THE FAULT LINES OF LEADERSHIP –

Lessons from the global Covid-19 crisis

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Forthcoming in:

Journal of Change Management
No 1/2021
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Abstract:
In this article we reflect on role that leadership has played in the response to the global Covid-19 crisis. We discuss two major “fault lines” of leadership: narcissism and ideological rigidity. A fault line is a problem that may not be obvious under normal circumstances but could cause leadership to fail stakeholders and society at large in a defining moment such as a global pandemic. Using case examples from global political leaders we elaborate on these breaking points in crisis leadership and contrast them with the healing properties of leader compassion and mending forces of evidence-based decision making. We conclude our paper with implications for responsible leadership research and practice.

Keywords:
Leadership in crisis, responsible leadership, destructive leadership, compassionate leadership, evidence-based thinking, narcissism, ideology

‘MAD statement’:
The Covid-19 crisis is a global health crisis of unprecedented speed and proportion and it has highlighted that crises can bring out the best and the worst in leaders. In this article we aim to Make a Difference by encouraging reflection on the crucial role of responsible leadership in crisis, specifically leaders’ ability to build and cultivate sustainable and trustful relationships to different stakeholders to enable collective responses that reduce harm and do good. We draw attention to two toxic leadership tendencies - narcissism and ideological rigidity - that can profoundly undermine this essential relational work and that can imperil stakeholders security and wellbeing. We make an argument for curbing narcissism and instead fostering compassionate leadership, and for careful reflection on the role of ideology and more open-minded and evidence-based thinking in leadership development and practice.
Introduction

Almost a year into the global Covid-19 pandemic it is hard to imagine that something good will come from the crisis. The virus has ravaged countries, destroyed families and weakened many national economies for years, perhaps for decades to come. And yet, radical hope is what humanity currently needs. We don’t know yet how the post-Covid-19 world may look, and we lack a clear view of what to expect in the coming years; and yet, our hope is radical in that we are desperate for a ‘new normal’, a subjectivity that is our own (Lear, 2006, p.103).

It is the role of leaders to instil in people a sense of hope for ‘future goodness’ and dignity, to be guardians of radical hope and see into the future. What has become clear throughout the global pandemic crisis though, is that many leaders have not only failed to instil hope, but instead have engaged in acts of selfish, destructive and outright “toxic leadership” (Padilla et al., 2007), to the detriment of a great many people around the world. We will reflect on some of these failures but will also look at instances where leaders have succeeded. In doing so, we will shed light onto fault lines of leadership.

A fault line in its original sense is a break in the earth’s surface. However, the term seems fitting to describe what the Cambridge Dictionary calls “a problem that may not be obvious and could cause something to fail”; in other words, a breaking point in leadership practice that may not be obvious, or indeed matter under normal circumstances, but that emerges in the case of an extreme event – such as a global pandemic crisis. In the following, we will discuss two major fault lines - narcissism and ideological rigidity – and contrast the counterproductive crisis leadership behaviours they prompt with crisis leadership based on compassion and evidence-based decision making.

Our discussion is informed by political leaders’ handling of the Covid-19 pandemic, based mostly on coverage in the news media. These examples are not meant to be in-depth accounts, or even conclusive, but to enable a generative engagement with core aspects of
responsible leadership in crisis. While we focus predominantly on political leadership in this article, the fault lines we outline are equally pertinent to organizational leadership. By considering aspects of the “dark side of leadership” (Conger, 1990) during defining moments of leadership amidst the Covid-19 crisis, we will be able to highlight how fault lines undermine a leader’s capacity to perform the challenging relational and ethical work with stakeholders that is essential for responsible leadership (Maak & Pless, 2006; Pless & Maak, 2011), and necessary for effective crisis response. We conclude our observations by discussing how leadership practice during Covid-19 can inform a re-examination of the concept of responsible leadership (Uhl-Bien et al., 2020) and future research on its relevance for crisis leadership.

**Crises, Pandemics and Responsible Leadership**

Crises are not ‘run of the mill’ leadership challenges. They represent low-probability, high-impact events that disrupt a social system’s ongoing activities and relationships, and typically involve a high degree of ambiguity of cause, effect, and means of resolution (Pearson & Clair, 1998; James et al. 2011). In this regard, a pandemic is a global crisis par excellence: it impacts an extraordinarily broad set of stakeholders, and the crisis response is complicated by the exceptionally high level of interdependence amongst these stakeholders (Ansell et al., 2020). The history of pandemics has demonstrated that the behaviour of a few deviant actors can imperil the life and wellbeing of millions (Hays, 2009).

Responsible leadership theory is well suited to examine and explain leadership behaviours and their consequences in such a crisis situation. The theory was in part, conceived as a response to high-level corporate misconduct in the early 2000s, particularly to corporate leaders’ single-minded focus on satisfying shareholder interests – on numerous occasions with illegal means – and their wilful ignorance of the harm their decisions brought
to other stakeholders. Research on responsible leadership rests on two key premises. First, contemporary leadership work needs to consider the needs and concerns of a broad set of stakeholders. Second, leadership happens in relationships with a multitude of stakeholders – as a consequence, the classic dyad between a leader and her direct reports is too narrow a lens to evaluate the contemporary practice of leadership. Given the reoccurring failures and weaknesses of leaders and a concomitant shift in expectations among stakeholders that leaders must do better, responsible leadership becomes not only more important but also a key measure of effectiveness. Indeed, in an environment of contested values not to be responsible means not to be effective as a leader (Waldman & Galvin, 2008). Hence, we understand responsible leadership as a relational and ethical phenomenon, which occurs in social processes of interaction with those who affect or are affected by leadership and have a stake in the purpose and vision of the leadership project (Pless & Maak, 2011).

While responsibility is not the same concept in the minds of all, our definition suggests that in a stakeholder society leadership happens on multiple levels and that defining the actual purpose of leadership becomes at once, a foundational and a complex social endeavour. In other words, the question: “Leadership for what?” is central in the determination of leadership quality and worth of the leadership project – particularly during a crisis, when stakeholders’ security and wellbeing are at risk. To succeed in such dire circumstances, leaders require outstanding relational and ethical intelligence (Maak & Pless, 2006).

