The fit, the fat, and the sick leader: Exploring the relationship between leadership and health through the lens of embodiment

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Abstract

Over the past few decades, leadership studies research appears to have gradually warmed to the idea that the act of leading is not a purely cognitive, rational and disembodied act. Accordingly, management scholars have more systematically begun to look to the body to understand its significance in the study of leaders and leadership. My research continues this tradition by adopting the lens of embodiment to explore the relationship between leadership and health. In particular, I investigate three dimensions of leader embodiment - the fit body, the fat body, and the sick body – which I use as the basis with which to explore the ideal and 'less than ideal' body in organisational life. In creating these conceptual categories, I enable a nuanced account of how a leader's health (or its absence) may become an important signifier of leadership. My findings illustrate the temporal and contested nature of athleticism amongst organisation leaders and demonstrate the 'ordinariness' of leaders' bodies, being subject as they are to the same fleshly vicissitudes as all human bodies. I contextualise these findings within broader contemporary health and leadership discourses which tend to lionise the virtues of individuality, control, and self-management. This study contributes to the critical literature on embodiment and leadership, particularly the scholarship that has been concerned with the athleticisation of leadership, and also makes novel contributions to the study of stigma amongst organisational elites.

Declaration of Originality

This is to certify that:

I. the thesis comprises only my original work

II. due acknowledgement has been made in the text to all other material used

III. the thesis is less than 100,000 words in length, exclusive of tables, maps, bibliographies and appendices.

Signed: _____

Date: _____13/02/2019_____

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Chapter 1: Introduction

> *In writing this study of the body, I have become increasingly less sure of what the body is. (Turner, 1984)*

When Turner wrote these words in his seminal book, *The body and society,* he was referring to the many paradoxes that can confound those who attempt to study the body. As he went on to explain:

> *The body is at once the most solid, the most elusive, illusory, concrete, metaphorical, ever present and ever distant thing – a site, an instrument, an environment, a singularity and a multiplicity (Turner, 1984, p. 8).*

These paradoxes have not dissuaded thinkers across all manner of disciplines from ascribing meaning to the body, in addition to developing systems, categories, and philosophies with which to explain its centrality to the human experience. There is a particularly long tradition of the human body being interpreted as an important signifier and/or predictor of a person's 'intelligence, temperament, moral worth, and even future achievement' (Vertinsky, 2007, p. 293). In antiquity, it was the Greeks who first attempted to elevate the pseudoscience of *physiognomics,* which was rooted in the belief that the outward appearance of a person could 'reveal the true, inward character of a person or an entire nation' (Rohrbacher, 2010, p. 92), to the status of 'science' (Vertinsky, 2002). In more recent times, various 'scientific' movements have coalesced around the idea that character, morality and superiority can be gleaned from a person's physicality; from the fashion of 'somatotyping' (Sheldon, 1949), to the predictions of 'phrenology' (Cooter, 1984), to the heinousness of the eugenics movement, the sciences have long been implicated in the search to interpret human character from the body.

Organisation studies scholars are therefore traversing well-trodden (and often very dubious) ground when they adopt an embodied lens to interpret the significance of the body in leadership. Previous studies examining the relationship between the body and leadership have explored the relevance of physical characteristics and traits, including: height (Judge & Cable, 2004), weight (P. V. Roehling et al., 2014; P. V. Roehling et al., 2009), gender (Gatrell, 2013; Gatrell et al., 2017), sexuality (Harding et al., 2011); race (Ospina & Foldy, 2009); age (Riach & Cutcher, 2014), athletic prowess (Neck & Cooper, 2000; Neck et al., 2000), attractiveness

(Arvey et al., 2014), and disability (Roulstone & Williams, 2014). My research owes much to this work because it has brought the body to the forefront of the conversation where leadership studies is concerned, thereby challenging the disembodied, cognitive and rational approach to the study of leadership (Pullen & Vachhani, 2013). As Collinson (2014, p. 42) notes:

> *leadership studies have traditionally focused on leaders' minds to the neglect of their bodies, treating leadership as an inherently cerebral and disembodied process, concerned with decision-making, strategy, vision and (changing) "minds" (emphasis in original).*

More pertinently, however, it has been the exploration of embodiment by critical leadership scholars concerned with the examination of the body as the symbolic enactment of power and masculinity in organisations (e.g. Collinson, 2011; Knoppers, 2011; Knoppers & Anthonissen, 2005; Meriläinen et al., 2015) to which this thesis owes its greatest debt. As Alvesson and Spicer (2012, p. 373) observe, 'Critical studies try to denaturalize leadership (by showing it is the outcome of an ongoing process of social construction and negotiation)'. I have been influenced by this thinking to create an account of the body in leadership which ultimately lies at the intersection of health, embodiment and leadership discourses.

Whilst health has not been a particularly central focus of leadership studies, numerous critical scholars have noted how exuding a healthy visage and engaging in practices associated with health and fitness, has become an important part of managing one's identity as a 'leader' (Johansson et al., 2017) . As McDowell-Larsen et al. (2002, p. 323) suggest:

> *Maintaining a regular fitness program can most likely help the executive to sustain the vigor necessary to meet the demands of the job, to raise the perception of leadership effectiveness in the eyes of their observers, and to preserve their health in the process.*

This reflects a broader societal trend in which the cultivation of one's health and fitness and the optimisation of bodily knowledge has become a core component of modern identity (Lupton, 2013b). For those in senior leadership positions, the ability to exercise mastery over one's body is also associated with the traditionally gendered markers of leadership potency such as discipline and control (Harding, 2003). Athleticism in leadership has received a significant amount of attention in embodiment-centric management studies, with critical scholars particularly keen to highlight the potential problems of normalising unrealistic body standards for leaders (Johansson et al., 2017; Knoppers & Anthonissen, 2005; Sinclair, 2005b; Thanem,

2013). In this literature, the emphasis has been in identifying and foreshadowing the potential negative impacts of normalising athletic ideals in the workplace, and the exclusory nature of such masculinised forms of embodiment (Clayton & Humberstone, 2006; Costas et al., 2016).

I have sought to build on this thinking and provide a nuanced account of the body that recognises the advantage that occupying particular bodies and engaging in specific body practices may confer on those in senior leadership positions. However, I also recognise the leader's body as a site of potential 'ordinariness', being subject as it is, to the same fleshy vicissitudes that all bodies are: leaders' bodies are also prone to illness or may become fat. While these are not issues that are solely the preserve of the lowly worker, in matters of health and wellbeing, leaders are largely absent from the research frame where the 'less than ideal' body is concerned (for exceptions, see discussions of the 'maternal body' in Gatrell, 2013, Gatrell et al., 2017). Therefore, I suggest there has been somewhat of a collective failure of imagination when it comes to conceptualising the leader's body as an object that may also become vulnerable in the face of a 'healthist' agenda (Crawford, 1980). More than simply bolstering their status as elite members of society, it may also be that leaders too experience themselves as powerless when their bodies threaten to undermine the idealised representations of leadership – ideals that have remained stubbornly wedded to notions of heroic individualism (Collinson & Tourish, 2015).

1.1 Aim and Scope of Study

In this study, I critically explore the relationship between leadership, embodiment and health through an examination of the following research question:

> *How do leaders make sense of the relationship between leadership and health, and what do the shared meanings made of the 'ideal' and 'less than ideal' body reveal about the norms governing leader embodiment?*

To investigate this question, I assume a qualitative, interpretivist perspective and draw from critical leadership studies (Collinson, 2011) to develop a critique of leaders' bodies as sites of power (and powerlessness) in organisations. Methodologically, I employ a single case study design to study a cohort of executives from NetCom[1], a large organisation operating within the information and communications technology (ICT) sector in Australia. Through interviews

[1] NetCom is a pseudonym adopted to ensure the anonymity of the participant organisation.

with participants, I discuss their understanding and experience of health and fitness, in addition to the challenges they face to their personal health and wellbeing.

The analysis broadly covers the following areas as it relates to leader embodiment: fitness, fatness, and sickness. My research findings coalesce around a thematic of the idealised, self-managed body and its intersection with contemporary health and leadership discourses, which champion personal agency and arguably diminish the permissible expression of embodied vulnerability (Wainwright & Turner, 2003). Fatness and sickness are presented here as an alternative, lived reality of leader embodiment, one that poses a particular incongruity for both heroic and post-heroic leadership discourses which continue to make assumptions about the bodily mastery associated with the fit (or athletic) body.

Through the course of undertaking this research, it became apparent that there were numerous ways that one could make sense of the relationships between health, embodiment, and leadership. The decision to focus on these three dimensions (i.e. fitness, fatness, and sickness) reflects a conscious choice to pay attention to the data patterns that were most repetitive and compelling, and provided a foundation to challenge the assumptions of existing theoretical knowledge (Alvesson & Sandberg, 2011). Needless to say, this necessitated closing the door on many tantalisingly rich avenues of exploration, therefore, this thesis does not explore issues such as ageing or disability in any detail. In the study that follows, then, I turn my attention to the shared meanings made of the 'ideal' and 'less than ideal' body within the specific contexts noted above.

1.2 Thesis Overview

Chapter 2 reviews the extant theory that has formed the basis for the exploration and analysis of this thesis. I begin with an overview of the sociological perspectives of the body and health, including the shift towards individualistic constructions of 'wellness', and note that there is scope to explore the relationship between the apparent rise of the athletic leader and the shifts that have occurred within the broader health paradigm. I introduce a typology of literature that forms part of the 'embodied leadership' domain, that is, literature in which the body is placed at the forefront of leadership research. I argue that whilst some critical literature has begun to illustrate the problematic nature of promoting athletic ideals (P. Kelly et al., 2007), there is currently very little understanding of how fitness is constructed within senior leadership cultures beyond the domain of the professions and the discourses of professional identity management. I discuss the persistent romanticisation of leaders and leadership (Meindl et al.,

1985) and the failure of post-heroic discourses to undo the mythology that surrounds leadership. I also note how tropes such as 'corporate athleticism' accord not only with contemporary societal views of health, but also reinforce beliefs regarding heroic individualism, particularly traditional leadership characteristics such as strength, control, and self-management. Finally, I review the nascent literature that has discussed the 'less than ideal' bodies of leaders - in particular, the overweight/obese and the sick – and note that the extant literature has thus far not adequately addressed the experience of leaders who occupy such bodies.

Chapter 3 details the research methodology and introduces the research question that is the basis for this thesis. I outline the epistemological and theoretical perspectives that frame the study, noting the influence of critical leadership studies in helping to formulate a critique of the normative assumptions of embodiment in leadership research. I articulate how I engaged reflexively with the data, noting the importance of my own embodied subjectivities as part of the sensemaking process. I discuss the research design, data gathering and analytic processes that have led to the development of the research question that underpins this study.

Chapters 4-7 contains the findings from the empirical data with each chapter incorporating a discrete discussion section. Chapter 4 provides a broad insight into the perceptions about NetCom's executive health culture, including the disconnection between the organisational rhetoric of health and wellbeing and the lived reality for leaders. I pay particular attention to the doctrine of personal responsibility which appeared to inform the organisation's approach to leader wellbeing. I note the centrality of the self-managed body to the 'ideal worker' construct and discuss the constraints this ideal may impose upon a leader's willingness to express their embodied vulnerabilities.

In Chapter 5 I discuss how discourses and practices of the fit body were adopted by NetCom executives and how these informed the perceived relationship between fitness and leadership. My research suggests that the language of health and fitness was deeply entwined with the embodiment of leadership, and I discuss the way in which displays of 'energy' and the virtues of 'energy management' may be interpreted as an important signifier of leader identity. My findings also reflect a novel interpretation of the fit body within NetCom, which argues for a more contextually embedded understanding of athleticism in organisational leadership; one that recognises cultural distinctions and refrains from the temptation to depict the idealisation of fitness as a static, incontestable phenomenon. Further, I discuss NetCom's (sub)cultures of athleticism as environments which both mimic the masculinised tribalism of corporate life but also provide opportunities for the expression of embodied vulnerability amongst participants.

Chapter 6 discusses how NetCom leaders both affirmed the biases associated with bodyweight and leadership, and gave voice to the struggle of occupying a body perceived as fat. Drawing from Goffman's (1963) work on stigma, I suggest that fatness is experienced as stigmatising by leaders because, in addition to being socially frowned upon, it also contravenes the mythologies associated with the leadership body, especially the assumptions of masculinity and bodily control. I contend that the stigmatisation propagated *and* experienced by NetCom leaders was based in a mismatch between normative expectations of leader embodiment and the social biases regarding the overweight and obese. In this sense, I suggest the fat body offers a useful counterpoint to the athleticised body in a leader; where the latter can be viewed as upholding the norms of personal responsibility and individual control, while the former depicts the lived ordinariness of leader corporeality.

In Chapter 7, I discuss the experiences and perceptions of NetCom executives as it pertains the sick body. In the first instance, I show how illness was commonly viewed as an expression of weakness that called into question the competency of leaders to manage themselves and, therefore, their organisations. I note how executives may become targets of a 'spoiled' leader identity because of their illness and how the sick body (like its fat-bodied counterpart) threatens the accepted norms of leader embodiment. I illustrate how some executives engaged in 'passing' behaviours, designed to disguise their bodily impairments and minimise the potential for stigmatisation. I also discuss the ways that NetCom executives renegotiate their sick bodies in the workplace, noting the perceived opportunities and constraints to embodying alternative modes of leading.

In Chapter 8, I bring the findings of my research together into an overarching discussion, before considering the contributions and limitations of the study and some reflections about the research process.

