aggressive personality disorder, Dr. Blackman 19–20
perfectionism see obsessive compulsive leader
personality disorder see antisocial personality disorder, borderline personality disorder, histrionic personality disorder, narcissistic personality disorder, passive aggressive personality disorder
psychological complexity of toxic leadership 14–15
psychological evaluation and treatment, consultancy approach 3, 6–7
psychological history of the leader 6–7
psychopathology behind toxic leadership 17–20
complex probing 80–83
psychotherapy and psychiatry issues, consultancy approaches 1–2, 6–7
Renee, Markus (histrionic personality disorder)
allure of the toxic leader 170–171
Cavendish & Bodark organizational culture 157–159
CEO’s desire to salvage Renee 167, 172–173
constant need to be the center of attention 163–165
debriefing and de-escalation of dysfunction 171
decision to call in a consultant 167–168
diagnosis of histrionic personality disorder 19–20, 169, 173
DSM-IV-TR diagnosis 169, 173
emotional volatility in the workplace 156–157
employee complaints and grievances 161–162
emulation by employees 164–165
end of the honeymoon period 161–163
followership empowers toxicity 170–171
hire of Markus Renee 159–161
hiring criteria for Cavendish & Bodark leaders 159–161
individual and organizational interventions 169–170, 171
leadership coach and psychotherapist assessment 168–169
leadership style of Markus Renee 162–163
MBWA (management by walking around) 162–163
melodrama and instability in the organization 164–167
organizational fit of Markus Renee 159–161
reducing toxicity to functional levels 167, 172–173
spread of the disorder into the organization 169
timely detection delayed by allure and charm 172
self-disclosure, encouraging 6–8
separation anxiety disorder, Favio Burnstein 19–20
Sergio Mondo Fashion House see Burnstein, Favio
Skilling, Jeffrey 11, 15–16, 17
small wins rapid-cycle consultation 67–71
toxic leaders dysfunctional agendas 27–28
extreme hubris 11–12
toxic leaders and dysfunctional organizations
consequences of mismanaged toxicity 190–191
extent and seriousness of the problem 190
importance of early assessment and intervention 190–191
movement towards outside experts 196–197
organizational inability to diagnose 192–194
organizational inability to recognize toxicity 191–192
organizational resistance and avoidance 192–194
questions to consider 191
research streams and consultant implications 197–198
toxin “detectors” and “healers” 194–196
Tyco 11, 17

unethical behavior in leaders 11–12
unintentionally toxic leader (Jason Javaman)
adult ADHD diagnosis 19–20, 34–35
clinical psychotherapy 34–35
consultant meetings with CEO 31–32
Cornelius Ltd. (case study) 28–39
dysfunctional leadership behavior 28–29
enigma of the toxic leader 31–34
from needs assessment to intervention 32–34
impact of the toxic leader 29–31
inability of the organization to assess 38–39
individual and organizational interventions 35–36
intermittent explosive disorder 19–20
leadership coaching 34
possibility that behavior is unintentional 27–28
salvaging a toxic yet productive leader 36–37
source of unintentionally toxic behavior 34–35
spread of toxic behavior 31–32, 34–35
toxic behavior in remission 37–38
Vangella, Dr. Gina 41–54
collaborative diagnostic approach 22–25
consultation with 47–49
criticism from colleagues and staff 44–47
demand for adoration 42–47
diagnosis of narcissistic personality disorder 49–51
DSM-IV-TR diagnosis 49–51
internal complaints and grievances 47
leaders with mental and emotional
dству 53–54
narcissistic personality disorder 19–20, 22–25
narcissistic personality disorder criteria 40–41
organizational impacts of a narcissistic leader 42–47, 52–54
organizational inability to deal with 53–54
possibility of company-wide narcissism 52–53
pre-existing pathology 52–53
self-diagnosis 49–51
toxic leadership behavior 41–42
treatment 51–52
Vivendi Universal 11, 17

wild cards (emergent insights) 7–8
WinnerWear International see antisocial personality disorder
Winnick, Gary 11, 16, 17
WorldCom 11, 17