

There are countless books about employees who leave toxic workplaces, but almost none about the trauma that leaders themselves carry. This book fills that gap with rare clarity, grounding its argument in the actual diagnostic meaning of trauma. I want every MBA, I/O psychologist, HR leader, coach, and consultant responsible for leadership development programming to read this to better understand such trauma and better help leaders navigate these experiences.

—**Mira Brancu, PhD, PCC**, consulting psychologist, founder, Towerscope; Duke University School of Medicine faculty, Durham, NC, United States; and Fellow of the American Psychological Association

This engaging book is an excellent resource for leaders and those responsible for leadership education and development. The contributors offer case studies, consider DEI and intersectionality, and deal comprehensively with the mainly ignored phenomena of traumatic leadership experiences—explaining what they are, why they happen, and what to do. You will develop new insights, understand leadership and organizations differently, and be better prepared to support and “do” leadership.

—**Sharon Mavin, PhD**, Professor of Leadership & Organization Studies, Newcastle University Business School, Newcastle upon Tyne, United Kingdom; author of “No One Deserves Professional Annihilation: Learning From Women’s Experiences of Leadership Work-Caused Trauma” in the journal *Management Learning*

Contents

<i>Contributors</i>	<i>vii</i>
1. Introduction to Trauma in Leadership: Sources, Mechanisms, and Impacts	3
Jennifer P. Wisdom and Nina A. Nabors	
I. SOURCES AND IMPACTS	21
2. Relational Sources of Workplace Trauma for Leaders	23
Nina A. Nabors, Kelley Costner, and Qiana Wells-Haridat	
3. Organizational Forces That Contribute to Traumatic Experiences of Leadership	35
Cynthia Drake Morrow and Jennifer P. Wisdom	
4. The Impact of Childhood Adversity on Traumatic Experiences of Leadership	47
Brenda J. Huber	
5. Marginalized Identities and Institutional Trauma in Leadership	59
Nina A. Nabors	
6. Gender and Traumatic Experiences of Leadership	71
Jennifer P. Wisdom and Candice G. Nelson	
7. Intersectionality and Traumatic Experiences of Black Women Leaders in Higher Education	81
Savitri V. Dixon-Saxon	

8. The Impacts of Negative Leadership From a Motivational Perspective	93
Christina M. Frederick and Mary Coussons-Read	
9. Sources and Effects of Traumatic Experiences of Leadership Among Women	105
Kristina Hallett	
10. The Burden of Command: Navigating Psychological Stress and Institutional Betrayal in Law Enforcement Leadership	119
Tamara S. Lyn	
11. How Traumatic Experiences of Leadership Affect Religious and Spiritual Women in Academia	131
Rochelle Gilbert	
II. INTERVENTIONS	141
12. Coaching Approaches to Healing Traumatic Experiences of Leadership	143
Shari N. Dade and Chamarlyn L. Fairley	
13. Therapeutic Approaches to Healing Traumatic Experiences of Leadership	157
Alina Perez	
14. Trauma-Informed Organizations: Culture, Practices, and Leadership	169
Catherine T. Kwantes and Perpetual Ankamah	
15. Future Directions in Understanding, Preventing, and Healing Traumatic Experiences of Leadership	183
Nina A. Nabors and Jennifer P. Wisdom	
<i>Index</i>	<i>191</i>
<i>About the Editors</i>	<i>197</i>

1 INTRODUCTION TO TRAUMA IN LEADERSHIP

Sources, Mechanisms, and Impacts

JENNIFER P. WISDOM AND NINA A. NABORS

Cynthia accepted a position at a large hospital as director of housekeeping services. She was attracted to the opportunities her supervisor presented: The division had been problematic for several years, and they were hiring Cynthia to improve the team's performance. When Cynthia arrived, she found significant challenges, including staff showing up for work hungover, discord among several parent-child and sibling pairs on the team, and a union representative who was flagrantly disrespectful to her. The staff disregarded regulations for safe chemical storage and housekeeping was often incomplete, garnering complaints from patients and medical staff. When Cynthia attempted to fire one employee for egregious behavior and drafted performance improvement plans for others, the human resources (HR) director told her she was overreacting and began undermining her efforts. Cynthia appealed to her supervisors for assistance. They told her that her standards were too high and that she needed to stop making waves, leaving her feeling hurt and betrayed.

With the exception of the case study in Chapter 10, all case material has been altered to protect confidentiality.

<https://doi.org/10.1037/0000517-001>

When Leading Hurts: Understanding and Healing From Traumatic Experiences of Leadership, J. P. Wisdom and N. A. Nabors (Editors)

Copyright © 2027 by the American Psychological Association. All rights reserved.

Leadership can be immensely rewarding: Leaders can support others, creatively innovate, improve processes, and develop a rich satisfaction in their work. When people answer the call to leadership in organizations, including public service, for-profit corporations, universities, and nonprofits, they are agreeing to explicit and implicit expectations regarding their role. They agree explicitly to contribute to an organization's strategic goals to create products, provide services, innovate, increase efficiency, or grow shareholder value. They also agree to take responsibility for workers, contractors, customers, and other individuals. Above all, leaders explicitly agree to be an agent of the organization, to serve as its representative, and to further its aims.