Responsible leadership represents what Joseph Rost referred to as a “post-industrial concept of leadership” (1993:102). Its multilateral, relational focus stands in contrast to the industrial paradigm of leadership that has dominated scholarship from 1900 to 1990, and which is "rational, management oriented, male, technocratic, quantitative, goal dominated, cost-benefit-driven, personalistic, hierarchical, short term, pragmatic, and materialistic" (Rost
Responsible leadership theory considers leadership as a ‘full range’-concept, stressing the changing nature of leadership in a stakeholder society, the traits and roles of leaders in the leadership project, as well as the context in which leadership occurs. Hence, responsible leadership theory addresses multiple of the concerns of leadership theory Rost has identified (1993:3): (1) the ontology or essential nature of leadership, (2) the peripheral elements such as traits, personality, situations, goodness, and style, or (3) content (“what leaders need to know about a particular profession, organization, or society in order to be influential in it”). In short, responsible leadership provides an integrative view of leadership in the context of Covid-19 and suggests that effective leadership in a crisis is a result of a relational approach to leadership that integrates leaders’ personal traits and qualities, and a clear understanding of the complex leadership challenges posed by a global pandemic.

Examining political leaders’ behaviour during the Covid-19 pandemic, allows us to identify leadership qualities that help or hinder responsible leadership, and how these interact with situational factors to predict outcomes for stakeholders (Waldman & Balven, 2014). Specifically, the widely criticised leadership of US president Donald Trump and Brazil’s president Jair Bolsonaro during the pandemic serves as an important reminder: leaders’ personal faults and foibles that, under normal circumstances, may appear as mildly irritating eccentricities, can have truly disastrous consequences for stakeholders during a crisis. We regard these personal characteristics, which are generally recognized as problematic but emerge as extremely hazardous to stakeholders’ security and wellbeing during crisis, as fault lines of responsible leadership. In the present article, we explore two of these fault lines: narcissism and ideological rigidity. More specifically, we elaborate how narcissism and ideological rigidity undermine a leader’s ability to address the relational and ethical demands of leadership work, in particular empathetic concern for others, and how the unique situational pressures of a global pandemic dangerously amplify these problems.
Some leaders’ responses to the Covid-19 crisis, however, provide more positive insights. We contrast the pandemic leadership of Jacinda Ardern, Prime Minister of New Zealand, and Angela Merkel, chancellor of Germany, with that of Trump and Bolsonaro. Ardern’s and Merkel’s responses to Covid-19 point to compassion and evidence-based thinking and decision making as solid foundations for responsible leadership in crisis.

**Fault line 1: Narcissism**

The first fault line we examine emerges at the interface of self- and other-regard. In a crisis, leaders are confronted with urgent and diverse stakeholder demands and are pressured for rapid responses under high levels of uncertainty. Some leaders respond to these pressures with an excessive focus on satisfying their own needs, particularly their needs for social approval and sense of dominating control. Such narcissistic tendencies can shape crisis response in profound ways.

Narcissism is likely as old as leadership itself and is one of the most widely studied “dark sides of leadership” (Conger, 1990). The term stems from Greek mythology and depicts a young Narciss who was so full of love with himself that he eventually drowned in his own mirror image. The American Psychiatric Association defines narcissism as a disorder with the following main features: a person with “a grandiose sense of self-importance, who is preoccupied with fantasies of unlimited success, power, brilliance, believes that she is ‘special’, requires excessive admiration, has rather unreasonable expectations of favourable treatment or automatic compliance with their expectations, and lack of empathy.” (American Psychiatric Association, DSM 5).

Some studies have noted that narcissists can often exhibit functional leadership attitudes and behaviours – such as confidence, charismatic influence, and risk-taking – and have suggested that there may be a performance-optimal level of narcissism (Grijalva et al.)
2015; Maccoby, 2003). Many leadership scholars, however, have drawn attention to pervasive dysfunctional effects to personal attention and judgement when “leaders' actions are principally motivated by their own egomaniacal needs and beliefs, superseding the needs and interests of the constituents and institutions they lead” (Rosenthal and Pitinsky, 2006, p. 629). More recently, studies have documented the corrosive effect of narcissistic leaders on collaboration and integrity in their social context (O’Reilly et al. 2020). It is for these reasons that narcissism is a dangerous fault line of leadership, particularly crisis leadership. Two current cases in point are US president Donald Trump and his Brazilian counterpart Jair Bolsonaro, sometimes referred to as the “Trump of the tropics”.

Exceptionalism is a notorious challenge in leadership. Indeed, history is littered with examples of leaders who think that they are an exception to shared rules and values, and that the latter do not apply to them. The consequences of such exceptionalism are corruption and corrosion of character. Both Trump and Bolsonaro think of themselves as exceptional leaders. Indeed, under Trump the American presidency has become a blatantly egocentric business venture – an “unpresidency” (O’Toole, 2020); a reductionist enterprise whose primary purpose is to advance the leader’s own interests. Those unwilling to follow, will be belittled, mocked, or terminated. Trump’s ‘grandiose sense of self-importance’ is not limited to business interest though; in comparing himself to Abraham Lincoln he styles himself as one of the country’s greatest presidents. History for Trump only exists as “pseudo-history”, “in which the past exists only as a prelude to his own greatness” (O’Toole, 2020, p.2). It should come as no surprise, then, that according to the New York Times, a White House aide recently followed up on a conversation between Trump and the South Dakotan governor Kristi Noem in 2018 to inquire about the process to add additional presidents to the national monument at Mount Rushmore, which features Washington, Jefferson, Roosevelt and Lincoln (Martin & Haberman, 2020). Trump denied the inquiry on Twitter by saying: “Never
suggested it although, based on all the many things accomplished during the first 3 ½ years, perhaps more than any other Presidency, sounds like a good idea to me!” (Trump, Aug 10, 2020). Only someone with a distorted sense of reality and deeply ingrained fantasies of unlimited success, who believes he is “special” no matter what, will make such statements while presiding over more than 300,000 Covid-related deaths, more than 20% of the world’s infections, and the worst economic downturn in memory.