1.3 Contributions

In this study, I have adopted the analytic lens of embodiment to explore the relationship between health and leadership, and in so doing I have made a number of theoretical and practical contributions to research in this domain. Firstly, in creating a typology of 'embodied leadership' literature (see Chapter 2.2) I have synthesised the relevant extant research and thereby created a useful framework for future academic research. Whilst being strongly informed by previous scholarship (A. D. Brown & Coupland, 2015; Coupland, 2015; Johansson et al., 2017;

Knoppers & Anthonissen, 2005) this study contributes to this body of knowledge through the development of three core conceptual categories of leader health – the fit, the fat, and the sick body. In articulating these dimensions, I have extended the remit of existing critical enquiry into the relationship between embodiment, leadership and health.

The principal analytic critique of athleticism in leadership has focussed on the reification of masculine bodies and, therefore, its potential to create normalising standards that are exclusory (Johansson et al., 2017; Meriläinen et al., 2015). My research contributes to this literature by exploring leader resistance in taking up athletic identities, by identifying the role of energy as an embodied marker of leader identity, and through an examination of athletic cultures as refuges for increasingly contested workplace masculinities. Further, in arguing that athleticism in leadership may be a temporal phenomenon open to organisational contestation, this research contributes to the discourses on the politics of resistance as it relates to neoliberal managerialism in the area of workplace health (Johansson et al., 2017; Thanem, 2009). This study also expands on previous work that has alluded to the importance of 'energy' as an identity marker for leaders (Jackall, 1988; Meriläinen et al., 2015) by exploring the theoretical connection between energy and trait-based theories of leadership (Bass & Bass, 2008), and the popularisation of theories of 'energy management' (Loehr & Schwartz, 2001) within leadership studies.

The conceptualisation of the fat and sick body are original contributions to the domain of embodied leadership, and add to a growing critical leadership studies' focus on interrogating the constraints of leader power in organisations (Ekman, 2014; Jackall, 1988; Meriläinen et al., 2015; Spicer et al., 2016). In identifying the ordinariness of the leader's body, this research also makes a broader contribution to the more recent scholarly efforts to humanise leadership (Antonacopoulou & Bento, 2018; Byrne et al., 2018; Petriglieri & Petriglieri, 2015), helping to reimagine leader embodiment beyond the domain of the individualistic, masculinised and heroic. This study also adds to the limited attention that has been given to the role of leader embodiment in the construction of the 'ideal worker', particularly the way in which the leader's self-managed body is assumed in construction of an 'ideal worker' identity.

Finally, this study makes an important contribution to stigma theory in leadership studies, extending the work of small number of management scholars who have previously applied stigma theory to elite organisational members (e.g. Sutton & Callahan, 1987; Wiesenfeld et al., 2008), albeit in non-health contexts. In addition, my research contributes to a more contestable understanding of the relationship between power and stigma in leadership

studies, and broadens Goffman's (1963/1991) work on spoiled identities by creating the conceptual category of a spoiled 'leader' identity. This is a significant contribution to the literature on stigma and leadership, one that captures the fraught nature of occupying 'less than ideal' bodies due to illness, or simply failing to adhere to the bodily standards expected of those in positions of power.

Chapter 2: Organising the Body

In this chapter I provide an overview of the extant literature exploring the intersection of leadership, health and embodiment. In the first section, I review the various analytic frames that sociology has applied to the study of bodies and outline the shift that has occurred in the way that health (and illness) has been socially constructed. In the second section, I discuss the way leaders' bodies have been considered in organisation studies literature to date. I introduce a typology to categorise this work and note some of the limitations of the research. I then move onto a discussion about the mythology surrounding leadership, focussing on how certain myths have been pertinent to the construction of dominant imagery of leaders' bodies. The third section of this chapter is concerned with idealisation of leaders' bodies, particularly the emergence of athleticism as a valid leader identity. Finally, I discuss leaders' bodies that may be deemed as falling short of the bodily standards expected of those in senior leadership positions. I examine the limited literature exploring overweight/obese and sick leaders, and what this research has revealed about the potential for a leader's body to become stigmatised. I conclude by noting some of the opportunities that exist to further explore the embodied dimension of leadership, particularly as it pertains to the bodies of the fit, the fat and the sick.

2.1 Sociological Perspectives of the Body and Health

2.1.1 An Assemblage of Theoretical Frames

The publishing of the *Routledge Handbook of Body Studies* (2012) serves as a useful indicator of just how mainstream body-centric research has become within the social sciences. Shilling's (1993/2012, p. 12) observation that the body had become an 'absent presence' in classic sociology was in part a response to the discipline's 'implicit rather than explicit' rendering of the body; that is, a failure to take into account 'the fact that we have fleshy bodies that allow us to taste, smell, touch and exchange bodily fluids.' To some extent this omission has been addressed by contemporary interpretations of the body from diverse perspectives, including: critical theory, feminist and queer theory, postmodernism, and poststructuralism, which have all challenged conventional epistemological thinking about the role of body in society (Turner, 2012).

These theoretical frames have problematised the body through an examination of its sociocultural construction, bringing into sharp focus the limitations of biological metaphors and essentialist perspectives (Dale & Burrell, 2000). Feminist theory, in particular, has strongly influenced contemporary thinking about the body, and has challenged society's notions of biological fixedness in exchange for a socially constructed, fluid and evolving body (Butler, 1993; Grosz, 1994). But this literature is also not without its critics and has been accused of surrendering materiality to discourse, creating a body that becomes the textual object of postmodernism, and sparking a call for the body to 'return from its dissociative absence' (Casey, 2000, p. 67)

Michel Foucault has become one of the most influential thinkers on the body in contemporary social theory and is often the repository for criticism about its 'discursive turn' (Shilling, 1993/2012). Such a view tends to be rooted in an analysis of Foucault's (1979a, 1979b, 1981) earlier work, which focuses on the governmental management of the body, but generally disregards his later writings, especially the *Technologies of the Self* (1988), where the body becomes a site for self-care and ethical work. A more inclusive reading of the Foucauldian body can be found in Crossley's (1994) complementary analysis of the bodies of Foucault and Merleau-Ponty, two French philosophers who are usually considered as harbouring oppositional theoretical ground where the body is concerned.

S. J. Williams and Bendelow (1998, p. 51) suggest that 'of all the figures in the history of western thought, it is perhaps the philosopher Maurice Merleau-Ponty who has done the most to overturn the Cartesian dualist legacies of the past', by bringing the body to prominence in sociology. As a phenomenologist, he articulated the native intelligence that resides in the 'lived experience' of the body and, much like modern cognitive science (Wilson & Golonka, 2013), suggested there is a situated, pre-reflective experience with which one engages in the world that cannot be always explained by intellectual thought (Merleau-Ponty, 1962).

Bourdieu's (1977, 1984, 1990; Bourdieu & Wacquant, 1992) work is also increasingly being adopted by scholars attracted to his ontological perspective of embodied knowledge: 'What is 'learned by body' is not something that one has, like knowledge that can be brandished, but something that one is' (Bourdieu, 1990, p. 73). In particular, it is Bourdieu's concept of *habitus,* with its emphasis on understanding the way the body is integral in shaping the 'patterns of activity… constantly reproduced by people in a non-reflective way' (Burkitt, 1994, p. 20), that has provided fertile ground for sociology to explore the role of the body in society. However, working with Bourdieu's habitus is also problematic, primarily because it has been

interpreted as being unnecessarily restrictive and unable to account for individual agency (Crossley, 2013).

Shilling (2008, p. 3), one of sociology's most preeminent contemporary body scholars, has also been concerned by the limitations imposed by the 'reproductive logic' of Bourdieu. Further, he has argued that phenomenology's focus on the 'lived body' often disregards the context in which an individual actually experiences their own embodiment, overlooking 'how structures sometimes shape our physical dispositions' (Shilling, 1993/2012, p. 245). As a way of navigating between the either/or poles of an individualistic or socially inscribed body, Shilling (1993/2012, 2008) has turned to the work of pragmatists, especially John Dewey, G.H. Mead and Charles Peirce. By focusing on actors' day-to-day interactions with the social and physical world, his (embodied) reading of pragmatism attempts to ameliorate the temptation to view bodies as either passive receptacles being acted upon, or as sources of limitless agentic power regardless of context (Shilling, 2008).

If sociology's diverse exploration of embodiment has offered any valuable insights to management scholars, it is that there is no shortage of theoretical approaches with which to organise the body: it may be considered as both subject and object, individualistic and social, agentic and compliant, lived and theoretical, abjected and exalted, and of course, all that lies in between these. Whichever theoretic lens is chosen, it is not possible to ignore the fleshy reality that bodies are not above the laws of entropy; bodies are ultimately unpredictable, and their efficient performance cannot always be relied upon (Nettleton, 2006). This is a truth that has often been overlooked in studies of leadership, in which the construction of leaders as 'brains without bodies' has helped to elevate leaders 'as beyond the bodily matter than constitutes them' (Sinclair, 2005b, p. 402). This research aims to bring the vicissitudes of a leader's embodiment to the fore of leadership studies, and with it, a comprehension that leaders too are subject to the prevailing discourses and practices of contemporary health management, particularly the desire for mastery over one's embodied domain.

2.1.2 From Sickness to Wellness: Changing Perspectives of Health

Health discourses have shifted dramatically in western, post-industrial societies. The movement from the 'sick role' (Parsons, 1951/1991) in which health was embedded in a set of social rights and responsibilities, to a late twentieth century focus on individualistic notions of health, has been well documented by numerous scholars (e.g. Frank, 2013; Shilling, 1993/2012; White, 1991). Becoming sick, Parsons' suggested, was not merely a matter of one's individual

biology, but was also imbued with a consensual set of rights and responsibilities governing the relationship between the sickly and society. The ill had the right to be exempted from performing regular duties until they have returned to adequate health and they could not be 'held responsible' for their condition (Parsons, 1951/1991, p. 212). In return, however, they had an obligation to seek professional help for their malady and must exhibit a desire to become well again (S. J. Williams, 2005, p. 124).

Shilling (2002) suggests that it was Parsons who first foreshadowed the increasing emphasis on understanding (and now quantifying) the relationship between sickness and productivity. Sickness was no longer simply a phenomenon affecting individual organisms; rather it became equated with dysfunction for the entire social system, undermining as it does 'the cultural value placed on productive capacity' (p.623). Drawing from Parsons' (1978) work in *Action Theory and the Human Condition*, Shilling (2008, p. 106) argues that Parsons' demonstrated how 'metaphors regarding moral culpability were institutionalised into this sick role', and how the Protestant work ethic 'exerted enduring influence over the obligations that must be discharged by the ill if they are to avoid being stigmatised by society.'

Frank (1991) argues that toward the end of twentieth century, and in keeping with a broader movement towards a culture of individualisation, a shift in emphasis occurred from the 'sick role' to the 'health role'. In this new age of health, patients have been transformed into consumers and societal issues of wellbeing are largely transferred onto the corpus of the individual (P. Kelly et al., 2007). Correspondingly, there was a move away from seeing illness as a deviation from the norm and a focussing on the '*maximising* of people's productive capacities and the *prevention* of illness' (Shilling, 2008, p. 106, emphasis in original). The 'doctrine of personal responsibility' for health was born, and as its first advocate, John H. Knowles, argued the time for society paying for the ills of the individual was up:

> *The cost of sloth, gluttony, alcoholic intemperance, reckless driving, sexual frenzy, and smoking is now a national, not an individual responsibility. This is justified as individual freedom—but one man's freedom in health is another man's shackle in taxes and insurance premiums" (Knowles, 1997, in Leichter, 2003, p. 616)*

This shift from social to individual responsibility has meant that where once the management of personal health was perceived as narcissistic self-absorption, it has now 'achieved unparalleled ethical salience' (Rose, 2007a, p. 21). Technological advances have enabled the emergence of a 'quantified self' (Swan, 2013), in which one's most intimate bodily

workings have become available for monitoring and modification. Personal monitoring devices, mobile applications and web services are helping keep track of people's bodily states in an unprecedented scale (Kratzke & Cox, 2012). Biometric data of sleep patterns, heart rates, blood glucose, and breathing patterns are now easily available to consumers through the use of mobile and wearable digital devices such as Fitbits, Garmin and the Apple Watch.

Lupton (2013b) notes that despite the growing literature on health-tracking technologies, there have been very few critical analyses of the impact of these technologies on peoples' experience and perceptions of health. For instance, the ease of access to bodily information heightens individual appetite for increased bodily control over the material form, helping to create the impression that such knowledge 'offers a means by which illness and disease may be prevented' (p. 396). In such an environment, there are fewer excuses for individuals to fall foul of these normative standards, especially those with the resources at their disposal to access such knowledge and technology. A culture dedicated to 'wellbeing' and overcoming biological limitations, carries implicit expectations of fitness and that all individuals should strive to be their best possible healthy selves (Kelan, 2013). Lupton (2012, p. 240) suggests, the individuals that fail to take up the required self-management practices:

> *may be constructed as failing to achieve this ideal and as consequently at fault for becoming ill or contracting a disease. Moral meanings are strongly associated with this apparent lack of self-care and self-management of health risk.*

The intensifying preoccupation of affluent societies with bodily 'self-care' has been the subject of scholars researching social responses to the process of ageing (Ainsworth & Hardy, 2009). Thomas et al. (2014, p. 1575) note that there is a 'strong moral undertone to the productive ageing discourse, associated with discipline, control over excess, and selfless dedication to maintaining a youthful and fit body.' Senior organisational leaders, who exemplify the privilege of the managerial classes, have not been untouched by this discourse; in fact, the perpetual battle to stay youthful, energetic and healthy has become part of the corporate leader's impression management arsenal.

For example, when the former CEO of one of Australia's largest banks, Gail Kelly, announced her retirement in 2014, she was quick to declare that she would not be putting her feet up at home and that she was still 'full of energy'(G. Kelly, 2014, para. 31). Arguably, she was keen to dispel any association that her retirement might have had anything to do with surrendering to the biology of her ageing body. This type of discourse reflects the degree of

pressure that is commonly placed on the ageing individual to take 'personal responsibility for their own health, lifestyle and well-being' (Thomas et al., 2014, p. 1574). There is also an important class dimension to these discourses, a factor noted by Shilling (1993/2012) when he suggests that, unlike the working classes, 'members of the middle class often believe they have more control over their own health – control which can be exercised by choosing appropriate 'lifestyles'' (emphasis in original). This is an important reflection for those exploring issues of leader embodiment, because it suggests that whilst leaders - who usually belong to the middle and upper classes of society - occupy positions of privilege and power, they are not immune to the social pressures associated with conforming to the expectations of body mastery.