An often-unstated part of leaders' agreement with their organization is that they expect the organization will support them, in the form of political cover, adequate resources, and appropriate communication, for doing the bidding of the organization's leadership. When this tacit agreement is broken—when an organization undermines a leader so they cannot do their job effectively—the impact on the leader can be devastating.

We refer here to “the organization,” but organizations are made up of people, each with their own strengths, weaknesses, blind spots, ambitions, and political sensitivities. In the illustration that opened this chapter, Cynthia's staff surely perceived her as behaving aggressively by attempting to fire them and make changes to the hospital's housekeeping division. In some ways, she may be eliciting a traumatic response in them. From Cynthia's perspective, however, her supervisors are undermining her as a leader by not supporting her efforts to achieve the performance goals they asked her to achieve. Perhaps she also feels her staff are failing her by refusing to meet what she perceives are the minimum job requirements. In this situation, who is the victim? Who is the victimizer?

Leaders like Cynthia must balance their authority and influence with unique vulnerabilities that differ from those of the workers they supervise. Although all workers are vulnerable to harassment or discrimination, leaders' visibility, authority, job expectations, relationships with staff, and role as organizational agents make them uniquely vulnerable.

This book was written for leaders and those who support them. The chapters explain how leaders can have uniquely traumatic experiences, how they can address and overcome these experiences, and—equally important—how they can continue to find joy in serving as a leader despite these difficult experiences. For the purposes of this book, we (both the editors and contributors) define a *leader* as anyone who has authority over and responsibility for others, including CEOs, managers, and supervisors, as well as those in informal leadership positions.

Traumatic stress has been conceptualized as taking the form of anxiety, depression, and other psychological sequelae arising from exposure to actual or threatened death, serious injury, or sexual violence by directly experiencing it, witnessing it, or experiencing repeated or extreme exposure to aversive details of traumatic events (American Psychiatric Association, 2022), or to other stressful events, such as workplace sexual harassment (Avina & O'Donohue, 2002), homophobic discrimination (Mascher, 2003), workplace bullying (Nielsen et al., 2015), being attacked for being a whistleblower (Ahern, 2018), or direct exposure to violent language or unsupportive behavior by colleagues (Niiyama et al., 2009). Long-term workplace abuse has also been linked to posttraumatic stress disorder (PTSD), suicidal ideation, and suicide (Leymann & Gustafsson, 1996). Furthermore, subclinical responses to trauma—those that do not meet criteria for a diagnosis of PTSD but result in distress and impairment profiles similar to those of clinically diagnostic PTSD (Korte et al., 2016)—suggest that the nondiagnostic approach to traumatic stress taken in this book is warranted. A *traumatic experience* differs from a *crisis* in that the former is long term in nature, whereas a crisis is, by definition, acute. A crisis can become a trauma, but many crises, with help, do not lead to trauma.

We (the editors and contributors) define *traumatic experiences of leadership* as adverse workplace events or circumstances that

- are related to a person's role as leader;
- are experienced by the leader as publicly humiliating or threatening to their livelihood, reputation, or character; and
- have a lasting adverse impact on the leader's sense of self; confidence as a leader; leadership aspirations; and mental, physical, social, emotional, or spiritual well-being.

This definition is based on a definition we provided in an earlier publication (Wisdom & Nabors, 2024).

We distinguish traumatic experiences of leadership from general workplace trauma in that the former are specifically related to the person's role as a leader. Traumatic experiences of leadership may have diverse antecedents, including leading through a natural disaster that requires one to address damage and struggle; delivering difficult news about deaths or layoffs; or experiencing negative leadership from other leaders, such as bullying, undermining, and sabotage. A traumatic experience of leadership is not a failure on the part of the leader; it is a failure on the part of the organization. Similarly, when a leader has a traumatic experience, they likely are not alone;

their experience of feeling hurt and betrayed is often echoed throughout the organization.

In the remainder of this chapter, we discuss the nature and purpose of various organizations and the role of leaders in these organizations. We then consider why leaders have unique experiences and needs related to traumatic workplace experiences and discuss potential causes of traumatic experiences of leadership. We distinguish between direct and indirect mechanisms of trauma that may occur in traumatic experiences of leadership, and we briefly review the impacts of traumatic experiences of leadership. Finally, we provide an overview of the chapters in this book.

PURPOSE AND NATURE OF ORGANIZATIONS

Organizations are groups created to accomplish goals that individuals cannot accomplish alone. In the United States, public companies are explicitly created and managed to maximize shareholder value; that is, they optimize productivity and manage compensation efficiently so as to enhance profitability. Both for-profit and nonprofit organizations are inherently competitive—they compete for the best staff, contracts, customers, resources, status, power, and influence (Delios, 2010). With average executive pay ballooning to 344 times the average employee pay (Bivens & Kandra, 2023), and recent laws eroding the power of worker representation via unions (Addison, 2020), organizations clearly have significant power over their workers and leaders. In the best cases, an organization's leadership works with employees to set reasonable goals, ensure fair treatment, and address concerns. In the worst cases, organizations are overtly or deliberately oppressive.