Trump’s inflated sense of self stands in stark contrast to his leadership achievements. Indeed, it can be argued that his narcissism has exacerbated the Covid-19 crisis in the United States by preventing a timely, concerted response. Put differently, narcissism has worked as a ‘fire accelerant’ during the crisis. In February, despite his awareness of the deadly risk the virus posed, Trump repeatedly issued false assurances ( “We’ve done a great job […] Everything is really under control.”, quoted in Watson, 2020), censored those officials who informed the public without his approval about likely community spread and disruptions to everyday life, and delayed the preparation and implementation of potentially unpopular mitigation measures (Lipton et al. 2020). As US cases multiplied and the death toll mounted, the president’s ‘egomaniacal needs and beliefs’ became more manifest. Instead of responding the unfolding crisis and the needs of his constituents with a national strategy, Trump stated that he would take no responsibility for the “Chinese virus” (Bruni, 2020), boasted about being No. 1 on Facebook, and lamented the fact that Dr. Anthony Fauci, the nation’s leading disease specialist, was better liked than him (CNBC, 2020). Trump increasingly side-lined or excluded health experts from his coronavirus press briefings, engaged in rhetorical contortions to demonstrate ‘success’ of his administration’s Covid-19 response, blamed the WHO, China, the Obama administration, governors and Democrats for the rising case numbers in the US (Qiu, 2020), and perpetually complained about the media treating him unfairly. On April 26, 2020, the New York Times published an analysis of Trump’s press
briefings on the crisis, the most recurring theme were self-congratulations on the handling of the crisis, 600 times in five weeks; concern for others or national unity occurred only 160 times (Peters, Plott & Haberman, 2020).

Underneath the inflated self of narcissists lies often a fractured personality, an “ego as delicate as foam” (Senior, 2020), and their frequent vindictiveness seeks to compensate for childhood experiences, or, as one may speculate in Trump’s case, the shadowy imprint of an unempathetic and psychologically abusive father (Karni & Rogers, 2020). In ordinary times, the consequences of such narcissistic leadership may be limited and the divisiveness it creates may be contained; in times of crisis, however, when projections of hope and unity are paramount, the fallout from Trump’s hyperbolic, self-referential performance creates chaos at best, and catastrophic conditions at worst.

Trump’s failures and narcissism are obvious and well documented. The narcissistic personality disorder of Jair Bolsonaro, president of Brazil, is less visible but arguably equally devastating. Like Trump, Bolsonaro has no respect for the constitution and openly flirts with right-wing extremism. An army captain turned far-right politician, he holds misogynistic, homophobic, and militaristic views of the world and at one point dismissed the virus as “a measly cold;” and when asked in late April about the rising death toll, he replied “So what? Sorry, but what do you want me to do?” (Londono, Andreoni, & Casado, 2020a). He declared that Brazilians were uniquely suited to deal with the pandemic because “God is Brazilian” and “because they can be dunked in raw sewage and don’t catch a thing”, and if they do, “some will die […], such is life” (Londono, Andreoni, & Casado, 2020b). Like Trump, he ignores key statistics and publicly ridicules quarantine measures.

The paths Donald Trump and Jair Bolsonaro have taken during the pandemic provide extreme examples of narcissistic leaders’ capriciousness and neediness. They show, however, that under the pressure of a crisis, narcissistic leaders will neglect the emotional needs and
concerns of stakeholders – a deficiency of relational intelligence that is highly consequential during a pandemic. As a result, narcissists are likely to be highly ineffective crisis leaders because they fail to steady fractured social ties and fail to motivate diverse stakeholders to a long-term crisis response and shared societal goals.

**Compassion**

Trump’s and Bolsonaro’s polarizing and careless communication with the public stand in stark contrast to the approach taken by Jacinda Ardern and Angela Merkel. Ardern, in her first address to the nation about her government’s pandemic response on March 21, not only communicated in a clear and honest manner, but translated her empathic concern for her fellow citizens in a pleading message of compassion and unity (2020a): “Please be strong, be kind, and unite against Covid-19.” Ardern adopted a ‘go hard and go early’ response to the pandemic, imposed a stringent nation-wide lockdown on March 26 and deployed a rigorous national effort for testing, contact tracing, quarantine measures, and public education and engagement (Jeffries et al., 2020). The prime minister regularly acknowledged the hardships and extraordinary restrictions on personal freedoms these policies would bring to New Zealanders. But she simultaneously stressed her determination to prevent the spread of a virus that threatened to cause “the greatest loss of New Zealander’ lives in our history” (Ardern, 2020b). Ardern’s compassionate leadership has resulted in “high public confidence and adherence to a suite of relatively burdensome pandemic-control measures” (Baker et al. 2020), effective elimination of the virus in New Zealand, and in overwhelming voter support and her subsequent victory in the national elections in October 2020.

Compassionate leadership plays a crucial role in times of crisis – be it in the public sphere or in organizations – when followers look for guidance, direction and hope. According to Frost (2003, pp. 24) the following characteristics are signs of compassionate behaviour:
reading emotional cues in oneself and others and anticipating their effects; empathizing with those who are suffering; listening to them with respect; acting to alleviate the suffering of others. During a crisis, the competent and disciplined performance of these behaviours are a crucial aspect of a leader’s relational intelligence. Like Jacinda Ardern, chancellor Angela Merkel has empathized with the struggles of her German compatriots in her first address to the nation about the pandemic: “Our idea of normality, of public life, social togetherness – all of this is being put to the test as never before. […] We all miss social encounters that we otherwise take for granted. Of course, each of us has many questions and concerns in a situation like this, about the days ahead.” (Merkel, 2020). It is on the basis of these identified shared hardships that she has asked all citizens to support the governments Covid-19 policies.