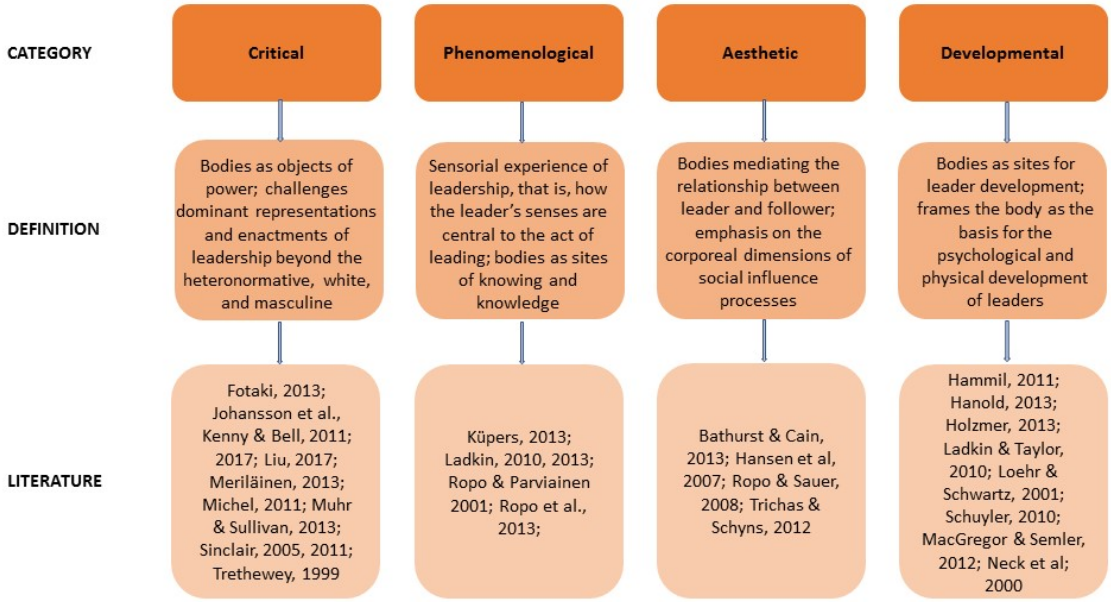
2.2 Bodies & Leadership

2.2.1 Locating the Leader's Body

Historically, the physical body has tended to retain an implicit status in much leadership research; whether it is discussing the implications of stress and burnout, or issues of race, gender, sexuality and ageing, leader corporeality has usually been implied rather than systematically investigated (Hassard et al., 2000). Over the last two decades, however, research exploring the role of the body in leadership has shown greater prominence in management literature (e.g. Ladkin, 2013; Ropo et al., 2013; Sinclair, 2011). The extant literature on the body in leadership studies can be broadly categorised into four dominant perspectives; critical, phenomenological, aesthetic, and developmental (see Figure 1).

The critical literature is primarily concerned with understanding leaders' bodies as objects of power in organisations, and seeks to challenge dominant representations and enactments of leadership beyond the heteronormative, white, and masculine (Fotaki, 2013; Kenny & Bell, 2011; Liu, 2017; Meriläinen et al., 2015; Simpson et al., 2014; Sinclair, 2005a, 2005b; Trethewey, 1999). Conversely, phenomenological research is focussed on the sensorial experience of leadership, that is, how the leader's senses are central to the act of leading. Bodies in this literature provide an alternative conception of leadership, moving away from its cognitive dimensions and viewing the body as a source of knowledge and knowing (Küpers, 2013; Ladkin, 2013; Ropo & Parviainen, 2001).

Figure 1: Typology of extant embodied leadership literature



Whilst also focussed on the sensorial aspects of the body, the aesthetic leadership research is generally more concerned with the body's role in mediating the relationship between leaders and followers. Whether it is through the study of gesture, height, facial expressions or other embodied means of communication, this literature tends to emphasise the corporeal dimensions of social influence processes (Bathurst & Cain, 2013; Fotaki & Metcalfe, 2014; Hansen et al., 2007; Trichas & Schyns, 2012), as well as how the body is embedded in existing constructs such as charismatic and transformational leadership (Behnke, 1997; Ropo & Sauer, 2008). The final perspective consists of developmental literature that is primarily interested in adopting theories of embodiment for normative ends, principally the enhancement of a leader's psychological and physical capacity. The focus here is weighted towards co-opting the body's intelligence to engage the reflective capacity of leaders (Behnke, 1997; Ladkin & Taylor, 2010; Ropo & Sauer, 2008; Schuyler, 2010), or to harness its physiological attributes in the service of leadership (Loehr & Schwartz, 2001; Neck & Cooper, 2000).

The typology identified above is representational rather than definitive. Embodiment literature, much like the body itself, does not so easily lend itself to discrete compartmentalisation. What I have attempted to do, however, is to define the broad characteristics of the extant literature associated with the body in leadership studies and

synthesise its differing assumptions about how leaders' bodies are 'both shaped and constrained by social factors, while being amenable to human agency' (Waring & Waring, 2009, p. 348).

Critical literature has tended to emphasise the way leaders' bodies are codified and constrained by social forces, and how this has idealised some bodies to the exclusion of others - particularly those that are not white, male or heterosexual. Therefore, leader agency usually takes a back seat to the critique of structural forces of society and organisations, which are viewed as ultimately responsible for the regulation and disciplining of bodies (Michel, 2011). This literature has made important inroads in its interrogation of the 'othered' leadership body, particularly the 'maternal bodies of women' (Gatrell, 2013; Gatrell et al., 2017) and does encompass some critique of the discourses and practices of athleticism (Johansson et al., 2017; Meriläinen et al., 2015; Sinclair, 2005b). However, the focus has largely remained on the bodies of the 'well' (Gherardi et al., 2013), so very little attention has been paid to leaders' bodies that succumb to illness or whose bodyweight challenges the aesthetic norm expected of those in corporate leadership positions.

The phenomenological, aesthetic and developmental literatures tend to view the leadership body through a lens of opportunity rather than exclusion, and generally position the individual as the ultimate agentic force. Often, the underlying assumption of this literature is that an improved understanding of one's embodiment is likely to be beneficial to leaders and organisations (Hamill, 2011). This is particularly true of the developmental literature where, for example, paying closer attention to the body is said to encourage 'a more thoughtful, critical, self-awareness that ultimately leads to more inclusive leadership' (Hanold, 2013, p. 91). At the individual level, scholars have also argued that incorporating 'embodied perspectives' can support leaders in their identity work:

> *An approach that incorporates embodied perspectives will support leaders becoming more conscious of the multifaceted nature of their own identity, how that identity is performed, and what that identity represents to others in an organizational setting (Holzmer, 2013, p. 55).*

In the enthusiasm to embrace an alternative to functionalist and cognitive-centric perspectives of leadership, this literature exhibits an idealism which often lionises the body. This instrumental use of corporeality often divorces the leader's body from her social context, treating it as a source of personal identity work, not simply for individual benefit but also in the service of greater organisational goals. Pursuing such an individualistic reading of leader embodiment is problematic because it tends to replicate a romanticised view of leadership, one

in which leaders are viewed as the primary actors' responsible for organisational success (Collinson & Tourish, 2015). Rather than offering an alternative conception of leadership, the result can be a reification of traditional leadership tropes where the physical body becomes another object to be mastered, compounding the mythmaking that already surrounds leadership.

Rigg (2018, p. 154) argues that whilst embodiment-centric management literature has paid attention to aspects of 'body language, dress, voice, confidence, spatial layout of meetings and buildings', attention is rarely given 'to the underlying gendered discourse of strength, virility or potency associated with idealised conceptions of leadership'. I suggest that whilst such a broad brush claim arguably disregards much critical feminist scholarship that has done precisely this (e.g. Fotaki, 2013; Harding et al., 2011; Johansson et al., 2017), Rigg's contention does highlight that much of this work does not necessarily pay attention to the fragility of leaders' bodies. Nor does it seek to explore how this fragility is interpreted within a social context in which the idealisation of bodies is deeply entwined with the mythology of leadership.

2.2.2 Mythologising Leadership

In their examination of what distinguishes executives from lower level leaders, Hiller and Beauchesne (2014, pp. 557-559) identify five major points of differentiation. According to the authors, as an organisation's most senior leaders, executives: have primary responsibility for setting organisational strategy; are required to participate in more boundary spanning work in the external environment; are responsible for the creation of organisational systems and structures; have a greater indirect impact on business outcomes; and their roles have a greater symbolic significance. These descriptors exemplify executives' role as key internal and external influencers in both the symbolic and non-symbolic realms of organisation life (Finkelstein et al., 2009), however, this is only part of the executive story.

Although it is true that executives do wield significant organisational influence, and doubtless reap the benefits of occupying high status roles (Yermack, 2006), executive power is constrained by a variety of forces which means that they must constantly negotiate threats to their own leadership. Executives are not omnipotent and operate under a series of role constraints and while they may exercise great power, they may also exhibit servant-like submission to their own masters (Mansfield, 1989), whether it is to their boards, shareholders, governments or other stakeholders. Further, executive churn has become par for the course with executives cycling in and out of roles with growing rapidity (Krug & Shill, 2008). Corporate memory is short and leaders 'routinely get fired or laid off despite their contributions and past

performance' (Pfeffer, in Leavy, 2016, p. 8). The recent dismissal of scandal-plagued Uber CEO, Travis Kalanick, has shown that even founding CEOs are not secure from public scandal and the wrath of investors (Wong, 2017). As Knoppers (2005, p. 132) observes:

> *Although senior managers have an influence on employee behavior and on organizational culture, they themselves are subordinate to other men [sic] such as the director, the chief executive officer or the chair of the board.*

Also, the inherent characteristics of senior leadership means that occupying an executive position is highly stressful and can take its toll on health (Tudu & Pathak, 2013). As Harding (2014, p. 408) argues, cultural norms dictate that leaders must 'work, and work, and work' in order to 'fulfil the normative ideal of 'the leader''. Executive life demands long working hours, frequent travel, constant high-pressure decision-making, intense levels of internal and external accountability, and the merging of work and non-work self (Little et al., 2007). So, while executives may experience the privileges of being part of the managerial elite, they are certainly likely to have to negotiate the 'symbolic insecurity' associated with threats to their status, autonomy, and wellbeing (Collinson, 2003). Rather than being exemplars of individual agency, those in senior leadership positions may experience themselves as somewhat powerless (Harding, 2014) as they 'entrap themselves into structures of their own making' (Michel, 2014, p. 515).

In order to exist in these competitive and demanding environments, leaders may themselves internalise particular characteristics that they believe are necessary to survive (and thrive) at the top of an organisational hierarchy. In an in-depth study of Australian leaders, Sinclair (1998/2005) found that executives espoused a number of core traits that they felt were essential to leader success: heroism, physical toughness, emotional toughness, and self-reliance. What is revealing (but perhaps not surprising) about these descriptors is that taken together they form the basis for the archetypal heroic leader (Liu, 2017). They suggest a controlled, individualistic and masculinised embodiment of leadership - one that has remained stubbornly dominant in leadership studies, education, and practice (Petriglieri & Petriglieri, 2015).

Meindl et al. (1985, p. 80) have famously argued that the persistence of romanticised and heroic leadership identities is due to a deeply ingrained human need to make sense of complex organisational phenomena. The desire for simplification is self-evident in popular business literature, which 'attributes total agency to the intentions and actions of top CEOs' (Tourish, 2013, p. 11), without critically examining the relationship between the individual

leader and *actual* firm performance. Mabey (2013, p. 365) notes that in the modern knowledge economy 'leadership is rarely invested in a single individual, there will be times when it is not clear where leadership is emanating from and, indeed, it may well be attributed after the event.' There is also increasing empirical evidence that suggests that executive performance may have only a marginal impact on organisational outcomes, and be 'almost indistinguishable from the effect of chance' (Fitza, 2017, p. 802).

It is true that post-heroic leadership discourses, such as authentic (Avolio et al., 2004) and servant (Greenleaf, 2002) leadership, have attempted to steer leader characterisations away from the mythological toward the more humane. However, to date, even post-heroic discourses have failed to articulate a humanity that incorporates the fleshy fragilities associated with being a leader, principally because modern ideologies of leadership are still mostly grandiose (Alvesson & Sandberg, 2013). As Ford and Harding (2011, p. 470) note, the authentic leaders that are commonly written about are 'flawless, perfect, rejoicing in knowledge of an inner self that has nothing to hide, no traumas, no imperfections, in short, no human characteristics'.

Pfeffer (2015, 2016) argues that years of post-heroic leadership research has thus far failed to have any significant impact on the actual *practice* of leadership, principally because leaders are ultimately judged on economic metrics underpinned by performance, productivity, and efficiency. Moreover, given the continued dominance of men in senior leadership positions, it is perhaps not surprising that while there has been some change in the macro discourses of leadership, 'the everyday narrative about leadership and leadership practices… remains stuck in old images of heroic individualism' (Fletcher, 2004, p. 652).

Feminist scholars have argued that part of the enduring relationship between leadership and the heroic body, is that the attributes associated with a post-heroic identity - e.g. vulnerability, collaboration, and interdependency - are considered to be aligned with displays of femininity and therefore conflict with the normative status of leadership as a masculine endeavour (Fletcher, 2002, 2004). While others have noted that even though discourses of transformational leadership adopt feminine language, they do so in such a way as to not de-masculinise leadership (Knoppers, 2011). The examples often cited in transformational literature 'draw on highly gendered, heroic images of the 'great man', viewing leaders as dynamic agents of change and followers as passive and compliant' (Collinson, 2011, p. 183).