Organizations are shaped by knowledge, history, and power, and they influence people's identities and experiences. The assumption that institutions are trustworthy, or that trauma within them is rare, overlooks how trauma is an organizing and sustaining feature of institutions and institutional power (Thompson, 2021).

Some organizations have characteristics that inherently make them more stressful places to work. Job-related factors, such as long work hours, a rapid pace of work, and tedious tasks, increase worker stress (Rout & Rout, 2002). Characteristics of individuals' roles associated with increased experience of stress include high levels of responsibility, multiple tasks, role overload, and role ambiguity (Cooper et al., 2001). Large-scale organizational stressors, such as bankruptcies, reorganizations, and plant closings, as well as specific workplace activities or incidents, such as natural/industrial

disasters and gun violence, lead to increased worker stress (DeFraia, 2015). Finally, organizational cultures that are critical, vindictive, competitive, permissive of rumor-spreading, have high conflict, or have low psychological safety are considered stressful places to work (Colligan & Higgins, 2006; Edmondson, 2018).

In addition to specific workplace and role characteristics, some workplaces are composed of people who can treat others poorly. Poor workplace behavior can be divided into *overt behaviors* and *covert behaviors* (Brancu & Wisdom, 2021): Overt poor behaviors include bullying, undermining, belittling, invalidating, gaslighting, dismissing, gossiping, badmouthing, upstaging, bulldozing, and railroading. Covert poor behaviors include backroom deals, backstabbing, triangulation, hidden agendas, scapegoating, sabotaging, blocking, and passive aggression. These poor behaviors can become legally actionable workplace harassment or discrimination when they target individuals because of their personal characteristics, such as gender, gender expression, race, ethnicity, national origin, religion, disability, or age. Furthermore, leaders may, as part of their job, be compelled to behave in ways that harm others, such as having to fire one or more workers. In this way, leaders become traumatizing agents, and this can, in turn, affect the leaders themselves.

When negative workplace experiences combine with sexist (Berg, 2006), racist (Carter, 2007), or heterosexist (Szymanski & Balsam, 2011) aggression, trauma is even more likely. Numerous studies have highlighted how women and members of racial and ethnic minority groups face a *glass ceiling* (a systemic barrier preventing them from being promoted to senior positions; Powell & Butterfield, 2015) and a *glass cliff* (a problem faced when they have been given a leadership role during a period of crisis or downturn, when the risk of failure is highest; Ryan & Haslam, 2005). Furthermore, socialization trains women and members of racial and ethnic minority groups to assume they are wrong, question their gut, and serve others' needs, all of which can keep them from protecting themselves or leaving a traumatic situation. Leaders deserve better.

WHY FOCUS ON LEADERS?

Although many workers have endured adverse work experiences that may lead to trauma, leaders have unique symbolic and literal relationships with their employees: From a psychoanalytic perspective, workers' subconscious view of the leader as a parental figure can generate fear, hostility, and envy

(Gabriel, 2011). Workers may also idealize and identify with the leader, broadening the impact of adverse experiences on the leader to affect workers as well. Furthermore, leaders often manage their workers' emotions and channel them into healthy productivity; when a leader is traumatized by the organization they serve there is a strong risk they will treat their followers similarly.

The visibility of leaders can make their experiences publicly humiliating. Mavin (2024) found that women undergoing leadership trauma reported experiences of shock, distress, profound suffering, significant loss, and the feeling of being obliterated. There is also an enormous curiosity about how leaders who have great power over their employees (i.e., as potential traumatizing agents) can, in turn, be treated poorly by their superiors (be traumatized).

Interventions to prevent or address negative, hostile, humiliating, or unsupportive workplace experiences have tended to focus on workers in nonleadership positions. For example, work-life balance has been promoted as an antidote to workplace stress (Lauzun et al., 2010). Organizations are encouraged to increase psychological safety by promoting policies that ensure one will not be punished or humiliated for speaking up with questions, concerns, or mistakes (Edmondson, 2018). The Substance Abuse and Mental Health Services Administration (2014) defined trauma-informed workplaces as those that realize the widespread impact of trauma; recognize the signs and symptoms of trauma in clients and staff; and respond by integrating knowledge about trauma into policies, procedures, and practices so that retraumatization can be avoided. Organizations have even provided specific training to their employees to increase civility and positive attitudes and decrease distress and workplace absences (Leiter et al., 2012).

Despite the existence and effectiveness of these interventions (e.g., Fernández et al., 2023; Peng, 2023), none are targeted specifically at traumatic experiences of leadership. This book seeks to fill that gap.

WHAT CAUSES TRAUMATIC EXPERIENCES OF LEADERSHIP?

One cause of traumatic experiences of leadership is a boss, coworker, or colleague who has characteristics of what Kilburg (2023) called the *Dark Sextad Plus Schema*: (a) narcissism (a sense of dominance and superiority), (b) Machiavellianism (a cold and manipulative leadership style), (c) psychopathy (high impulsivity and low empathy), (d) a power orientation (the agency, means, and ability to enforce one's will on others), (e) charisma (compelling attractiveness), and (f) sadomasochism (delusions of omnipotence

and control, a pattern of consistent help seeking coupled with resistance to change). Although there is mixed evidence about whether leaders have a higher prevalence of these traits than nonleaders do (e.g., Landay et al., 2019), their impact on targeted leaders can be devastating. Persons with dark sextad personality traits may undermine the leader to their staff, withdraw support from initiatives they directed the leader to lead, or scapegoat the leader for their own failings.