Researchers have stressed that compassion requires that we identify with the sufferer, that we empathize and believe in the possibility that we might suffer in similar ways (Cassell 2017). This provides a compelling explanation why narcissistic leaders struggle with compassionate behaviour: they resist with every fibre of their being the notion that they have anything in common with those who struggle, and that they themselves could ever get mired into hardship or pain. Bolsonaro’s pronouncement in November – when Brazil’s pandemic death-toll had exceeded 162,000 – that Brazil must stop being “a country of sissies” about the coronavirus because “all of us are going to die one day” (Farzan & Berger, 2020) provides an extreme example of narcissists’ inability (or unwillingness) to give consideration to others’ suffering.

During Covid-19 the sources of suffering are many, and create multiple, distinctive ‘communities of suffering’: those who personally experience the physical suffering from the disease or vicariously experience the suffering as loved ones experience the disease; those who fear for their own health or the health of loved ones; those who feel lonely or depressed.
due to isolation and lack of interaction with family and friends; those who have been affected by or are anxious about economic hardship as a result of the pandemic-induced downturn; and those are overwhelmed by simultaneous work-from-home and parental duties during lockdown. These diverse pains and fears call for leaders who can “defuse polarization” (Wuthrich & Ingleby, 2020) and send a message of unity and compassion – not just expressing compassion with those who suffer but appealing to them to be compassionate with others who suffer as well. Ardern’s appeal to New Zealanders as a ‘team of 5 million’ to save lives exemplifies the potential of compassionate leadership to make salient and strengthen social bonds during crises: “What we need from you, is support one another. Go home tonight and check in on your neighbours.” (Ardern, 2020b). Such mutual regard fosters a strong stakeholder culture and promotes socially responsible behaviour.

Jacinda Ardern’s Covid-19 response reflects a leadership approach the prime minister had already demonstrated during an earlier crisis. She led New Zealand through one of its darkest moments in history, when terrorists attacked two mosques in Christchurch during Friday Prayer on 15 March 2019 and killed 51 people. In an immediate response, Ardern addressed the nation with genuine empathy and compassion, offering “condolences and comfort to those affected both directly and indirectly by the attacks” (Blackwell, 2014, 14). She refused to use the name of the terrorist and assured the nation that these terrorist acts were violating the country’s inclusive values. In her speech she said about the victims, “They were New Zealanders. They are us. And because they are us, we, as a nation, mourn them” (Ardern, 2019). In these short sentences she acknowledged the wrongdoing of the attackers and the pain that the affected families and the whole nation was feeling. Her remarks created a sense of belonging for those suffering from loss and signalled to the nation that acting inclusively and with compassion toward others is the right thing to do. Uniting stakeholders through inclusive action and compassion became the hallmark of Ardern’s approach to
leadership, and she replicated this approach during the Covid-19 crisis. Instead of acting as a distant, aloof, and self-referential leader she connected directly and personally with the Muslim community by visiting mosques, talking to Muslim leaders and citizens of all ages. Moreover, she immediately focused on the most relevant questions and issues: “the extent of the attack, whether or not there were any wider safety issues for the police before I could go down there … and how quickly can I get there?” (Ardern, in Blackwell, 2020, 45). The purpose of her trip was to be “face to face with people who had lost loved ones and members of their community”, … be face to face with their grief, … reach out and embrace them too. It’s just who we are as humans.” (Ardern, in Blackwell, 2020, 47). Moreover, during her travels she borrowed a scarf to show the respect to the Muslim religious traditions.

The concerted effort she made – meeting face-to-face with those directly affected by the attacks, showing respect, real support, and love and compassion for the Muslim communities, resonated strongly with people. The power of her compassionate leadership style became visible in an encounter with a young Muslim boy:

“It was only days after the shooting and I visited a mosque on our capital. After spending some time with community leaders I exited and walked across the car park where members of the Muslim community were gathered. Out of the corners of my eye I saw a young boy gesture to me. He was shy, almost retreating towards a barrier, but he also had something he clearly wanted to say. I quickly crouched down next to him. He didn’t say his name or even say hello, he simply whispered, ‘Will I be safe now?’ What does it take for a child to feel safe? As adults, we are quick to make the practical changes that will enable us to say that such a horrific act could never happen again. And we did that. […] But when you are a child, fear is not discrete, and it cannot be removed through legislative acts or decrees from Parliament. Feeling safe means the absence of fear. Living free from racism, bullying and discrimination.
Feeling loved, included and able to be exactly as you are. And to feel truly safe, those conditions need to be universal. No matter who you are, no matter where you come from, no matter where you live. The young Muslim boy in Kilbirnie, New Zealand, wanted to know if I could grant him all of those things. My fear is, that as a leader of a proudly independent nation, this is one thing I cannot achieve alone. Not anymore.  
(Ardern, in Blackwell, 2020, 24-25)

Ardern not only showed understanding and compassion; she also realized the boundaries of her influence as an individual leader representing one nation, recognized the shared responsibilities of leaders in a connected world, but defined her space of meaningful action, namely in the face of limits, using the power of humanity by showing individualized recognition and compassion, stepping into the shoes of others, feeling accountable for their well-being, taking seriously the needs, feelings, interests and voices of all legitimate stakeholders (also those without a vote like children), and being accountable “so now, it’s our turn to stop and to listen” (Ardern, in Blackwell, 2020, 25).