Heroic individualism is central to the American model of leadership, though as noted above, these notions of leadership extends well beyond American shores. Lipman-Blumen (2004, p. 48) argues that the stories of 'self-reliant, take-charge, competitive leadership', which

are themselves influenced by the American frontier experience, are deeply entwined with the cultural myths 'of rugged individuals who overcome poverty and other hardships through sheer grit and ingenuity'. Gregg (2015, p. 189) suggests that the mythology of heroic individualism is alive and well today in the Silicon Valley myths that surround people like Bill Gates to Mark Zuckerberg, and continue to legitimize 'notions of individual supremacy in the name of advancing civilization and success.'

This highly masculinised discourse has been extremely influential, creating normative standards of embodiment in leadership, a cause that continues to be bolstered by some leadership studies research. For example, the description below, which appeared in the peer-reviewed management journal, *Organizational Dynamics*, demonstrates how leadership scholars continue to interpret a leader's embodiment and their ability overcome physical challenges, as being a defining characteristic of leadership:

> *United States President Theodore Roosevelt found bodily vigor and physical health to be the foundation upon which the intellect and character stood. Physical stamina and love of outdoor sports were the hallmark of his remarkable character. His promotion of the "strenuous life" was his lifelong preoccupation. However, robust physical energy and prowess did not come naturally; they were the result of effortful, disciplined choice and striving. Roosevelt grew up a sickly child, suffering from asthma and bad eyesight. He did not, however, accept these limitations. Rather, as a young man, Roosevelt devoted himself to vigorous exercise and weight lifting, gaining physical strength, stamina, and vitality. He continued to pursue vigorous exercise and outdoor activities throughout his lifetime. (Gavin et al., 2003, p. 167, emphasis in original).*

Though this narrative may be easily dismissed as heroism hyperbole, it is instructive insofar as it illustrates how leadership studies research is complicit in continuing to interpret the leader's body through a highly masculinised lens, and how wilful overcoming of health impediments is central to propagating this argument. These descriptions evoke trait-based notions of leadership which are heavily embedded in a set of assumed physical characteristics, designed to influence perceptions of how leadership can or should be embodied. The authors' florid recalling of Roosevelt's 'remarkable character' shows how a leader's physicality conveys traits that are deemed essential for the morality of leaders. 'Bodily vigor', 'physical stamina' and 'vigorous exercise' are presented here as hard-won practices only achieved through 'effortful, disciplined choice and striving'. Roosevelt's stubborn refusal to accept his bodily imperfections

through a focussed regime on his physical fitness, allegedly meant he was able to shed the stigma associated being a 'sickly child', and therefore eschew any projections of weakness.

A special issue of the *Academy of Management Executive* (now *Academy of Management Perspectives*) which focussed on executive health and wellbeing, was similarly hyperbolic and uncritical in its proclamation of relationship between fitness and leadership. For example, an article by Neck and Cooper (2000, p. 74) used a bullet point list of leaders' exercise habits to infer a direct relationship between leader fitness and organisational outcomes. It included the following examples:

> *• Tom Monaghan, the founder of Domino's Pizza and current chairman of the Mater Christi Foundation, runs about four miles every day or uses a Stairmaster; he uses a Nautilus machine for 30 minutes, alternating upper and lower body every other day; and when traveling does pushups and crunches along with running. He consumes about 2,000 calories a day, does not eat any desserts or sweets, and fasts on bread and water for half a day twice a week.*
> *• Dr. Thomas Frist Jr., chairman and CEO of Columbia HCA Healthcare, uses time between business flights to jog along airport roads or neighboring streets.*
> *• Michael Mangum, president of the Mangum Group, performs aerobic exercises two hours a week and lifts weights two to three times a week. He also tries to minimize fat and cholesterol while maximizing fruit intake.*

To critique these leader narratives is not to suggest that overcoming obstacles doesn't build character, nor is it to argue that the attention to physical fitness is not an important component of leadership. Rather it is to point out how the continued presence of such heroic narratives, even in academic literature, places the idealised body at the core of leader identity. Numerous scholars have critiqued the role of academe in propagating the myths of leadership, and have pointed out the self-serving role of business schools and their deep reliance on the leadership 'industry' (Pfeffer, 2015). Alvesson and Kärreman (2016, p. 143) suggest that leadership scholars unwavering attraction to models of heroic leadership may be the result of watching 'too many John Wayne movies'. Others have implored business school educators to 'avoid reproducing myths that purport to chronicle how powerful and charismatic male leaders routinely "rescue" organizations from the precipice of failure' (Collinson & Tourish, 2015, p. 591, emphasis in original). In a bid to provide some perspective on the material reality of leadership, Collinson and Tourish (2015, p. 591) argue that '[f]ew CEOs are women. Even

fewer are "Supermen." They share the same foibles, weaknesses, doubts, dilemmas, and worries as the rest of us' (emphasis in original).

In the next section, I look more closely at how changing health discourses have contributed to the idealised imagery surrounding the leadership body by offering all who are adequately self-disciplined, the opportunity to master their own corporeality.

2.3 Idealised Leadership Bodies

2.3.1 The Making of a Corporate Athlete

Society's ongoing preoccupation with body management practices, together with the hypercompetitive, image conscious world of senior leadership has provided fertile ground for the rise of the 'corporate athlete'. The athleticised body has become an object of idealisation, paving the way for an increasing preoccupation with physical prowess as a marker of leadership identity (Johansson et al., 2017). The idealisation of physical fitness in now part of a leadership discourse through which the body becomes a site 'to differentiate oneself as 'a winner' - supremely focused, self-disciplined and beyond physical weakness or limitation' (Sinclair, 2005a, p. 94).

Research exploring the relationship between athleticism and leadership is not new; Stogdill's (1948, p. 42) seminal paper on the personality traits of leaders cites research undertaken by Joseph Puffer in 1905 which argues that, 'Athletic ability and physical prowess do appear to be associated with leadership status.' Skip forward some one hundred years or so and contemporary research exploring the role of the body in management studies has shed light on the way physical fitness is viewed as central to the construction and management of a professional identity (Costas et al., 2016; Godfrey et al., 2012; Michel, 2011; Sinclair, 2005a). Waring and Waring (2009, p. 361) argue that the fit and healthy body does important symbolic work by projecting the 'expectations and assumptions around professional work and identity, fundamentally the ability and motivation to perform in a competitive environment.' This suggests that embodying the markers of athleticism can become an important signifier of a leader's suitability for realms of leadership. For business leaders then, the athletic body is something to be worked at and accomplished (Shilling, 1993/2012), and is an object that is made use of to project an idealised leadership imaginary.

The mainstream popularisation of the athleticism in leadership can be traced back to the marketing of sport sciences research to managerial elites who were looking for ways to gain a

competitive advantage in business. In popular texts such as, *The Corporate Athlete (Groppel, 2000)* and *The Making of a Corporate Athlete (Loehr & Schwartz, 2001)*, athletic and leadership metaphors abound and an argument is posited that business success is dependent on, among on things, maximum control over one's physical resources. From a physiological perspective, 'strenuous exercise overwhelms the sympathetic nervous system, releasing endorphins and endocannabinoids, giving us a sense of calm and mastery over the flesh' (Evans, 2017, p. 181). It is this mastery and control over the body that can be appealing to those looking to maximise the resources at their disposal for business success and that, Sinclair (2005b, p. 389) argues, has driven executives 'to extraordinary lengths to maintain their fitness and the illusion of impregnability'.

Pragmatically, cultivating good physical health is also perceived as a necessary way of coping with, and protecting against, the negative health effects of modern executive life. As cultures of 'working extremely' become normalised (Bloomfield & Dale, 2015), conditioning the body has been viewed as an effective way of ensuring optimal performance and reducing occurrences of executive stress and burnout (Quick et al., 2007). Moreover, in cultures where athleticism has become sanctioned by organisational leaders, participation in fitness activity with colleagues may be viewed as essential part of masculine bonding (Knoppers & Anthonissen, 2005), often at the exclusion of women (Gregory, 2010). In their study of the role of fitness in hedge fund cultures, Riach and Cutcher (2014, p. 778) noted that sporting activities were sites for the display of competitive prowess, and 'a characteristic that was seen as necessary to 'play' in the competitive and combative world of hedge fund trading' (emphasis in original).

For those convinced of the merits of athleticism, the athletic body is conceived as being of value beyond the individual executive, and has been posited to be an important part of organisational success. For example, Neck et al. (2000, p. 386) note the 'tremendous significance' of a leader's physical fitness and deem it to be 'a crucial factor in determining the success of the company'. Such perspectives encourage the belief that leader practices of body management are deeply entwined with organisational outcomes. When a company's fate is believed to hang in the balance of its leader's fitness, this not only perpetuates individualistic interpretations of leadership, but it also establishes athleticism as a criterion through which a leader's performance can be judged.

However, there is an emerging critique of athleticism in management, particularly its role in shaping an obsession with body metrics in addition to cultivating an unsustainable ethic

of work. In their acerbic critique of the wellness industry, Cederström and Spicer (2015, p. 40) suggest that the Protestant work ethic of tireless work and a frugal life, has been replaced by 'corporate athletes who commit themselves to constant exercise and health monitoring'. While Hewlett and Luce (2006, p. 53) argue that it may be the unadulterated idolisation of extreme athleticism that has helped to cultivate an ethos of extreme work, such that 'our most intense jobs are seen not as exploitative but, rather, as glamorous, desirable, and virtuous'. Even the business media has become somewhat critical of the message athleticism is sending its organisational leaders. For example, in their critique of the 'super-bodied' manager, *The Economist* (2015, December 15) invokes the wisdom of management guru Peter Drucker (1999) to argue against the merits of such a trend:

> *And bosses who think of themselves as supermen and superwomen can weaken their companies. As Peter Drucker, a management guru, once pointed out, "No institution can possibly survive if it needs geniuses or supermen to manage it. It must be organised in such a way as to be able to get along under a leadership composed of average human beings".*

The scholarly research that is specifically focussed on athleticism and leadership, has explored the normalising effects of these new body standards; particularly with regard to recruitment (Meriläinen et al., 2015), the reification of traditional, masculinised leader identities (Johansson et al., 2017; Knoppers, 2011; Knoppers & Anthonissen, 2005), and the creation of an unsustainable and exploitative ethic of work (Sinclair, 2011). This literature has made important contributions to elucidating the role athleticism plays in senior leadership, however, it is still unclear how prevalent a phenomenon this is, and little is known about the conditions that gives rise to such cultures in organisations. Other related literature has focussed on knowledge workers rather than those in senior leadership *per se*, and has therefore tended to explore research contexts such as professional service firms and finance sector organisations (Costas et al., 2016; Michel, 2011; Riach & Cutcher, 2014). These are highly masculine cultures which are known to laud competition and risk, and are likely to fuel behavioural norms that are simpatico with athletic ideals. Therefore, whilst it may make sense to study these organisations to interrogate athleticism in the workplace, there is likely to be some confirmation bias (Nickerson, 1998) at play here, which does not help to understand how widespread the phenomenon may be.

The work of Johansson et al. (2017) is unique insofar as it does focus on the 'managerial athleticism' of individual leaders from diverse sectors. The authors identify multiple discursive

practices that are central to body identity regulation, and discuss the gendered dimension of athleticism which they argue is grounded in a masculinised language. However, the authors themselves note that, 'The choice of research participants already directed the research towards high achievers who actively took care of their bodies' (p. 11). This is recognised as problematic by the authors, particularly for the limitation it poses in understanding how some organisational members resist athleticism. Therefore, whilst this research makes an important contribution, it ultimately reflects a unidirectional understanding of cultures of corporate athleticism, in which athleticism and leadership become synonymous for the purpose of critical enquiry. Perhaps more importantly, what this and other literature currently leaves unarticulated, is the perceptions and experiences of leaders who occupy bodies that do not conform to these athletic ideals. What is it like to be an executive whose bodies do not fit this idealised schema?

2.4 The 'Less Than Ideal' Leaders' Body

2.4.1 The Overweight and Obese Body in Leadership

Early critiques of embodiment in management studies were often focussed on the denial of a leader's body; for example, Harding (2003, p. 120) states that, 'Managers' bodies are denuded, so far as is humanly possible, of all references to flesh and to nature'. As has been discussed, in recent years there has been a more consistent analytic lens focussed on the 'flesh' in leadership studies, however, what remains less explored are the 'less than ideal' leaders' bodies that buck the normative trends proscribed by the contemporary health discourses and practices. If the athletic leadership body has become *de rigueur* and associated with self-management, strength and control, then the overweight and obese body represents the problematic 'other'.

Huzell and Larsson (2011, p. 107) suggest that in an era when health has become aestheticised, muscle tone and body shape have become important visual signifiers of health, and 'the lack of these markers is believed to be due to negligent self-maintenance: e.g. inadequate exercise, poor eating habits and not least lack of discipline'. Lupton (2013a, p. 3) argues that in contemporary western societies, the overweight and obese body is viewed as an 'object of pity and contempt' and has become a 'focus of stigmatizing discourses aimed at disciplining, normalizing and containing it'. Some of the moral undertones that stigmatise the overweight and obese are that they lack willpower, behave compulsively and are generally lazy (Puhl & Heuer, 2009). Therefore, there is a pervasive societal belief that fatness 'is a

controllable condition' and that individuals who find themselves in this category 'are responsible for their stigma' (E. B. King et al., 2016, p. 286).

The predominant rationale used to explain the ever-expanding waistlines of citizens has been to suggest that individual lifestyle is both the cause and the source of salvation for this public ill (Mayes, 2016). This has led to a focus on personal responsibility in public health management. Yet such an approach lacks 'an awareness of the complexity of individuals' health-related behaviors and their embeddedness in historical, economic, cultural, and social contexts' (Lupton, 2014, p. 39). Critics of this individualistic perspective suggest that the problem with focussing predominantly on personal choice is that it glosses over the systemic issues that are real determinants of health, especially socioeconomic status, educational attainment, and access to health services (Marmot, 2000; Marmot et al., 2008).