Not all traumatizing behavior in organizations is a result of bad leaders. Organizational politics, incentives, and disincentives may interact with individuals' characteristics to create a harmful environment. At an organizational level, *institutional betrayal*—when trusted and powerful institutions act in ways that harm those dependent on them for safety and well-being (Smith & Freyd, 2014)—may occur.

Leaders' poor workplace behavior can lead to feelings of institutional betrayal: "When what *should* happen is the opposite of what is happening, cognitive dissonance is created, which undermines the individual's sense of reality, confidence, and their mental health" (Ahern, 2018, p. 60). The type of institutional betrayal described in this quote is also a violation of the implicit rules described earlier, according to which leaders agree to be an agent of the organization, to serve as its representative, and to further its aims; in return, the organization provides support and political cover to the leader.

The mechanisms through which leadership experiences cause trauma can be either direct or indirect (i.e., vicarious). In the next sections, we examine both types.

DIRECT MECHANISMS OF TRAUMA

Leaders can be routinely exposed to the excesses of a toxic, abusive culture through direct experiences with their supervisor and individuals in positions of upper leadership. In such cases, the leader is in a vulnerable position because they are viewed by both the people they directly supervise and members of their team as representing upper leadership, but in fact they have minimal power to address or change their experiences. The sense of betrayal from the higher-ups competes with their sense of duty and obligation to their team.

Influence on the Leader's Sense of Self and Confidence Level

As director of a highly successful team, Sara prided herself on maintaining a positive, supportive environment. She started every meeting with encouraging feedback on the team's successes before diving into the agenda. When

Sara's boss, the new executive director, attended his first meeting with Sara and her team, he immediately launched into complaints about Sara's areas of supervision, calling out two of her team members by name. When Sara attempted to defend her team members, her boss berated her leadership, noting that the team's failures were her responsibility. Sara was stunned and humiliated by her boss's behavior. In a follow-up to the meeting, Sara's boss noted that he believed Sara coddled her team and was allowing her feelings to influence her leadership responsibilities.

Leaders may experience trauma through direct exposure to authoritarian and abusive experiences from their immediate supervisor as well as leaders higher up in the organization (Zhang et al., 2024). Leaders may have to manage authoritarian impulses from their supervisors, including *manipulation* (e.g., attempts to undermine their authority by circumventing or countermanding guidance to their direct reports); *intimidation*, including bullying tactics (e.g., a supervisor behaving in an aggressive manner, whether in private or public settings); and *humiliation* (e.g., berating the leader in a public forum with peers or direct reports). Each of these types of behavior calls the leader's authority and competence into question, and they often happen in front of the employees the leader is managing.

Similar trauma can occur when leaders are extremely micromanaged by their supervisor, sometimes to such an extent that they lose their sense of autonomy (e.g., when their supervisor frequently questions, both in private and public, the decisions they have made). An organizational culture where leaders are publicly shamed and belittled by their supervisor and higher-ups can significantly influence the leader's professional confidence and self-worth. In addition, exposure to unpredictable and volatile behavior from one's superiors can create and exacerbate fear and anxiety (Pizzolitto et al., 2022).

Chase serves as senior director in a Fortune 1000 company that recently was bought by another company. His supervisor informed him that the new owners have required him to lay off half of his staff. Chase was shocked and dismayed at the number of people he would have to lay off and the emotional impact this would have on his team. After further discussion with other supervisors at his level who were not experiencing the same degree of layoffs, Chase surmised that part of the reasons for the decimation of his team was to help his boss look more efficient to the higher-ups. Chase was frustrated with the expectations by his boss that he and his team provide similar results with fewer staff and resources and outraged by his duplicity. Chase knew that the layoffs were going to significantly affect both the emotional and physical well-being of his team members, in particular those who had given years of stellar service to the organization. Chase struggled to navigate his own feelings of betrayal while also supporting his team members through the crisis.

Direct mechanisms of traumatic leadership experiences also include exposure to betrayal and a lack of psychological safety within the organization (Edmondson & Lei, 2014). Leaders are expected to represent the organization to their direct supervisees and the staff within their areas. When leaders are supervised by those who prioritize their own personal gain over the well-being of the team, they must work harder to meet the expectations of their role. When leaders work in an environment where higher-ups discourage speaking up, psychological safety is lost. The leader is responsible for overseeing and assisting the people who report directly to them while also addressing their own challenges related to psychological safety. They often are responsible for acting as an intermediary, supporting their supervisees and team in navigating the challenges presented by the organization's culture. When they experience a lack of support from their supervisor or higher-ups during crises, this can decrease the sense of psychological safety—both for the leader, who may feel abandoned and vulnerable, and for the people who directly report to them, who may feel similarly (Frazier et al., 2017).

Organizational leadership that includes broken promises and inconsistent behavior erodes a sense of trust in the organization and breeds feelings of betrayal. In these environments, a leader who oversees a team while also reporting to higher-ups must navigate their own feelings while also deciding how to buffer or navigate negative experiences as they manage the workers they supervise.