In return, the nation mirrored this humane approach as Jacinda Ardern observed attentively: “in Aotearoa New Zealand, the people who lined up outside of mosques with flowers, the young people who gathered spontaneously in parks and open spaces in a show of solidarity, the thousands who stopped in silence to acknowledge the call to prayer seven days later, and the Muslim community who showed only love – these are the people who collectively decided that New Zealand would not be defined by an act of brutality and violence, but instead by compassion and empathy.” (Ardern, in Blackwell, 2020, 22)

Compassionate leaders make space for so called “human moments” (Frost, 2003; Hallowell, 1999), which make a huge difference in crisis situations. Human moments are when a leader is present for, and provides her full attention to, stakeholders, be these affected people in a tragedy or colleagues who show signs of distress during a crisis like Covid-19.
Attention should be both, intellectual and emotional; and presence must be physical (Hallowell, 1999). During isolation and lockdown, physical presence may be substituted by virtual presence (physical image and voice). According to Frost even a short “five-minute conversation can be a perfectly meaningful human moment” (2003, 22).

It cannot be overstated, how demanding it is for a leader to make space for human moments, and to be present for and attentive to those who suffer in a situation in which pressure on the leader is relentless. Even Pope Francis, who emphatically stated that “we must let ourselves be touched by others’ pain” to successfully chart our way out of the Covid-19 crisis, concedes that opening your mind and heart to the widespread conflict, suffering and need in the world around us can make us feel paralysed and overwhelmed (Pope Francis, 2020). Leaders who are able to shoulder this emotional and intellectual toll, and who marshal the necessary strength for compassionate leadership can have a profound impact on the wellbeing of those around them. Studies show that compassionate behaviour can have beneficial physical effects that can enable people to better cope with a demanding situation, develop resilience and bounce back (Frost, 2003). It can stimulate two neurotransmitters: “dopamine, which enhances attention and pleasure, and serotonin, which reduces fear and worry” (Hallowell, 1999, p.63). During human moments people also emit hormones such as oxytocin that foster trust and bonding; and experience reduction in blood levels of stress-related hormones such as cortisol (Frost, 2003; Hallowell, 1999). As a consequence, compassionate leadership can help followers to develop resilience, bounce back and regain control over their lives – whether in the aftermath of a terrorist attack, or during a pandemic crisis. It is for all these reasons that leaders need to translate empathy into compassion. Not to show compassion in crisis means not to be effective as a leader.
Fault line 2: Ideological Rigidity

The second fault line we address relates to political ideology and its relationship to evidence. Crisis typically challenge existing orthodoxies, and thus can prompt leaders to engage in efforts – often jointly with stakeholders – to adapt and update their worldviews. But they can also trigger a vigorous defence of existing beliefs, and attack on those who appear to threaten and undermine deeply held convictions. To be clear, having a coherent (political) ideology can have benefits as long as the values and beliefs are aligned to the values of an open and democratic society and as long such ideology is amenable to being guided by science and well-founded evidence. Hence, we are not ruling out the potential positive effects of ideological belief systems – researchers are divided about the role of ideology after all, leaning to view it either as insular dogmatism or political sophistication (Gerring, 1997).

Ideology represents “systems of belief that are elaborate, integrated, and coherent, that justify the exercise of power [and] set forth the interconnections (causal and moral) between politics and other spheres of activity” (McClosky, 1964, p. 362). In other words, ideology can unite and facilitate coordinated responses to complex problems across a society’s sectors and domains. But if it centres around pseudo-knowledge, extreme values, and divisive world views, it will polarize and paralyse in a diverse stakeholder society.

Well before taking public office, Donald Trump had been successfully attracting followers and supporters by embracing ideological convenient fiction and publicly questioning scientific facts. Indeed, he was a chief promoter of birtherism, expressed scepticism about vaccines, and suggested climate change was a hoax. Once in the White House, his administration wasted no time to weaken environmental regulation, rolling back controls on emissions and the use of pesticides, disbanded boards of experts, and marginalized key scientists (Friedman & Plumer, 2020). During the pandemic, Trump first weakened, then instrumentalized the once effective and well-funded Center for Disease
Control and Prevention (CDC) to fit his own worldview, and famously promoted chlorine dioxide, a bleach used in textile manufacturing, as a possible cure of Covid-19. According to The Guardian (Pilkington, 2020) this was no mere ad-lib: days before the announcement Mark Grenon dispatched a letter to Trump. Grenon is the self-proclaimed “archbishop” of Genesis II, “a Florida-based outfit that claims to be a church but which in fact is the largest producer and distributor of chlorine dioxide bleach as a “miracle cure” in the US. He brands the chemical as MMS, “miracle mineral solution”, and claims fraudulently that it can cure 99% of all illnesses including cancer, malaria, HIV/Aids as well as autism”. In the subsequent press briefing Trump went on the record by announcing to his own medical experts, and the informed public, that the disinfectant would “knock out the virus in a minute. One minute!” In all seriousness he then famously asked whether “there is a way we can do something, by an injection inside, or almost a cleaning?” (Pilkington, 2020).

Such public disregard for science and the concomitant belief in ‘quacks and grifters’ is not new in far-right conservative circles, but not exclusive to them. Far-leftist ideologies also have a storied history of espousing pseudo-science or suppressing dissenting scientists (see e.g., Graham 1993). Consistent at both ends of the political spectrum is the irresponsible instrumentalization of both quackery and science to support existing ideological commitments and claims to power. Highly selective, misleading information creates a ‘vector of cohesion’ among supporters and is meant to illustrate the courage, independence and ‘freedom of spirit’ of the leader (Da Empoli in Ricard & Medeiros, 2020). This accounts for seemingly contradictory public statements. For example, Trump promised that “we will achieve a victory over the virus by unleashing America’s scientific genius” when promoting his administration’s support for the development of vaccines and therapeutics (Trump, 2020) while also claiming that by ignoring advice from one of American’s ‘scientific geniuses’, Dr. Anthony Fauci, he had saved hundreds of thousands of Americans lives (Parker et al., 2020).
Instead of educating the public about the true health risks of the virus and building broad public commitment to a coordinated pandemic response, Trump played to the ideological predilection of a core group of supporters, nurturing biases, prejudices, paranoia and conspiracy theories, and actively undermined pandemic control efforts in the US. In late March, he pushed back against his own health experts’ advice to maintain guidelines that had closed down businesses and kept workers at home to slow the spread of the virus, and instead called for the US to reopen by Easter, musing that it would be “a beautiful time, a beautiful timeline” and that it would be great to “have packed churches all over our country” (Elder, 2020). Opposition to a rapid reopening of the economy, he suggested, was a political ploy by the mainstream media and Democrats to sabotage the economy in order to hurt his re-election prospects (Baird, 2020). In April, Trump openly encouraged protests and resistance against social distancing restrictions in states governed by political opponents (Shear & Mervosh, 2020). Bolsonaro, too, has demonstrated this proclivity to seize the Covid-19 crisis to pursue ideological feuds: in November, for example, he gloated on Facebook (“another victory for Jair Bolsonaro”) over the temporary suspension of a trial of a Chinese vaccine that had been championed by Sao-Paulo’s left-wing state governor who is expected to challenge Bolsonaro for the presidency in 2022 (Beaumont & Phillips, 2020).