Research reviewing weight discrimination in the workplace has shown that heavier employees can be discriminated against at multiple points of the employment cycle, including recruitment, promotion and disciplinary stages (see Rudolph et al, 2009 for a review). Gender also plays a significant role in how this discrimination is experienced in the workplace. Scholars have argued that overweight women are more adversely impacted by weight-based discrimination at work (Fikkan & Rothblum, 2012, p. 576), and are 'over 16 times more likely than men to perceive employment related discrimination and identify weight as the basis for their discriminatory experience' (M. V. Roehling et al., 2007, p. 300). This is perhaps not surprising considering that in society more broadly, 'the scrutiny placed on female overweight is greater than the scrutiny placed on male overweight' (Bell & McNaughton, 2007, p. 109) . However, other scholars have noted how the discriminatory practices may become less gender-distinguishable the heavier an individual becomes, for instance, (P. V. Roehling et al., 2009, p. 190) found that that 'once a man or woman reaches the obese threshold, they experience similar, and considerable negative career consequences.'

There has been an increasing level of interest on the pressures placed on men, particularly younger men, to conform to societal expectations regarding bodyweight (Grogan, 2016). Bell and McNaughton (2007, p. 126) have argued that the 'feminization of fat' by feminist scholars has 'inadvertently create[d] the perception that men's weight concerns pale in relation to women's'. In their thought-provoking historical critique entitled, *Feminism and the Invisible Fatman,* the authors argue that 'men have also been exposed to the growing malevolence towards fat and fatness', and they offer a number of examples of male leaders whose overweight bodies have been denigrated by being associated with the feminine:

> *'man boobs' can be a humiliating source of mockery and jest. For example, Australian Federal Health Minister Tony Abbott derisively labeled the ex-Australian Labor party leader Mark Latham 'Dr Man Boobs' following Latham's appearance in tight cricket whites (Weekend Australian Magazine, 2004). In a similar vein, former US President Bill Clinton was often hounded by the press over his soft, corpulent, spongy and apparently undisciplined body and his abundant appetite for fast food. (Bell & McNaughton, 2007, p. 124)*

The contention here is that it is the perceived relationship between fat and femininity that is problematic for male leaders (and indeed men in general) for whom 'having what's seen to be a feminized body… is greatly feared' (Bell & McNaughton, 2007, p. 124). In this sense, the fat body may be experienced as emasculating for men in positions of power, in an environment in which 'traditional models of transformational (heroic) leadership are masculine' and coalesce around traits such as 'individualism, control, assertiveness and dominance' (Ford, 2006, p. 34).

For those in senior leadership positions, fatness may also be interpreted as 'a sign of not being fit' or conforming to athleticised ideals, which makes the overweight and obese body 'unacceptable in executive management' (Meriläinen et al., 2015, p. 14). P. V. Roehling et al. (2014, p. 335) suggest that 'the cumulative effect of weight discrimination can be seen in the dearth of obese individuals who have reached the top of their professions', that is, there are fewer fat people in positions of power because of a general reluctance to promote them. The counter argument to this assertion is that whilst heavier individuals may indeed be passed over for senior roles, this discrimination may, in some part, be justifiable because their physical condition makes them unsuitable candidates for what are generally highly demanding roles. Such individuals may therefore be perceived as a health risk and a potential performance liability (Bresnahan et al., 2016).

There is currently an absence of research into the potential organisational costs of an overweight or obese leader. There are, however, numerous studies that have attempted to quantify the negative economic impact of overweight, lower-level employees to business, particularly costs associated with presenteeism, absenteeism and medical expenses (Finkelstein et al., 2009). In their review of the US-centric literature, Goettler et al. (2017, p. 1) conclude that the 'evidence predominantly confirms substantial short-term and long-term indirect costs of overweight and obesity', with indirect costs here defined as 'reduced work productivity due to short-term and long-term inability to work.' However, other scholars have challenged the

'alarmist' pronouncements about being overweight or obese and suggested that the 'medical and epidemiological pronouncements on the health risks of fatness are often inaccurate, distorted, and exaggerated, transforming speculative ideas about risk and obesity into scientific fact for the sake of persuasive effect' (Lupton, 2014, p. 40). The argument here is not to dispute that overweight or obese employees may indeed represent a cost to business, but rather to note that the stigma that often surrounds fatness can intimately (and sometimes erroneously) link body mastery with one's productive capacity, compounding the dilemma for fat-bodied leaders who are charged with keeping the wheels of capitalism turning.

The limited attention currently paid to organisational leaders' bodyweight obscures the reality that those who occupy high status positions can also be overweight and obese (P. V. Roehling et al., 2009). Yet, recognising this 'less than ideal body', poses a conceptual difficulty insofar as it requires a recognition of the lack of mastery leaders may indeed have over their bodies, and therefore highlights the *ordinariness* of their corporeality. To acknowledge this may be to concede that those very bodies deemed responsible for upholding the momentum of corporate capitalist efficiency, may also have limits to their own productive capacity.

The research that does currently explore overweight and obese leaders tends to focus on understanding the perceptions of others, rather than understanding the experiences of overweight leaders directly. For instance, Meriläinen et al.'s (2015, p. 4) study of executive head-hunters found how the search for the ideal executive body begins at the recruitment stage, well before an individual has even stepped foot into the workplace. The authors suggest that the 'body of the candidate plays a central role in the search process' and that 'normative standards defining the right kind of executive body prevail for men as well as for women'. These normative standards exclude the overweight and obese; as one executive recruiter in their study commented, *'you can't be flabby, there's got to be intensity there'* (p. 12). Here, being overweight becomes immediately equated to an expression of 'lack', in this case a lack of energy and vitality, which is considered necessary to the fulfilment of an executive role.

The limited (and mostly quantitative) literature that has specifically explored bodyweight and leadership has focussed on the stigmatising effects of the obesity and overweightness in leadership. This research has generally argued that the same stigmatising perceptions broadly experienced by people who are overweight or obese, can also be directed towards organisational leaders (P. V. Roehling et al., 2009). The implication here has been that status alone does not necessarily have protective effects when an individual becomes associated with a stigmatised group; that is, the privileges of leadership such as organisational prestige and

power may prove insufficient in overcoming the social stigmas associated with bodyweight (E. B. King et al., 2016). For example, Bresnahan et al. (2016) analysed public perceptions of the former governor of New Jersey and one-time presidential nominee, Chris Christie, and assessed the impact his overweight status had on peoples' view of his political leadership competence. They found that priming study participants with weight stigma messages was 'very powerful' in forming negative perceptions of Christie's leadership competence, and argued that:

> *people who read these stigmatizing and unflattering remarks are likely to draw unfair conclusions about Christie's (or any other large politician's) leadership competence on the basis of negative often demeaning physical descriptions (Bresnahan et al., 2016, p. 1371).*

In a rare study of weight bias toward executives, E. B. King et al. (2016, p. 283) found that markers of hierarchical status (e.g. power, prestige, and competence) were 'insufficient in overcoming the stigma of obesity'. By measuring participants' waist circumference and 360-degree evaluations from their direct reports, peers, and bosses, the authors found that 'stigmatized characteristics can infect perceptions of even the most powerful organisation leaders in society' (p. 293). The authors noted that:

> *positive expectations and impressions of competence may be vulnerable when top executives also possess characteristics that reflect a devalued (i.e., stigmatized) social identity—especially when the devalued attribute is highly visible as in the case of obesity (E. B. King et al., 2016, p. 284).*

This research suggests that obese leaders are likely to be judged negatively, particularly with respect to their competence, irrespective of their organisational status. Therefore, 'status shields' (Freund, 1990; Hochschild, 1983/2003) may not protect leaders against weight discrimination when they become part of a stigmatised group. In fact, this stigmatisation may become magnified at levels of senior leadership where there is an underrepresentation of (particularly female) leaders who are overweight and obese. The study of *Fortune 100* CEOs by Roehling and colleagues (P. V. Roehling et al., 2009, p. 179) found that this underrepresentation demonstrated 'that weight discrimination occurs at the highest levels of career advancement and that the threshold for weight discrimination is lower for women than for men.'

Such a study is novel insofar as it begins to draw attention to the way socially held views about fatness intersect with the idealised representations of leader embodiment. Leaders may themselves become overweight or obese, making them vulnerable to the shared meanings given to fatness in society. The suggestion that leaders may also experience stigmatisation because of their weight characteristic goes some way to extending stigma theory which has thus far tended to exclude those in positions of power (Link & Phelan, 2001). However, a qualitative investigation of the fatness in leadership is currently absent from the extant literature, and remains an important part of explicating how weight may be perceived as a threat to masculine representations of leader identity that are embedded in notions of heroic individualism.

2.4.2 Illness and Leadership

As body management practices become more central to conveying professional credibility (Adamson & Johansson, 2016; Costas et al., 2016) and as these practices become discursively normalised through channels including the media, public health advocates, and academia, pressure is invariably placed upon individuals to conform to these expectations. In a culture where personal wellbeing and bodily self-improvement is *de rigueur*, an impression is created that if people combine the right practices with the right technology, body mastery is imminently achievable as is the prevention of illness and disease (Lupton, 2013b). However, health and the absence of illness is determined by multiple factors (e.g. genes, environment, injury, etc.), and control over one's body is not so easily achieved.

Despite the fantasy of inhabiting illness-free bodies, sickness remains a central experience of the human condition and is 'intimately involved in shaping people's actions and identities' (Shilling, 2008, p. 104). Having to deal with illness, even for the modern leader, is hardly an exceptional experience, as Frank (1995, p. 49) suggests, 'The human body, for all its resilience, is fragile; breakdown is built into it.' In the developed western world, continual improvements in living standards and medical care have meant that society is grappling with the effects of a chronically ill working population, which includes those found at the top of the organisational hierarchy. In Australia, 25 per cent of professionals and 22 per cent of managers are living with a chronic illness such as cardiovascular disease, depression, diabetes, or musculoskeletal disorders (The Australian Institute of Health and Welfare, 2009). Regardless the illness, the lived experience of engaging with a sick body is likely to have a significant impact on leaders, those they manage, and the organisations they lead.

Being a member of the leadership elite may bring with it the trappings of wealth, power, and prestige, however, the margin for error in top management positions is increasingly narrow. Kidel (1988, p. 5) argues that peoples' negative perceptions of illness in the workplace is a direct result of the competitive nature of work cultures; 'a world in which vulnerability, fallibility and weakness are perceived as undermining the roles and goals common to most workplaces.' Shilling notes how even the privileged worker must find a way to 'keep going' in the face of relentless demands:

> *Labouring for long hours, steeling the body and self to cope with long meetings and short deadlines, confronts even the privileged with a culture's expectation that 'health' consists of the instrumental capacity to 'keep going' and to 'look good' while dealing with these demands (Shilling, 1993/2012, p. 250, emphasis in original).*

For leaders to compete successfully and consistently in such environments, their bodies must always be at their productive best; illness, however, undermines the illusory images of strength, control, and self-mastery that have been firmly attached to the mythology of those in power.

Whilst the ailing bodies of organisational leaders rarely present themselves as subjects of scholarly inquiry, they can be more easily located in historico-political pathographies of world leaders. Stories such as Churchill's infamous depression and cerebrovascular incidents, or Franklin J. Roosevelt's polio affliction (Post & Robins, 1993) bring into stark relief the universal fallibility of bodies 'as well as revealing some of the covert strategies sometimes deployed to project and protect a public image of the leader as invariably healthy' (Collinson, 2014, p. 42). In an edifying study, Brickfield and Pyenson (2001) found that *twenty* world leaders suffered a stroke while in office during the period between 1970-1999. This research, which was published in a military medical journal, was deemed so sensitive that it came with a disclaimer that the review 'neither constitutes CIA authentication of information nor implies CIA endorsement of the authors' views' (Brickfield & Pyenson, 2001, p. 231). The circumstances of world and organisational leaders may be different, but the premise is the same – the visible display of sickness is viewed as compromising a leader's authority.

The dire consequences of a world leader's health status were also in evidence during the US presidential race of 2016, when Hillary Clinton appeared to collapse in full view of the cameras at a 9/11 memorial service (Tiefenthäler, 2016). The ensuing media hysteria was exploited by the Republican Party to call into question Clinton's fitness for office and

undermine her campaign (Bordo, 2017). This incident precipitated urgent calls for both candidates to release their medical records, in an apparent attempt to reassure the public that their new commander-in-chief inhabited a body that was fit-for-purpose. It was subsequently revealed (by President Trump's personal physician) that the now President of the United States dictated his own medical statement, in which proclaimed he himself to be the 'healthiest individual ever elected to the presidency' (McCarthy, 2018).

Within management literature, exploring the role of bodies has been 'confined to the analysis of the waking, able, and living body', demonstrating a preference for investigating 'the body that is alert, awake, and able to move, think, sense, and interact' (Gherardi et al., 2013, p. 334). As a result, the majority of the extent embodied leadership research has thus far been on the bodies of the healthy. In the domain that can be broadly categorised as 'executive stress and burnout', this (usually quantitative) literature tends to be focussed on areas such as: stress management (Nelson & Burke, 2000; Tudu & Pathak, 2013); personality traits (Zopiatis & Constanti, 2009); or health impacts of executive stress on employees (Larsson et al., 2007; Little et al., 2007; Nelson & Burke, 2000; Steffens et al., 2014). In these studies, the body usually retains an implicit status that is peripheral to the leader experience of physical breakdown, so little attention is paid to the shared meanings made of illness.