Influence on Leadership Aspirations

Erika worked as vice president of a financial management company. Although she had ongoing ethical concerns about the way the company was managed, she did not trust that she could express those concerns to her supervisor or HR because the company had a reputation for firing those who spoke up about problems. Within a month after contemplating her last thoughts about these concerns, she learned that the president of the company was being investigated by the U.S. Securities and Exchange Commission for insider trading. Erika felt both vindicated and guilty that she had not spoken up about her own concerns earlier, when it might have made a difference. She worried about the fallout from the investigation on the viability of the company and her own future career plans.

Further direct mechanisms of traumatic leadership include experiencing unethical and corrupt organizational practices (Almeida et al., 2022). Leaders who are pressured by their supervisor or higher-ups to engage in unethical or illegal activities may experience trauma. Even leaders who witness or are tacitly complicit in corrupt practices because of their role in the organization

may experience trauma. Exposure to a type of leadership that goes against one's own values can lead to moral injury and psychological distress (Winter, 2019). The trauma may be further enhanced by the potential legal and reputational repercussions of the unethical leadership. Although the effects of corrupt leadership will likely be felt at all levels, leaders bear an additional burden as representatives of the organization even if they had no direct part in unethical or corrupt decisions and behaviors.

INDIRECT MECHANISMS OF TRAUMA

Tripp managed a team of customer service support representatives in a successful communications company. They were alerted one evening that one of their team members had lost their home and a family member in a fire and that this person and rest of her family had been relocated to a shelter. Tripp connected directly with the team member while also reaching out to HR to determine what resources were available to support the family. Tripp had worked with this team member for several years and interacted with her family at various company functions. They were devastated to learn of the team member's tragic loss.

Organizational leaders can also experience trauma vicariously in situations where they are a witness to the trauma of others (Meeker et al., 2025). Leaders are often turned to for support when their supervisees or other team members experience trauma, such as discrimination or harassment, or are navigating workplace accidents. Leaders may also experience vicarious trauma when their team members struggle with challenges outside of the workplace, such as natural disasters or personal loss. Leaders are expected to support the supervisee or team member as they manage the crisis. These experiences can exact an emotional toll on the leader as they work to support the team member. The circumstances of the crisis, including its nature and duration, can lead to secondary traumatic stress and compassion fatigue for the leader (Kendrick & Tay, 2023). This may be felt by others surrounding the team member but, with the work-related trauma in particular, the leader is expected to provide more hands-on support to assist in decreasing or eliminating the effects of the crisis.

Maisie served as vice president of HR for a company that sold arts and crafts in hundreds of stores across the country, a position she had earned through hard work and years of dedication to the organization. Although sales had been challenging recently, Maisie was unprepared to learn that the company was filing for bankruptcy and would be closing multiple stores. Maisie

was tasked with coordinating the layoffs of hundreds of personnel, including team members with whom she had worked closely for several years.

Leaders may experience vicarious trauma from organizational crises (Meeker et al., 2025). Organizations may deal with a variety of crises, including financial or ethical scandals, mass layoffs, and natural disasters. During these times, leaders are expected to both support the leadership and manage the well-being of the people they supervise and other team members. This pressure to maintain stability and morale while also navigating their own feelings about the crisis can lead to vicarious trauma.

Furthermore, leaders may experience vicarious trauma through working in a dysfunctional and toxic organization. Working in an environment that perpetuates harmful practices and toxic leadership at multiple levels can lead to systemic distress. A leader who has to navigate a culture of perpetuated fear and silencing is at high risk for burnout and moral distress caused by the constant need to function as part of this toxic system (Bou Reslan et al., 2025).

IMPACTS OF TRAUMATIC EXPERIENCES OF LEADERSHIP

As dean of the largest college in a university, Aaron supervised several department chairs. Because this was a teaching institution, the deans were under pressure to increase student enrollments by offering innovative programs. Aaron dealt with being constantly berated by the provost when enrollments dropped. The provost would single out the college with the lowest enrollment numbers in meetings, deriding the dean's performance in front of their peers. He believed that competition, pitting the deans against each other for resources, brought the best results. Aaron struggled with the animosity he faced from the provost and the other deans and with being humiliated repeatedly in meetings. The complaints and bullying from the department heads for more funding and resources were an additional source of stress. Interactions with the provost, deans, and department heads became so strained that Aaron grew to dread the weekly meetings. His sleeping suffered, he began experiencing panic attacks, and he began doubting his ability to perform as a leader. Aaron felt like there was nowhere to turn for support.

Direct and indirect experiences of trauma can have a significant impact on a leader's professional and personal well-being. Trauma can lead to psychological and emotional challenges for the leader. Similar to the impact of workplace trauma on employees, a leader experiencing workplace trauma may suffer from anxiety and depression, emotional numbing, and irritability

(Mavin, 2022) that affect their ability to sleep and eat and often cause other physical symptoms (Winter, 2019). Trauma also can lead to substance abuse, increased aggression or withdrawal, or other problematic coping mechanisms. It can influence the way the leader interacts with and views others in the workplace, including cynicism, difficulty trusting others, and burnout.