Most presidents in living memory have risen to the challenge of uniting the country in the face of crisis by emphasizing shared values and principles. George W. Bush rose to the challenge after the 9/11 terror attacks, when he called for unity and a considered response: “We are in a fight for our principles, and our first responsibility is to live by them. No one should be singled out for unfair treatment or unkind words because of their ethnic background or religious faith” (Bush, 2001). Barack Obama intoned ‘Amazing Grace’ at the memorial service for victims of the racially motivated Charleston church shootings service in 2015. Jacinda Ardern has stressed unity in response to the Covid-19 crisis (“Together we
have an opportunity to contain the spread and prevent the worst. […] We're in this together and must unite against COVID-19.”, Ardern, 2020b), and so did Angela Merkel (“Since the Second World War, there has not been a challenge for our country in which action in a spirit of solidarity on our part was so important.”, Merkel, 2020).

Unity in suffering creates a pathway for hope, and it is the task of a leader to be the conduit for positive transformation amidst deep crisis. Such transformation requires ethical intelligence, in particular an ability to take a critical perspective on values, norms, and interests in oneself and in others to recognize tensions and dilemmas, and a moral imagination that helps solve these tensions and dilemmas (Maak & Pless 2006:106). Trump and Bolsonaro have demonstrated little ethical intelligence during the pandemic and have offered no path towards reconciliation of partisan differences and no principles that would allow for a balanced and inclusive political response to the crisis. Instead, they have demonized or belittled political opponents and critics, and have amplified ideological polarization through their statements and actions. As results, each ideological group regards the other with deep distrust, and regards out-group members as hypocritical, selfish, and closed-minded (Iyengar et al., 2019).

While liberals and conservatives may both discriminate against those who seem to violate their respective values, researchers have found that because liberals are more likely to espouse egalitarianism and universalism, they are less likely to discriminate than conservatives and more willing to question beliefs based on changing evidence (Pennycook et al., 2020). Conversely, conservative values, traditionalism, and closed-mindedness predicted more discrimination (Wetherell et al., 2013). Thus, even if scientific evidence is provided by experts who stay clear of partisan affiliations, many conservatives are not willing to question their ideological belief systems. Trump and Bolsonaro have coddled this closed-
mindedness on the political right by publicly ignoring or contradicting ideologically incongruous expert advice or outright disparaging experts’ character and judgement.

In a crisis, “ideological politics”, in which conflict is perpetuated and legitimized through an unrelenting stressing of ideological differences, must make way for an evidence-based, impact-focused pragmatic crisis response – “pragmatic politics”, as it were (Sartori, 1969, p. 399). Indeed, given that ideology is a values-laden set of beliefs pertaining to the modus vivendi and modus operandi of a group or collective, a crisis may call on leaders to adopt a “belief-less orientation” (Sartori, 1969). In other words, leadership in crisis requires a reflexive, decisive, but pragmatic response; one, that is not driven by partisan values but by an inclusive orientation.

Ideology, in all shapes and forms, can lead to closed-mindedness. A closed-minded leader stops evaluating relevant information based on its own intrinsic merits (Rokeach, 1960) and instead takes inspiration from an absolute authority – a god, the market, a miracle doctor, or an imaginary sage. Cognitive structures become dogmatic, reflective distance disappears, leadership becomes a mystical exercise, a ‘matter of faith’, where a matter-of-fact response is required. What remains, as in Trump’s and Bolsonaro’s case, is the mobilization of fellow believers, alienation of large groups of the population, and an erosion of trust between social groups. As the gulf between fact and fiction widens, creating common ground and alignment among stakeholder groups becomes ever more elusive, and ideology taints everything. Even face masks, which, as a matter of fact, are a simple way of self-protection and other-regard, become a symbol of ideological warfare.

Evidence-based decision making
The Covid-19 pandemic represents a challenge of unprecedented scope and scale to the world’s governments and scientific community. While the genetic code of the pathogen was
identified rapidly in January, and multiple vaccines have successfully concluded their human trials by the end of 2020, the origin of the disease, aspects of its transmission, immunity to the virus and other issues remain poorly understood. Similarly, evidence of the relative effectiveness (and psychological and economic side-effects) of public health interventions to suppress or eliminate the virus emerge as these measures are implemented around the globe. As many official statements have warned throughout 2020: the Covid-19 pandemic remains an ‘evolving situation’ – even as vaccines are successfully developed.

The pandemic makes clear that responsible leadership during a crisis requires sustained engagement with evidence to support ongoing learning and adaptation. The idea that leaders should ensure that policy and practice in their organizations and communities are informed by the best available evidence has gained currency in a number of fields, including public policy, health care, education, and even management (Davies & Nutley 2000; Pfeffer & Sutton, 2006). Commitment to systematically consider evidence from a variety of sources and evaluate it against consistent and objective criteria prevents a political model of evidence utilization, where selective evidence is brought into play by policy actors to defend predetermined positions, where it "becomes ammunition for the side that finds [it] congenial and supportive" (Weiss 1979: 429). While some early advocates of evidence-based policy and practice (EBP) promoted somewhat exclusive conceptions of evidence, more recently EBP initiatives have embraced the benefits of engaging multiple epistemic communities and paradigms.