With a couple of notable exceptions to which I now turn, qualitative accounts of the sick body are rare in leadership studies literature. In an essay for the *Journal of Management Studies,* Prothero (2017), a senior management scholar, candidly reflects upon her experience of returning to her role in academia after having had open-heart surgery. Upon re-entering the workplace, she describes the limitations to her bodily capacities and how even seemingly prosaic events such as her inability to open the 'very heavy doors' to her office building, led her to question; 'If I couldn't even open the door how on earth would I be able to teach or carry out my research activities?' (Prothero, 2017, p. 120). Her illness seemingly caused her to question her habituated ways of being (Charmaz, 1995) because it drew attention to previous unknown limitations to her productive capacities.

Because the author's physical impairment meant that she was 'no longer working ridiculously long hours' (Prothero, 2017, p. 122), this also forced to her to question the structural conditions that underpinned the expectations of her role. For Prothero, her illness experience appeared to create a mismatch between the expectations of senior academics looking to attain (and retain) coveted positions within academia, and a body that could no longer work 'ridiculously long hours'. Her experiences sparked a rallying cry against the systemic nature of

overwork she had experienced and the 'impact the constant need to perform at exceptionally high levels has on health and well-being' (Prothero, 2017, p. 122). As a first-person narrative reproduced in a top tier management journal, Prothero's essay makes for a rare account of the lived experience of illness within academic life and is an illustrative case study of how sickness can impact professional identity.

Beyond singular, first person accounts of illness, it is Michel's (2011) nine-year ethnography of investment bankers which presents the most thorough qualitative investigation of professionals' experiences of illness in the workplace. Whilst framed as a study of knowledge workers rather than executive leaders *per se,* the longitudinal study design incorporates the bankers' transition from graduate to senior leadership positions, and documents how bodies resist, relent, and sometimes renew themselves in the face of workplace challenges. Over time, a proportion of Michel's participants had to contend with an embodied crisis, usually a health challenge of some kind, which the author positions as being a direct response to a culture of overwork.

Michel's (2011) research is a cautionary, and partially redemptive, narrative that contrasts mechanisms of embodied organisational controls with the activation of individual agency in the aftermath of illness. The author argues that some individuals were able to 'transcend socialization' by engaging in a process of surrendering their taxing habitual modes of behaviour and finding more creative ways to undertake their work. These leaders 'were creative because they had to reconcile the banks' and the body's demands' (Michel, 2011, p. 350), which led to changing workplace behaviours such as reducing working hours, increasing task delegation and improving subordinate relationships.

Her study provokes deeper questioning about the relationship between illness and knowledge work; it is particularly important in its visceral illustration of the lived reality of professional bodies in the workplace and how sickness can positively contribute to reframing relationships with work. However, there is an opportunity to build on this research by exploring the experiences of illness within a leadership specific context, and address the issues that may be pertinent to leaders whose embodiment challenges the idealised norms of leadership. Michel's (2011) work is primarily focussed on the body's response to mechanisms of organisational control. I suggest, however, it is important to look specifically at the shared meanings made of sickness to better understand the contextual complexities that can lead to this dimension of leader embodiment being such a fraught experience for people in leadership positions.

Further, the extent research tends to frame illness through a lens of a positive epistemological transformation, in which experiencing 'bodily failure, vulnerability, and anxiety about one's body and one's life' (Carel et al., 2016), alters one's experience of reality. I suggest that whilst it may be tempting to interpret leader experiences of illness through a transformational lens, this may be too optimistic a view, particularly in competitive organisational climates where working long hours is worn as a badge of honour (Svetieva et al., 2017) and is seen as an intrinsic part of professional identity. After all, more than half of Michel's investment bankers did not alter their behaviours in the aftermath of an embodied crisis.

This is not to suggest that the experience of illness cannot be a force for positive change. Prothero (2017, p. 122) herself declared that her own experiences had inspired her to 'shout louder' about the negative impact of work intensification on one's health. However, whilst illness may have had a personally transformative impact upon Prothero herself, the author's proclamation is unlikely to affect systemic change in a sector-wide culture that increasingly turning its academics into 'journal publication technicians' (Alvesson et al., 2017, p. 118). The more brutal reality may be that such work cultures invariably disadvantage leaders whose bodies do not have the productive capacity expected of those ascending to (or wishing to remain) in their senior leadership positions.

The experience of disclosing illness is something that requires careful management for high status leaders, particularly as illness has become associated with qualities such as weakness and incompetence (Bunker, 1997; Frost, 2003). Like being overweight or obese, becoming unwell may also make leaders the target of a 'spoiled identity' (Goffman, 1963/1991). In his seminal book, *Stigma: Notes on the management of spoiled identity (1963),* Erving Goffman does not specifically define his 'spoiled identity' construct, but it has been widely interpreted by scholars (and is used here) to denote the emergence of a stigmatising attribute which has a discrediting social effect (Bos et al., 2013; Sutton & Callahan, 1987). It is currently not clear how leaders perceive and experience the process of stigmatisation associated with illness, nor how they respond to a potentially stigmatised workplace identity. Therefore, there is an opportunity for further research to understand the stigma of illness within senior leadership, especially in a time when contemporary health discourses and practices have emboldened the illusory belief in the individual's ability to assert ultimate control over their bodies.

As high status individuals, organisational leaders are not generally the focus of research exploring their potential to be victims of stigma. Rather, an endless litany of corporate scandals

and the growing disparity between rich and poor, have ensured that the managerial elite are usually portrayed as emblems of neoliberal dysfunction (Giridharadas, 2018; J. C. Williams, 2017); these are individuals who live a life of privilege, increasingly separate to the workers below them (Fotaki & Prasad, 2015). However, I suggest that even those leaders who have accrued significant financial, cultural and social capital, will face intense scrutiny if their weight or illness is perceived to impact on their ability to physically and mentally perform according to expectations. This is not to deny that leaders generally have greater resources with which to ameliorate the negative effects of potential stigmatisation, but such resources do not necessarily remove the experience of stigma. I therefore argue that exploring leaders' views about illness is an important part of understanding how the 'less than ideal' body is experienced in leadership.

2.5 Conclusion

In this chapter I have discussed the sociological theory which intersects the domains of embodiment, health and leadership, and which has grounded much of the thinking of this research. I have also discussed and categorised the growing literatures exploring the role of the body in leadership and argued that whilst some critical literature has begun to illustrate the problematic nature of promoting athletic ideals, this work has mainly focussed in the domain of the professions (e.g. Costas et al., 2016; Michel, 2011). Therefore, there is currently very little understanding of how fitness is constructed within senior leadership cultures beyond these contexts. Further, shifting the focus beyond the professions is important to exploring the dimension of leader embodiment that goes beyond the discourses of professional identity management and a deeper engagement with *leader identity*.

I have also suggested that there is further scope to explore the relationship between the apparent rise of the athletic leader and the shifts that have occurred within the broader health paradigm, for example, the movement towards individualistic rather than a social construction of health. For leaders then, I suggest that cultivating a fit body not only accords with contemporary societal views about health management, but also reinforces beliefs regarding the masculine leadership traits of strength, control, and self-management. Therefore, I have argued that it is important to consider how leadership mythologies, particularly notions of heroic individualism, are tied to discourses of fitness in senior leadership.

Finally, I have suggested that the extant literature has thus far not adequately addressed the impact of the athleticism discourse on those leaders who are deemed to have fallen short of embodied ideals. I have postulated that executives who occupy bodies that are overweight or

obese and/or sick, may not be protected by status shields, but instead find themselves having to manage the 'less than ideal' bodies. I note that whilst there is some research suggesting the emergence of illness may catalyse different ways of thinking and being in work, executives who do not conform idealised norms, may also find themselves having to negotiate the stigma of a spoiled identity (Goffman, 1963/1991).

In the next chapter I discuss the methodological approach that underpins this study, and provide a detailed account of the research context, methods and analytical framework that has guided my study. I will also outline the primary research question that has informed this research project.

Chapter 3: Research Methodology, Design & Methods

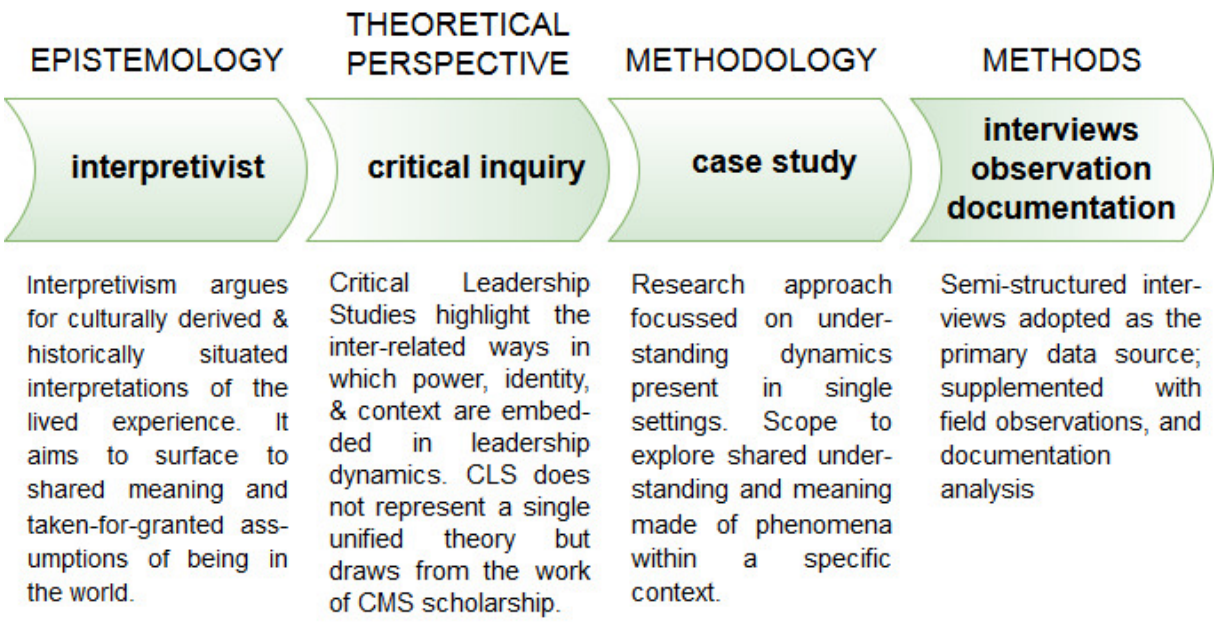
This chapter outlines the methodological framework, research design and methods that I have adopted for this study. I discuss the overarching qualitative, interpretivist perspective that frames this research, and the critical leadership studies lens I have then applied to critique the role of embodiment in leadership. I also examine the engagement with my own embodied subjectivity through the course of conducting this research before establishing the organisational context for the study. Finally, I detail the approach taken to collect and analyse the data and outline the research question that has informed this thesis.

3.1 Methodology

This research is positioned within the epistemological paradigm of interpretivism, that is, it is concerned with revealing the intersubjective meanings and taken-for-granted assumptions (Berger & Luckman, 1967) which undergird the socially constructed nature of leadership and of representations of the body in leadership. Owing to its phenomenological origins (Husserl, 1960), interpretivism takes seriously the experience of individuals and the subjective meanings that are derived from the lived experience of one's being in the world, or *verstehen* (Weber, 1949). Alvesson and Spicer (2012, p. 372) suggest that interpretive perspectives are useful for examining the 'value-laden understandings and interpretations that actors use to understand leadership' and 'to surface different understandings of leadership in the hope of supporting the creation of increased shared meaning.'

However, management scholars have noted that whilst purely interpretative studies 'try to get as close as possible to the meanings, experiences and/or language use of people' they also 'tend to accept rather than critically explore these' (Alvesson & Spicer, 2012, p. 373). By contrast, a critical approach to leadership studies aims to 'highlight the numerous inter-related ways in which power, identity, and context are embedded in leadership dynamics' (Collinson, 2014, p. 37). Therefore, this study adopts a critically-oriented perspective to enable an exploration beyond the shared meanings given by actors, to one that also critiques the normative assumptions of embodiment in leadership studies (see Figure 2).

Figure 2: Research paradigm



Critical leadership studies do not currently offer a unified theory or approach to studying leadership, but rather reflect a broader set of principles amongst management scholars to examine 'what is neglected, absent or deficient in mainstream leadership research' and 'underexplored or missing in the mainstream orthodoxy' (Collinson, 2011, p. 181). Crevani et al. (2010, p. 80) argue for an approach to leadership studies whereby 'taken-for-granted notions of leadership are articulated and challenged – both in theory and in practice'. The authors describe this 'emancipatory ideal' as 'a reaction to the tendency of leadership theories to include some people and exclude others, to obsess with some and suppress the rest, to emphasize the grandiose and forget about the mundane, to violently limit what becomes intelligible in terms of leadership' (Crevani et al., 2010, p. 80).

Adopting a critical approach in this study enables an exploration that goes beyond theorising the shared meaning participants make of their corporeality, and invites a critique of leaders' bodies as sites of power that may either uphold or challenge the established norms of embodiment. Where critical management studies has tended to focus on the oppressive force of leadership on those in low power positions, critical leadership studies is more concerned to 'bear in mind both the potential powerfulness and the possible impotency of leadership' (Alvesson & Spicer, 2012, p. 368). Leaders may be simultaneously powerful and powerless (Harding, 2014), a contention that is reflected in this study, particularly when a leader's corporeality fails to reinforce notions of grandiosity and instead becomes associated with the

mundane embodiment of the 'non-leader'. This 'subversive re-construction' (Crevani et al., 2010, p. 181) of leader embodiment surfaces assumptions about the productive capacity of leaders and the limits of leader control, including over their own corporeality.