Matt was one of the first gay firefighters in his midsize city. He had come out several years earlier. Matt fought hard to work his way up the leadership ranks despite constant bullying from his colleagues, which continued even as he became a leader. Because of his solid performance record as a firefighter, he was promoted to lieutenant, then to captain, and then to battalion chief. As battalion chief, Matt modeled his supervision style after a former boss, who had expected perfection and maximum effort from his leaders. Unfortunately, Matt's negative experiences of bullying had taken a toll, and he felt extreme pressure to prove his ability to handle the chief role. Matt responded by pushing his team hard and prioritizing results over everything else. When his leadership style led his team to make a near-fatal mistake while fighting a dangerous wildfire, Matt realized how much his own traumatic experiences had affected his ability to lead.

Trauma can also lead to behavioral challenges, including changes in how the leader performs their job. It can increase workaholism and perfectionism, including expecting these same traits from the people they supervise and other members of the team. Extended exposure to trauma may lead to impaired judgment and reduced empathy, including decreased motivation and a loss of vision that affects the overall success of the team. Further challenges include difficulty building and maintaining trust among team members.

PLAN OF THIS BOOK

This book focuses on understanding, preventing, and intervening with the traumatic experiences of leaders. Although there is an extensive literature on workplace stress (e.g., Fox et al., 2022), very little of it focuses specifically on the unique experiences of leaders, and a number of unanswered questions remain:

- How do leaders experience workplace stress differently from or similarly to workers, especially when leaders are targeted specifically because of their role?
- How do traumatic experiences of leadership affect individuals with intersecting minority group statuses (e.g., gender, race, disability) or those with previous history of trauma?

- How do the traumatic experiences of individual leaders change over the course of their careers; for example, would being undermined by a higher-up and railroaded on a key initiative lead an experienced leader to respond differently compared with a novice leader?
- What is the role of communication and technology in leadership and trauma?
- How do leaders in organizations that have trauma inherent in the nature of their business (e.g., homeless shelters, law enforcement) manage political or interpersonal traumatic experiences related to their leadership?
- How can “bad” leaders be helped to improve their approach?
- Are good employees leaving leadership positions because of their traumatic experiences of being leaders, and how can we help ensure good leaders stay and bad actors leave?

In the chapters that follow, we and the other contributors pursue these questions in depth. The chapter authors provide insights from clinical psychology, academic leadership, health services research, law enforcement, and the federal government to inform the discussion about traumatic experiences of leadership. Case studies are provided to exemplify the myriad ways in which leaders can have traumatic experiences at work and discuss how these experiences can be addressed.

The chapters in Part I describe sources and impacts of workplace trauma for leaders. Chapter 2 describes relational issues at work that can influence trauma. Chapter 3 describes how the organizational environment and culture can affect leaders' experiences of trauma. Childhood experiences of trauma and how they may affect leaders are discussed in Chapter 4. Chapter 5 addresses the intersection of marginalized identities and institutional trauma in leadership. Chapter 6 illustrates how gender may shape individuals' leadership opportunities, their leadership experiences, and their interpretation of trauma experiences while in leadership roles. Chapter 7 addresses how intersectionality serves as a catalyst to complicate discrimination and disadvantage for Black women leaders. Chapter 8 describes the impacts of negative leadership on traumatic experiences of leadership from a motivational perspective. Chapter 9 focuses on issues of identity and self-esteem among women leaders. Chapter 10 discusses factors relevant to traumatic experiences of leadership in law enforcement and public safety. Chapter 11 explores the intricate relationship among religion, traumatic leadership experiences, and spirituality.

In Part II, which includes Chapters 12–15, we turn to how to prevent or ameliorate traumatic experiences of leadership, using coaching (Chapter 12),

psychotherapy (Chapter 13), or organizational approaches (Chapter 14). The final chapter (15) provides clarification and future directions for understanding, preventing, and healing traumatic experiences of leadership.

Leadership is not for the faint of heart. Those who answer the call to leadership are entering potentially dangerous territory, where their efforts to mentor, train, educate, discipline, and fire employees in the service of the organization may come at great personal cost. Despite these challenges, leadership has substantial rewards and satisfactions that are worth pursuing. We hope this book highlights these rewards and helps future leaders avoid, or heal from, traumatic experiences of leadership.