Capacities at the individual, organizational, and community/system level can aid, or hinder evidence use and leadership – across levels – can act as a crucial enabler (Bowen & Zwi 2005). Leaders play a pivotal role in creating climates within groups, organizations and communities/systems that support and sustain EBP, e.g., by role-modelling EBP-relevant knowledge, skills, and attitudes; by giving rewards and status to experts and practitioners
who exemplify EBP; and by allocating resources to establish processes and structures for EBP (Aarons et al 2014). The visible championing of evidence-based decision-making is crucial, since insights derived with the approach may challenge the established order, prior commitments and assumptions, and even settled identities – the exact opposite of leadership approaches that aim for ideological reinforcement and consolidation.

The push for more utilization of available evidence also implies that leaders’ intelligence – in a logical-mathematical sense – by itself is not enough to ensure sound decision making. Responsible leaders understand that they cannot rely solely on intuitive insights and unwavering commitment to their personal beliefs but must acknowledge the limits of personal expertise in favour of shared agency. Indeed, EBP requires leaders to engage in a perpetual process of relearning and reappraisal of what works best across policy and practice domains. Leaders who embrace EBP therefore generally relinquish the role of “answer-giver in chief” (Leonard and Howitt, 2012: 51) and instead serve their organizations and communities by stimulating and facilitating dialogue and discourse among diverse stakeholders and making expert views accessible. As a recent editorial about research opportunities in the age of Covid-19 in Public Policy and Administration observed: “Where political leaders privilege control of the narrative truly science-based policy-making risks being compromised.” (Dunlop et al. 2020).

Germany’s chancellor Angela Merkel has been recognized as an example of EBP-focused leadership during the Covid-19 pandemic. While constitutional powers for the pandemic measures and regulations lay with the 16 federal states, Merkel took on the orchestrator role for regular exchanges among the heads of the state governments, advocated a science-based coordinated response across Germany, and followed the recommendations of German scientists when she cautioned state governments to not lift restrictions too early (Sauerbrey 2020; Kupferschmidt & Vogel 2020). Merkel’s federal government has convened
university medical departments into a single coronavirus task force and provided funding to establish processes and structures for systematic evaluation of action plans and diagnostic and treatment strategies from across Germany (Charite, 2020). Many credit Merkel’s science-background – she holds a PhD in chemistry – as the foundation for the diligence and systematic consultation with experts that characterized her decision-making style, long before the pandemic. Christian Drosten, head of virology at the Charite, Germany’s most renowned hospital, has worked closely with Merkel, and praised the chancellor as extremely well-informed, thoughtful, and capable of handling empirical data (Spinney, 2020). Others have observed that Merkel is “modelling the humble credibility of a scientist at work” and have remarked on her willingness to admit what she doesn’t know (Miller, 2020).

Notably, Merkel stressed the value of including the public in evidence-based decision making efforts during a crisis: “This is part of what open democracy is about: that we make political decisions transparent and explain them, that we justify and communicate our actions as best we can, so that people are able to understand them. I firmly believe that we will pass this test if all citizens genuinely see this as their task.” (emphasis in original, Merkel, 2020).

Jacinda Ardern, too, has promoted transparency and invited her citizens to engage in ongoing efforts to learn and adapt to the virus. Not only has her administration released extensive documentation about its pandemic response, including cabinet papers, briefing notes and deliberations overs various response options (Tingle, 2020:90), the prime minister also personally conducted a series of public conversations with experts and practitioners about mental health, supporting local businesses and other topics (Wilson, 2020).

Responsible leadership that aims to champion evidence-based decision making, also needs to actively challenge misinformation and science denialism. Judged by Brandolini’s bullshit asymmetry principle that “the amount of energy necessary to refute bullshit is an order of magnitude bigger than to produce it” (Williamson, 2006), this is a formidable task.
In the US and Brazil, fighting misinformation is not only challenging because its source is frequently the presidents themselves, but also because Trump’s and Bolsonaro’s well-established practice of labelling any politically inexpedient fact as ‘fake news’ renders the task to weed out actual ‘fake news’ during the pandemic particularly difficult. Efforts to correct misinformation and debunk myths are not without risk, as some science advocacy strategies can backfire and reinforce misconceptions. However, recent experimental evidence suggests that confronting false scientific claims, no matter how absurd, by providing robust facts and pointing out rhetorical strategies used by science deniers, is effective for mitigating the damaging influence on public opinion (Schmidt & Betsch, 2019). Hence, responsible leaders should engage in skilled and sustained efforts to distinguish fact from fiction and empirical insight from evidence-free speculation. They should bring together and hold together communities that collectively engage in complex sense-making and build and utilize a shared evidence-base to aid crisis response during the pandemic, and to contribute to creative societal rebuilding post-Covid-19.

While the advancement of EBP principles across diverse domains of policy and practice are heartening, many barriers remain and many questions about effective leadership for EBP require further study. Leaders who lack foundational EBP competencies – such as careful question formulation, evidence search and appraisal, and systematic outcome evaluation – and who have no inclination to develop them, may be less likely to see the benefits of the approach and may regard the development of such competencies in their organizations and communities as a threat to their personal influence and professional identity (Rousseau & Gunia 2016). Followers and stakeholders may even penalize leaders for disciplined pursuit of evidence-based decision making – politicians are frequently punished by voters for flip-flopping on policy issues. And the acceptance of different types of evidence and principles for evidence-based decision making may vary significantly across stakeholder
groups. Hence, engaging and involving the public across partisan lines in the pursuit for evidence-based policy and practice innovations may present substantial challenges.