Case Study Approach

I have adopted a case study methodology to explore the research subject matter. The case study is a method that allows for the in-depth exploration of novel phenomena within a 'bounded system' (Stake, 1995). Collinson (2011, p. 183) notes that because 'critical perspectives are more focused on the socially constructed and multiple discourses and meanings that tend to characterize leadership dynamics', they often draw on qualitative, interpretive and case study research approaches. In keeping with the epistemological position of this research, I have principally drawn from the constructionist/interpretivist paradigm to case study design as articulated by scholars such as Stake (1995) and Merriam (1998). Stake (1995) identifies three primary types of case study: intrinsic, instrumental and collective. An *intrinsic* case study is not representational of a specific phenomenon but is pursued because the case itself is of interest rather than being a means of developing theory; by contrast, an *instrumental* case study provides insight into a specific problem and may be used to help build theory; and a *collective* case study enables the exploration of differences/similarities between cases and is designed to replicate findings across cases (Stake, 1995). My research is considered to adhere to an *instrumental* case design insofar as its primary concern is not the case itself but its potential to explicate a particular phenomenon, that is, divergent health dimensions of leader embodiment and its relevance to the broader construct of leadership.

The decision to study a single organisation was made for strategic and pragmatic reasons. Given the sensitivity of information regarding personal health of senior leaders, it was foreshadowed that access could be problematic, and a decision was taken early on to focus on a single case that could be explored in depth to better understand the phenomenon in question. As Baker et al. (2012, p. 8) note, single case studies can be very useful when 'studying hidden or hard to access populations such as deviants or elites'. As high status organisational members, executives are notoriously difficult groups to access for the purposes of qualitative research. Prasad and Prasad (2002, p. 191) note that, 'Very few explore the sub-cultures of the corporate boardroom or the world of the administrative elites, for the simple reason that these more powerful natives are shielded from ethnographic observations.' Methodologically it may have been simpler to sample the views of individual leaders from different organisations; however,

whilst this approach may have relieved concerns regarding access and yielded interesting personal narratives, it would have been epistemologically inconsistent with the desire to understand the dialectic between the sociological *and* organisational constructions of leader embodiment.

3.2 Researcher Position

This epistemological grounding of this study follows a long tradition of qualitative research which acknowledges that all data is a construction, that is, a dialectic among the researcher, the research process, and the final textual product (Jordan & Yeomans, 1995). Alvesson and Sköldberg (2018, p. 11) define reflexivity as 'the *interpretation of interpretation* and the launching of a critical self-exploration of one's own interpretations of empirical material' (emphasis in original). Taking a reflexive stance requires the researcher to ask numerous questions of their own interpretative processes, such as:

> *Can I construct/make sense of this material in another way than suggested by the preferred perspective/vocabulary? Can I let myself be surprised by this material? Can it productively and fairly be constructed in a way that kicks back at my framework and how we—in my research community—typically see and interpret things? (Alvesson & Kärreman, 2007, p. 1270)*

These are questions that need to be engaged with not only during the process of writing about the research, but also through the embodied practices that are part of conducting research (Cunliffe, 2003). Dale (2001, p. 30) suggests engaging with one's embodied subjectivities in the research process can be construed as a political act because embodied ways of knowing are still regarded as esoteric and 'something that is seen to have no place in rational knowledge'. There are up sides to the marginalisation of embodied reflexive processes, however. Because they already exist outside the traditional contours in which scholars may 'typically see and interpret things', there is significant scope to reflexively explore the enmeshment of the body in scholarly work without fear of having to strictly adhere to the standards of more mainstream approaches to management research. This is a freedom necessary to those researchers who make the body, particularly the 'othered' body, a central proposition of their academic work.

Given the focus of this study on matters of embodiment, I have paid attention to the lived experience of the bodies of participants whilst conducting my research, especially the way they were presented, hidden, or amplified. I also engaged reflexively with my personal

corporeality during these exchanges, and how the presence of my own body was central to the process of making meaning from these exchanges. For example, and perhaps most obviously, my status as a white, educated and 'heterosexual-passing' man closely mirrored the majority of my research participants. I was therefore conscious that the body I occupied and the way it was available to be read by others, afforded me a particular privilege in the interview process. The interview experience is a social encounter and minimising 'social dissonance' between researcher and participant is considered a vital component 'to improve the quality of disclosure' (Myers & Newman, 2007, p. 16). Being 'like' most of my interviewees meant I was able to embody a 'relatable' presence, and when interviewing people occupying positions of power (in a time-pressured environment), this can be a significant advantage to a researcher.

I also became conscious of the way I cultivated my own appearance to be simpatico with that expected of employees in the corporate sphere. A blazer donned to read 'seriousness' and 'respectability', accompanied by smart trousers to give a relaxed and personable aura. These are practices that I largely engaged with unconsciously but that were, on reflection, all part of the way my own corporeality was central to the relative ease with which I was able to create a rapport with participants and successfully adapt myself in the corporate arena. Such reflections were important in terms of understanding the subtle pressures to abide by socially embodied norms and how non-conforming bodies may be experienced as 'other'. I became sensitised to the normative codes of leader embodiment, such that it was not so difficult to understand the struggle articulated by one female participant whose size and style of dress bucked the corporate code.

I also engaged more instrumentally with my own embodied subjectivities throughout the research process. For example, many of the participants would talk passionately and persuasively about the importance of exercise in their daily lives. After conducting numerous interviews in a single day, I began to notice the rush of adrenalin my own body would often experience after speaking with participants about their exercise regimes. I would sometimes leave the organisation's premises at the end of the day harbouring the uncharacteristic feeling that I needed to go for a run or do something physical to disperse the pent-up energy that was humming inside my body. When I became aware of this occurring repeatedly, I began to wonder if I was experiencing a kind of 'affect contagion' (Donner & Schonfield, 1975) from my research participants. Rather than suppress this, I made a conscious decision to experiment with it and took up running on a regular basis, a new experience for my otherwise moderately exercised body. I did this predominantly to engage with a theory that participants were

consistently arguing, that is, that their exercise regimes gave them the necessary stamina to do the work that they needed to do - which was why they pushed themselves to do it (often against the protest of their mind and body).

Whilst my own experiment was relatively short-lived, engaging with my own embodied subjectivity in this way was useful for a number of reasons. Firstly, I was able to reflect on the experience of affect contagion which became important in the later analytic stage of the research when I was attempting to understand the embodied dimension of 'energy' discourses. Secondly, it provided me with some insight into the importance given by participants to 'energy management', particularly how the physical release of energy was often discussed from a physiological perspective whilst the value of the performative dimension of exhibiting body mastery was generally overlooked. Finally, my own 'failed' running experiment provided a reflection point for the differently embodied capacities of leader's bodies. It left me to question how these limitations may need to be managed within an environment where the signifiers of fitness, as much as the lived experience of it, have become part of the well-cultivated imaginary associated with the leadership body.

3.3 Research Setting

NetCom is a large company with a workforce of over 8,000 employees and is situated within the Australian information and communications technology (ICT) sector. The organisation is privately owned by an offshore company, and many of the research participants reported directly to their overseas counterparts. The organisation has offices throughout the country, however, its main site is located on the east coast of Australia, which is where the bulk of its workforce and executive population is based. Like its competitors, NetCom is continuously striving to adapt and innovate in an environment that is facing major disruption due to rapid changes in technology. It is also having to respond to a climate of constant regulatory change and manage the growing consumer expectations associated with an on-demand culture. In recent years, NetCom has pivoted to developing itself as a credible player in the media/entertainment space and its streaming of sporting events has become a core part of this strategy.

Although it is not *the* dominant player in the ICT marketplace, it has a well-established and trusted consumer brand. Its status as a 'challenger' business, appeared to be central to NetCom's narrative and enabled it to project a more innovative, youthful and relatable brand identity. Another significant component of its brand was its association with (and sponsorship

of) sports and sporting athletes. This was rendered immediately visible to any visitor to the organisation's headquarters, which continuously broadcast live sporting events on a large screen in the cavernous main foyer, and had strategically placed cardboard cut-outs of athletes dotted around the campus.

As is the norm for many large corporate organisations, offering access to a suite of 'wellbeing' facilities and services was considered a standard component of employment conditions. The bulk of these services were located at their expansive main headquarters and included onsite facilities such as: a well-serviced gym, tennis/basketball court, crèche, fresh food markets and a large selection of eateries. In addition, there was a wide array of professional services available to all employees, including access to medical or allied medical professionals (e.g. GP, physiotherapist, traditional Chinese medicine practitioner, nutritionist, etc.). Employees were encouraged to participate in annual health events such as the National Heart Health Check and a variety of corporate charity health initiatives such as the annual cycling event, the NetCom Tour, which was also sponsored by the organisation. Information regarding NetCom's health and wellbeing offerings were made available to all staff via a comprehensive online wellbeing portal which all staff received access to during the onboarding process.

The health and wellbeing facilities and services noted above were accessible to all NetCom employees located at the organisation's main headquarters, while the online functions and some limited facilities and services were available at the smaller sites. Whilst executives were broadly encouraged to use the facilities and take up the services, there was no specific health and wellbeing program directed toward executives *per se*. There was, however, a free, annual executive health check ('health check') that was made available to approximately 70-80 of NetCom's top executives on a voluntary basis. This was outsourced to a private health and wellbeing provider and, at the time the research was being conducted, a new provider had been appointed. Part of the organisation's interest in participating in this research project was to better understand executives' perceptions of the health check and to learn why participation in the program had declined in recent years. After the fieldwork had been completed, NetCom decided to extend its executive health offering to include an online health and wellbeing assessment tool which was also administered by an outsourced provider.

Executives' views about NetCom's health and wellbeing culture are discussed in more detail in Chapter 4, however, it is worth noting here that there was a general belief amongst most executives that - despite the stresses associated with executive roles – the organisation was a better employer than most. This sentiment was reflected in the tenure length of some

executives; many leaders had been with the company since its establishment and had taken a number of roles before working their way to the top of the organisational hierarchy. It was not uncommon for participants to have been employed at NetCom for over 10 years, nor was it unusual for participants to invoke images of 'family' as they discussed their working environment. This workplace therefore provided a unique context to explore the research topic, given that it did not appear to reflect the hyper-competitive and individualistic norms of professional service firms in which the majority of leader embodiment research has been conducted.

3.4 Data Gathering

My primary contact for the research project was NetCom's health and wellbeing manager. Through discussions with this contact, it was established that there was a desire to improve executive take-up of the health check, and to better understand the reasons motivating executives' decision-making process regarding participation. Consequently, a four-question survey was designed using Qualtrics software to take a 'pulse check' of executives' perceptions of NetCom's health check. A link to the survey was distributed by NetCom to all executives that were currently eligible for the health check (n=70). The survey and results can be found in Appendix 1.

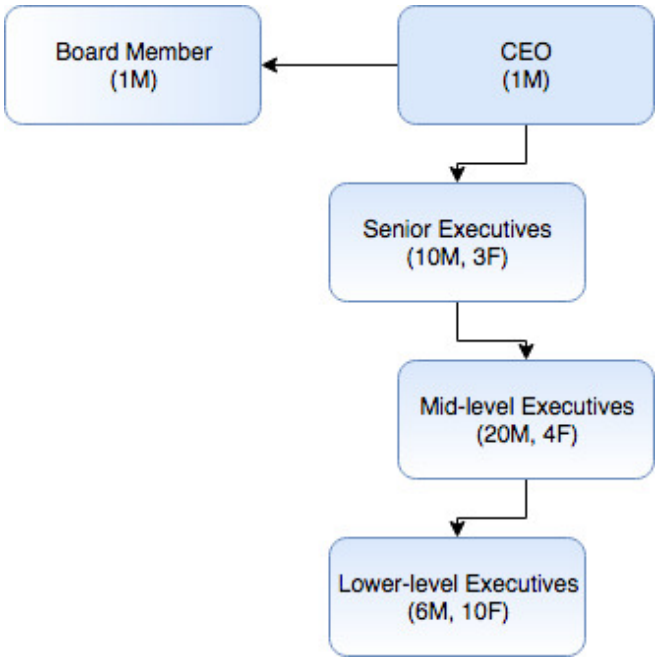
The final survey question asked participants whether they consented to being contacted by a researcher from the University of Melbourne to discuss the possibility of being interviewed for a research project on executive health and wellbeing. Of the 32 survey respondents, 23 (72%) expressed interest in being interviewed or learning more about the research. I contacted these individuals directly via email to arrange a suitable interview time, and, if no response was received, a further two follow-up emails were sent. A snowball sampling approach (Patton, 1990) was then adopted to identify further candidates for interviewing, that is, at the end of each interview executives were asked to nominate other individuals they believed suitable for the research project.

3.4.1 Interview Data

In total 54 executives (37M, 17F), including one board member, participated in the research project. An additional two (F) individuals were interviewed because of their involvement in and knowledge of NetCom's executive health and wellbeing program. The gender imbalance was reflective of the organisation's male-heavy executive team, and more

broadly indicative of the underrepresentation of females in senior roles within Australia[2]. When it became evident that there would be a very small pool of senior female executives to interview, it was necessary to seek out those in more junior executive positions to lessen (but not entirely remedy) the gender disparity. Therefore, the final research cohort consisted of individuals from three tiers of NetCom's executive team: senior, mid-level, and lower-level. They have been categorised according to their proximity to the CEO (see Figure 3). All participants were considered part of the broader executive team, though not all of the lower-level executives were eligible for the executive health check.

Figure 3: Participant profile by seniority and gender



All interviews, with the exception of one telephone interview, were undertaken in person in designated meeting rooms at NetCom's various offices. At the commencement of each interview, participants were asked to read the plain language statement (Appendix 2) and sign a consent form (Appendix 3) in order to confirm their agreement for the interview to be audio recorded, in accordance with the University of Melbourne's ethics protocol. The consent form contained a checkbox that asked participants to indicate whether they would like to receive

[2] According to the Workplace Gender Equality Agency (WGEA, 2018) women in Australia hold Women 13.7% of chair positions, 24.9 % of directorships, as well as represent 16.5% of CEOs and 29.7% of key management personnel in Agency reporting organisations.

a copy of the summary report which I had agreed to provide to NetCom at the conclusion of the research project – all but two participants checked the 'yes' box.