REFERENCES

- Addison, J. T. (2020). *The consequences of trade union power erosion*. IZA World of Labor. <https://wol.iza.org/articles/consequences-of-trade-union-power-erosion/long>
- Ahern, K. (2018). Institutional betrayal and gaslighting: Why whistle-blowers are so traumatized. *The Journal of Perinatal and Neonatal Nursing*, 32(1), 59–65. <https://doi.org/10.1097/jpn.0000000000000306>
- Almeida, J. G., Hartog, D. N. D., De Hoogh, A. H. B., Franco, V. R., & Porto, J. B. (2022). Harmful leader behaviors: Toward an increased understanding of how different forms of unethical leader behavior can harm subordinates. *Journal of Business Ethics*, 180(1), 215–244. <https://doi.org/10.1007/s10551-021-04864-7>
- American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders* (5th ed., text rev.). <https://doi.org/10.1176/appi.books.9780890425787>
- Avina, C., & O'Donohue, W. (2002). Sexual harassment and PTSD: Is sexual harassment diagnosable trauma? *Journal of Traumatic Stress*, 15(1), 69–75. <https://doi.org/10.1023/a:1014387429057>
- Berg, S. H. (2006). Everyday sexism and posttraumatic stress disorder in women: A correlational study. *Violence Against Women*, 12(10), 970–988. <https://doi.org/10.1177/1077801206293082>
- Bivens, J., & Kandra, J. (2023, September 21). *CEO pay slightly declined in 2022*. Economic Policy Institute. <https://www.epi.org/publication/ceo-pay-in-2022/>
- Bou Reslan, F., Hassanie, S., Uludag, O., BouKarroum, S., & Jabbour Al Maalouf, N. (2025). Toxic work environment: The impact of toxic leadership and workplace bullying on employees' innovative work behavior and affective commitment. *Cogent Business & Management*, 12(1), Article 2498068. <https://doi.org/10.1080/23311975.2025.2498068>
- Brancu, M., & Wisdom, J. P. (2021). *Millennials' guide to workplace politics: What no one ever told you about power and influence*. Winding Pathway Books.
- Carter, R. T. (2007). Racism and psychological and emotional injury: Recognizing and assessing race-based traumatic stress. *The Counseling Psychologist*, 35(1), 13–105. <https://doi.org/10.1177/0011000006292033>
- Colligan, T. W., & Higgins, E. M. (2006). Workplace stress: Etiology and consequences. *Journal of Workplace Behavioral Health*, 21(2), 89–97. https://doi.org/10.1300/j490v21n02_07

- Cooper, C. L., Dewe, P. J., & O'Driscoll, M. P. (2001). *Organizational stress: A review and critique of theory, research, and applications*. Sage.
- DeFraia, G. S. (2015). Psychological trauma in the workplace: Variation of incident severity among industry settings and between recurring vs isolated incidents. *The International Journal of Occupational and Environmental Medicine*, 6(3), 155–168.
- Delios, A. (2010). How can organizations be competitive but dare to care? *Academy of Management Perspectives*, 24(3), 25–36. <https://www.jstor.org/stable/29764972>
- Edmondson, A. C. (2018). *The fearless organization: Creating psychological safety in the workplace for learning, innovation, and growth*. Wiley.
- Edmondson, A. C., & Lei, Z. (2014). Psychological safety: The history, renaissance, and future of an interpersonal construct. *Annual Review of Organizational Psychology and Organizational Behavior*, 1, 23–43. <https://doi.org/10.1146/annurev-orgpsych-031413-091305>
- Fernández, V., Gausereide-Corral, M., Valiente, C., & Sánchez-Iglesias, I. (2023). Effectiveness of trauma-informed care interventions at the organizational level: A systematic review. *Psychological Services*, 20(4), 849–862. <https://doi.org/10.1037/ser0000737>
- Fox, K. E., Johnson, S. T., Berkman, L. F., Sianoja, M., Soh, Y., Kubzansky, L. D., & Kelly, E. L. (2022). Organisational- and group-level workplace interventions and their effect on multiple domains of worker well-being: A systematic review. *Work & Stress*, 36(1), 30–59. <https://doi.org/10.1080/02678373.2021.1969476>
- Frazier, M. L., Fainshmidt, S., Klinger, R. L., Pezeshkan, A., & Vracheva, V. (2017). Psychological safety: A meta-analytic review and extension. *Personnel Psychology*, 70(1), 113–165. <https://doi.org/10.1111/peps.12183>
- Gabriel, Y. (2011). Psychoanalytic approaches to leadership. In A. Bryman, D. Collinson, K. Grint, B. Jackson, & M. Uhl-Bien (Eds.), *The Sage handbook of leadership* (pp. 393–405). Sage.
- Kendrick, A. H., & Tay, M. K. (2023). Influence of number of years of service on educational workers' compassion fatigue and burnout: A comparative analysis. *The International Journal of Health, Wellness, and Society*, 14(1), 113–128. <https://doi.org/10.18848/2156-8960/CGP/v14i01/113-128>
- Kilburg, R. R. (2023). Scoundrels: Navigating the Dark Sextad Plus Schema (DSPS) in leadership and executive coaching engagements. *Psychology of Leaders and Leadership*, 26(3–4), 218–240. <https://doi.org/10.1037/mgr0000143>
- Korte, K. J., Allan, N. P., Gros, D. F., & Acierno, R. (2016). Differential treatment responses trajectories in individuals with subclinical and clinical PTSD. *Journal of Anxiety Disorders*, 38, 95–101. <https://doi.org/10.1016/j.janxdis.2016.01.006>
- Landay, K., Harms, P. D., & Credé, M. (2019). Shall we serve the dark lords? A meta-analytic review of psychopathy and leadership. *The Journal of Applied Psychology*, 104(1), 183–196. <https://doi.org/10.1037/apl0000357>
- Lauzun, H. M., Morganson, V. J., Major, D. A., & Green, A. P. (2010). Seeking work–life balance: Employees' requests, supervisors' responses, and organizational barriers. *The Psychologist-Manager Journal*, 13(3), 184–205. <https://doi.org/10.1080/10887156.2010.500953>
- Leiter, M. P., Day, A., Oore, D. G., & Spence Laschinger, H. K. (2012). Getting better and staying better: Assessing civility, incivility, distress, and job attitudes one year after a civility intervention. *Journal of Occupational Health Psychology*, 17(4), 425–434. <https://doi.org/10.1037/a0029540>