Even when political leaders engage experts and utilize evidence to inform policy and practice, these partnerships can be highly dysfunctional. For example, Richard Horton, editor of the medical journal The Lancet, in his analysis of the Covid-19 pandemic response in the UK, severely criticizes scientists who served as government advisors for acting as a ‘public relations wing’ of the government when they publicly supported the government’s policy and claimed the country was doing well despite mounting evidence to the contrary. Dunlop’s (2014) research on diverse modes of collaboration between policy makers and experts and their respective benefits and pathologies can serve as a useful point of departure for responsible leaders, and leadership scholars, to explore creative strategies for building capacity for EBP in their organizations and communities.

**Implications for responsible leadership research and practice**

The Covid-19 pandemic has shown that some leaders rise to enormous challenges it presents, while others prove, to paraphrase Michelle Obama, that they cannot be who they need to be for their constituents. If a leader is principally motivated by egomaniacal needs and beliefs, then by default, the needs and interests of the constituents and institutions she leads will suffer.

The two narcissistic leaders’ crisis response we have discussed evidence a severe neglect of constituents’ emotional needs, and a failure to foster ties that bind social groups together and enable them to endure temporary hardships to prevent catastrophic loss of human life. In contrast, the examples of compassionate leadership we have considered show how instilling hope and creating human moments in affected communities helps establish the relational foundation for widespread support for pandemic control measures.
We have also highlighted that leaders must be willing step beyond rigid ideological positions to orchestrate an effective, large-scale response to an unprecedented global challenge. This requires the ability to deal with complex and evolving evidence. At a time of widespread anxiety, confusion, and fear, only through sustained efforts to distinguish fact from fiction, insight from sham, can leaders bring together communities that collectively engage in sense-making and remain resilient during a pandemic like Covid-19.

Our analysis of the two major fault lines of responsible leadership – narcissism and ideological rigidity – has multiple implications. We will point to the implications for leadership practice first, then touch on leadership teaching and development, and conclude with implications for leadership research.

The implications for the practice of leadership can be summarized as follows: less narcissism, more compassion; less ideology, more open-mindedness and integrative thinking. While this sounds straightforward enough, changing leadership practice may not be. Curbing narcissism through better scrutiny of a leader’s emotional make-up and nurturing critical followership are two important initial steps.

Moreover, leadership, like good governance, needs checks and balances. Not only should leaders tell the truth, but also demand from their stakeholders to speak truth to power, especially from those around them. A problem in higher offices and corporations alike has been that way too many executives surrounded themselves with yes-sayers, who are either colluding, or are afraid to speak up.

Interestingly enough, the “lucky” countries in the pandemic had female leaders who all took swift action, showed trust in science, and lead with warmth and compassion: Jacinda Ardern in New Zealand, Angela Merkel in Germany, Tsai Ing-wen in Taiwan, Mette Fredriksen in Denmark, Sanna Marin in Finland, Erna Solberg in Norway, and Karin Jakobsdottir in Iceland. This suggests that these female leaders stood out by being both
rational and emotionally competent, avoiding the fault lines outlined in this article (The New York Times, 2020). As citizen and followers, we need to be conscious of, and call for leaders, who show compassion and integrate the qualities outlined above.

It has also become clear that role-understanding and motivational drivers of leaders are critical. Effective leadership is not, and should not be, closed-minded advocacy of a leader’s favoured solution. Leaders must play a variety of roles as situations demand. Leadership is primarily about others, followers and stakeholders, and not about the leader and his or her interests. We have argued elsewhere that in an organizational context, leaders must have a conscious approach to the roles they adopt and model, and align duties as a citizen, servant, steward, and visionary, among others (Maak & Pless, 2006). The role that has emerged from the crisis as equally critical is that of the conductor or orchestrator of an effective crisis response: responsible and effective leadership in crisis is when leaders take action and ‘connect the dots’ through mirroring the complexity they face, think integratively, align experts and stakeholders, and orchestrate and mediate a systemic but compassionate response.

What are the implications for leadership teaching and development? The Covid-19 crisis has certainly highlighted the intellectual qualities we should expect from leaders: systemic thinking and the ability to mirror environmental complexity; reflective and critical thinking, and the ability to update one’s views when evidence changes; reasoning and ethical skills, and thus the ability to evaluate and judge one’s decisions in the context of the greater good. Hence, it is time to revisit the role of higher education in nurturing these qualities such that the foundations for reflective, relational, and responsible leadership are built. This means that we have to make sure that reflexive and epistemic learning are in balance (Dunlop & Radaelli, 2013) and that graduates have the ability to ‘liquify’ ideologies and that voice is encouraged.
Moreover, it is time to re-examine the state of leadership development and encourage “real-world learning” through programs which challenge participants to face challenges first-hand, whether these pertain to global pandemics, climate change, poverty, or inclusion. Service-learning is just one, and perhaps the most effective way, to nurture many of the above-mentioned abilities (see Pless, Maak, & Stahl, 2011).

Finally, as both the gaps and qualities of leadership in crisis become prominent and visible, we call on leadership researchers to contribute to evidence-based practice as well as theoretical contributions to responsible leadership in crisis. How do responsible leaders alleviate suffering with a view to build resilient communities (Tsui, 2019)? What are the forces that shape responsible leaders, their motivational drivers and epistemic imprints of their education? How can compassionate leadership become the norm rather than an exception? How, and why, are practices different in various cultural and institutional contexts? How can we nurture the more systemic and holistic qualities and overcome the myopic focus on the leader and bring the stakeholder and system view in? What are the implications for the acceptance and integration of multi-level research?

The global Covid-19 crisis has shown that leadership matters – but leadership must change to be effective and responsible in changing times. In crisis, a leader needs to “face up to reality” and with the help of the best minds decide what to do in the face of extreme circumstances (Lear, 2006). She must show confidence and compassion, and a commitment to evidence and values and translate those into radical hope – helping constituents to see that while our current state of being is unprecedented and disastrous, a post-Covid 19 world exists.

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Title:
The Fault Lines of Leadership: Lessons from the Global Covid-19 Crisis

Date:
2021

Citation:

Persistent Link:
http://hdl.handle.net/11343/258844

File Description:
Accepted version