- Leymann, H., & Gustafsson, A. (1996). Mobbing at work and the development of post-traumatic stress disorders. *European Journal of Work and Organizational Psychology*, 5(2), 251–275. <https://doi.org/10.1080/13594329608414858>
- Mascher, J. (2003). Surviving trauma and anxiety as a result of homophobic discrimination. In J. S. Whitman & C. Boyd (Eds.), *The therapist's notebook for lesbian, gay, and bisexual clients: Homework, handouts, and activities for use in psychotherapy* (pp. 60–80). Haworth Clinical Practice Press.
- Mavin, S. (2022). Women leaders' work-caused trauma: Vulnerability, reflexivity and emotional challenges for the researcher. *Qualitative Research in Organizations and Management*, 17(4), 442–458. <https://doi.org/10.1108/QROM-11-2021-2242>
- Mavin, S. (2024). No one deserves professional annihilation: Learning from women's experiences of leadership work-caused trauma. *Management Learning*, 56(3), 595–621. <https://doi.org/10.1177/13505076241282739>
- Meeker, S. A., Hahn, R., Wilt, V. L., & Molnar, B. E. (2025). Vicarious traumatization among emergency medical service personnel: A systematic review. *Trauma, Violence, & Abuse*. Advance online publication. <https://doi.org/10.1177/15248380251320990>
- Nielsen, M. B., Tangen, T., Idsoe, T., Matthiesen, S. B., & Magerøy, N. (2015). Post-traumatic stress disorder as a consequence of bullying at work and at school: A literature review and meta-analysis. *Aggression and Violent Behavior*, 21, 17–24. <https://doi.org/10.1016/j.avb.2015.01.001>
- Niiyama, E., Okamura, H., Kohama, A., Taniguchi, T., Sounohara, M., & Nagao, M. (2009). A survey of nurses who experienced trauma in the workplace: Influence of coping strategies on traumatic stress. *Stress & Health*, 25(1), 3–9. <https://doi.org/10.1002/smi.1217>
- Peng, X. (2023). Advancing workplace civility: A systematic review and meta-analysis of definitions, measurements, and associated factors. *Frontiers in Psychology*, 14, Article 1277188. <https://doi.org/10.3389/fpsyg.2023.1277188>
- Pizzolitto, E., Verna, I., & Venditti, M. (2022). Authoritarian leadership styles and performance: A systematic literature review and research agenda. *Management Review Quarterly*, 73, 841–871. <https://doi.org/10.1007/s11301-022-00263-y>
- Powell, G. N., & Butterfield, D. A. (2015). The glass ceiling: What have we learned 20 years on? *Journal of Organizational Effectiveness: People and Performance*, 2(4), 306–326. <https://doi.org/10.1108/joepp-09-2015-0032>
- Rout, U. R., & Rout, J. K. (2002). *Stress management for primary health care professionals*. Kluwer Academic Publishers.
- Ryan, M. K., & Haslam, S. A. (2005). The glass cliff: Evidence that women are over-represented in precarious leadership positions. *British Journal of Management*, 16(2), 81–90. <https://doi.org/10.1111/j.1467-8551.2005.00433.x>
- Smith, C. P., & Freyd, J. J. (2014). Institutional betrayal. *The American Psychologist*, 69(6), 575–587. <https://doi.org/10.1037/a0037564>
- Substance Abuse and Mental Health Services Administration. (2014, July). *SAMHSA's concept of trauma and guidance for a trauma-informed approach* (HHS Publication No. SMA 14-4884). https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/docs/samhsa_trauma_concept_paper.pdf
- Szymanski, D. M., & Balsam, K. F. (2011). Insidious trauma: Examining the relationship between heterosexism and lesbians' PTSD symptoms. *Traumatology*, 17(2), 4–13. <https://doi.org/10.1177/1534765609358464>

- Thompson, L. (2021). Toward a feminist psychological theory of “institutional trauma.” *Feminism & Psychology*, 31(1), 99–118. <https://doi.org/10.1177/0959353520968374>
- Winter, L. (2019). Organizational trauma: A phenomenological study of psychological organizational trauma and its effect on employees and organization. *Management*, 14(2), 117–136. <https://doi.org/10.26493/1854-4231.14.117-136>
- Wisdom, J. P., & Nabors, N. (2024). Women’s traumatic experiences of leadership: Case studies and hypothesized mechanisms. *Psychology of Leaders and Leadership*, 27(2), 268–287. <https://doi.org/10.1037/mgr0000156>
- Zhang, W., Wang, L., Jiang, J., Zhang, X., Zhang, H., & Zhang, X. (2024). When is an authoritarian leader perceived as more abusive: Investigations of the effect of subordinates’ ideal and typical leadership schema. *Journal of Leadership & Organizational Studies*, 31(1), 25–40. <https://doi.org/10.1177/15480518231223554>