Interviews were semi-structured and ranged in duration from 30-70 minutes with the majority taking approximately one hour. Participants were asked a number of questions regarding their health and wellbeing, including: their views about the relationship between health and leadership; their experiences or perceptions of managing health challenges; and the role of organisations in supporting executive health (see Appendix 4). All interviews were undertaken in the period between November 2016 and November 2017; they were digitally recorded and transcribed verbatim by a third party. I checked each transcription for accuracy and made any adjustments accordingly. The original audio content was revisited throughout the analytic process to assist with the data interpretation.

Though the interview data formed the central component of the analytic process, I engaged with this textual information critically. Alvesson and Kärreman (2007, p. 1269) argue that researchers should not 'assume that the subject is reporting authentic experiences' but rather view interviewees 'as a politically motivated producer of what are, for him or her, favorable "truths," or as a person repeating institutionalized standard talk about a specific theme' (emphasis in original). Whilst I did not seek to reduce my participants' interviews to 'inauthentic' speech, I was careful to hold in mind the performative dimensions of leadership (Peck et al., 2009), both during the interview and analytic processes. Following each interview, I made field notes which captured my general observations of the interview I had just undertaken, and these notes also formed part of my critical analyses.

3.4.2 Field Observations

I spent approximately fifteen days in the field at NetCom's main campus, mainly conducting interviews, but I was also able to undertake observational research during this time. I was given access to a workspace, so was able to have informal conversations with members of staff, many of whom were not executives, and experience different aspects of the organisation's culture outside of the formalised interview environment. This became a useful lens through which I could experience the resonance and dissonance of the images and stories being generated by the research participants about NetCom's culture.

For example, many of the executives spoke about a culture of egalitarianism within the organisation which generally fostered a relaxed working environment between colleagues of different seniorities. I was able to see an example of this one afternoon when I was sitting at my temporary desk and noticed that a senior human resources executive was addressing his

staff who had gathered around him. He was wearing a pirate hat and speaking in 'pirate tongue' - it was 'International Talk Like a Pirate Day'. I later learned that this executive was the main instigator of celebrating the annual event, something that appeared to endear him to his colleagues as a very 'down to earth' leader.

I also spent time observing interactions in the main foyer, and also spoke informally with employees on the reception desk who became used to my regular visits. These informal conversations were a useful way of gauging other employees' observations about the culture executive health and wellbeing at NetCom. For instance, one receptionist noted how she had become quite inured to the presence of executives wearing Lycra; they would often traipse through the foyer first thing in the morning on their way to a workout at the gym, in the carpark or somewhere else on campus. These observations were written up as field notes and formed part of the analysis for the research.

3.4.3 Textual Documentation

The final component of data collection were key documents provided to me by NetCom, which were relevant to the organisation's approach to health and wellbeing (see Table 1). The majority of this data was not specific to executive health *per se*, and reflected more general policy documentation, but this in itself provided some insight into the relatively nascent status of executive health within the organisation. NetCom also provided me with access to their health and wellbeing online portal, which was available to every employee. The sheer volume of information on the intranet site (which included things as diverse as dietary advice, a location by location breakdown of available facilities and services, and invitations to participant in various health activities), gave the impression of a sophisticated and well-integrated approach to general employee health and wellbeing. It was indicative of why NetCom was perceived both externally and internally as a more progressive employer in the health and wellbeing space.

Table 1: Sources of textual data

Item	Text Source	Relevance
1	Case study of NetCom's approach to psychological safety	Profile of NetCom as a leader in the mental health space, through the implementation of a new program. Identifies a 'capability gap' in people leaders.
2	Executive participation in health check (multiple years)	Evidence of decline in take-up of annual health check over the past three years.
3	Employee health & wellbeing benefits screenshot	Lists key benefits to employees in terms of health & wellbeing, including ongoing support and subsidy of staff participating in corporate sporting events.
4	Presentation on mental health initiative	Presentation given by head of health & wellbeing, indicating that NetCom is viewed as a corporate leader in the mental health space.
5	Health & wellbeing strategy	One-page graphic document outline the importance of health & wellbeing to NetCom's overall strategic outcomes.
6	Published article with HR executive	Notes (male) executives' sporting allegiances. Discusses importance of organisational support for wellbeing but ultimately responsibility lies with the individual.
7	Organisational chart	Very clear underrepresentation of women in senior leadership positions.
8	Presentation of NetCom health & wellbeing	Delivered at a corporate health summit. Outlines strengths of NetCom approach. No mention of role of leaders, or executive health.
9	Health & safety policy	One-pager signed by Chairperson with a series of bullet points stating NetCom's commitment to health & safety.
10	Rehabilitation policy	One-pager signed by Chairperson with a series of bullet points stating NetCom's commitment to rehabilitation.

3.5 Data Analysis

I adopted thematic analysis as the guiding analytic frame for this research. Because thematic analysis is broadly defined and not beholden to the strong theoretical underpinnings of other qualitative, analytic methods (e.g. grounded theory), it can be useful to both reflect the shared meaning being made of a subject matter but also 'unpick or unravel the surface of 'reality'' (Braun & Clarke, 2006, p. 81, emphasis in original). This analytical approach enabled an interpretivist, critical reading of the data; that is, I was able to remain attuned to the way leader health was given specific meaning by participants but also consider participants' bodies as sites of contested objects of power within the broader leadership discourse. I took an inductive approach to the data analysis, such that the themes that were eventually identified originated from the data itself rather than a preconceived idea of how the data should adhere to particular theoretical constructs (Patton, 1990).

3.5.1 Initial Coding

The transcribed interview data was the primary source material used for analysis. My initial pragmatic concern was working with a software program that would enable the effective management of the large volume of transcripts I had amassed. After trialing several different programs, I settled on QSR NVivo and uploaded all transcripts and key organisational documentation into the system. Before uploading any transcripts, I ensured their veracity by reading them whilst also listening to the original audio recording. Once necessary amendments were made to the transcripts, the documents were finalised for the commencement of analysis.

I had entered the field with the following exploratory research question in mind: *In what ways is a leader's health and wellbeing viewed as central to leadership, and what does this reveal about the role of the body in performing leadership?* With this question in mind, I adopted open coding (Strauss & Corbin, 1998) as an initial analytic tool to begin the process of familiarising myself with the data and formulating codes. I began the process of open coding as soon as the transcribed data became available, whilst I was still in the field. The aim of the coding at this stage was to remain tentative but '*open up* the inquiry' (Corbin & Strauss, 1987, p. 29. emphasis in original).

I used *in vivo* codes as a way of staying close to the fieldwork material; these are generally evocative phrases or words used by the participants themselves that have 'a very vivid imagery, inclusive of much local interpretative meaning' (Corbin & Strauss, 1987, p. 34). They are a way of beginning to explore the data, whilst remaining free from the responsibility to understand how the codes may be used later in the analytic process (Emerson et al., 1995, p. 151). One example of this was the phrase 'Buzz Lightyear', which was used by multiple participants as a way of referring to their perceptions of the masculinised norms of leadership. This provided an early insight into the way some participants were challenging (and challenged by) the caricatured expectations of leaders, particularly when an embodied crisis occurred.

3.5.2 Memo Writing

During this initial phase of analysis, I also worked with 'memo writing' within the NVivo software to notate early 'interests, leads and hunches' (Charmaz, 1990, p. 1162). Their purpose is predominantly two-fold; they provide an opportunity to explore tentative relationships between empirical material, and they begin to make explicit the emerging assumptions that the researcher is making. Memos are written in 'informal, unofficial language for personal use, rather than public consumption' and as such they should be 'spontaneous, not mechanical… free and flowing, they may be short and stilted' (Charmaz, 2006, p. 80). At a

practical level, memo writing enabled me to begin the process of sensitising myself to the early data and then, further hone my interview guide before reentering the field to focus on those questions that seemed to yield interesting responses. For instance, early in the data gathering process I had observed a tension in how participants viewed the organisation's responsibility for their health, and made following notation:

> *- Only those who are sufficiently self-authorised will reach out, some require encouragement from their superiors especially, but maybe also peers*
> *- Is the theory that because they operate at a high level they are automatically self-authorised?*
> *- Leaders may have various strengths but they may not always know how to manage themselves or their bodies or their work in a way that is not to their detriment*
> *(NVivo memo, 10/11/2016)*

To explore this 'hunch' further, during future interviews I enquired more specifically about the direct responsibility for leader health, and how the process might be managed when leaders themselves needed support. This line of inquiry eventually developed into the category, 'personal responsibility and leader health', to denote that it seemed less permissible for leaders to engage in help-seeking behaviours because of its perceived potential to undermine a leader's 'brand'. I continued with memo writing through the duration of the analysis period, using it as mechanism to continuously note my hunches, questions, and insights.

3.5.3 Thematic Coding

From a process of open coding where I began to develop a familiarisation with the content of the interview transcripts, I then moved beyond the semantic content of the data, and began to 'examine the underlying ideas, assumptions, and conceptualizations and ideologies' (Braun & Clarke, 2006, p. 84) contained within the texts. Saldaña (2013, p. 207) notes that the 'primary goal during Second Cycle coding is to develop a sense of categorical, thematic, conceptual, and/or theoretical organization from your array of first cycle codes.' Using the *in vivo* codes, documents, memos, and field notes as the basis to develop my 'hunches' about the data, I began to reread the interview transcripts in order to refine the codes. From over 200 *in vivo* codes, I was left with 72 codes which I then classified under broad headings which I used as a heuristic device. This included topics such as: executive identity, executive health culture, leadership and vulnerability, weight issues, gender norms, etc.

Through a process of *selective coding,* I began 'focusing on 'key', rich or 'revealing' incidents' (Emerson et al., 1995, p. 155, emphasis in original), within these codes and noted patterns that emerged in the data. For example, I had noted that one informant became extremely uncomfortable when discussing her views about overweight leaders and was self-conscious about her opinions being audio recorded. This drew my attention to exchanges with other participants that centered on weight and leadership and led to the formation one of my first categories – 'relationship between weight, energy and competency'. In distinguishing 'codes' from 'categories' Saldaña (2013, p. 8) suggests that 'codes are essence-capturing and essential elements of the research story' that 'facilitate the development of categories and thus analysis of their connections'. Categories therefore represent a higher level of abstraction than codes and allow for a deeper level of interpretation and systematization of qualitative data. The category development then formed the basis for the development of a number of key themes (see Tables 2-5).

Table 2: Coding progression - The 'fit body'

THE FIT BODY		
Categories	**Sample Quotations**	**Themes**
Response to job demands; fortifies the body; demonstrates 'leaderly' self-discipline; facilitates energy management	*I think you do need that extra…**strength and that fitness** level to be able to cope with the **mental pressures** as well as the **amount of hours** you've got to do to be able **to keep resilient**. (Warren)*	**Fitness inscribed into the work of being a leader**
Dubiousness surrounding athletic norms; socio/ organisational cultural differentiation; countering perceptions of elitism; athleticism as a relational impediment; temporal dimension to cultures of organisational athleticism	*Maybe in **Australian culture**… [corporate athleticism] would come across as **a bit wankerish**, whereas in maybe **US culture**, I think that's probably a bit **more acceptable**. (Neil)* *For an organisation to perform and for people to be inspired, **we don't need those executives to be ultimate athletes**… if people **can't actually connect** to what they're doing and apply that in their own lives, then **it's wasted**. (Sean)*	**Resistances and contingencies**
Homosocial bonding; cliques and cults; executive influence over athletic culture; sanctioned spaces for (masculine) vulnerability; leader obliviousness; enhances team effectiveness	*'You can get things done **a lot easier** with the folks that you are training with, because **they get the picture** - there's **a performance culture** around it. I see that.' (Quinn)* *'I think there was something **quite vulnerable** about seeing one another in such a **physical state of exhaustion**, I guess.' (Finn)*	**Upholding masculinised norms**
Discourses of 'energy speak'; energy management equals leader effectiveness; pushing the body to its limits; excesses of energy; energy and charisma; Tyler as energy exceptionalism;	*Tyler has **a lot of drive**, he's a highly competitive individual, **he wants to win**, he wants the team to win, he wants to feel good. He's got that **whole serotonin [thing]…**the one that the **gym gives you.** (Shauna, Lower-level Executive, Sales)* *He's the **highest energy leader** around and to try and match that is silly… It is his high energy and if you try and match that energy each meeting and each day, **you will burn out**. (Serena)*	**Energy central to leader identity**

Table 3: Coding progression - The 'fat body'

THE FAT BODY		
Categories	**Sample Quotations**	**Themes**
Reframing discomfort as concern for others; evocation of pity/ revulsion; fostering a non-discriminatory workplace; conflation of weight and health; absence of self-respect;	*'...**judging** people by their physical appearance…It's just **not something you're allowed** to do here.' (Reggie)* *'I don't know, but do obese people have as much **self-respect** as **fit people**? I don't know. It's **nice to work** with people that respect you but also **have a bit of self-respect.**' (Blair)*	**Reinforcement/denial of weight biases**
Leadership requires a 'fit-for-purpose' body; symbolic of a lack of (embodied) control/lack of self-discipline/body mastery; assumptions about weight and performance; impact on recruitment; relationship between weight, energy and competency	*'So you look at leaders, if they're **not** quite as **healthy looking** then I don't think that people view them in the same way. **Not these days**.' (Shauna)* *'What does it say if you don't take that **pride in yourself**? I need someone that's going to have **lots of energy**, **lots of drive** and think that is more than physical appearance but I think that's part of it.' (Callie)*	**Stigmatising potential of weight in leadership**
No acceptable excuses for being overweight; self-critique of fat bodies; impact of work on weight; isolating effects of fatness; comfortableness in own skin	*'If our former Prime Minister Tony Abbott had time to exercise… There's **no reason** that a corporate senior manager can say that they just **don't have time**.' (Bianca)* *'But I think I'm **very comfortable** in **my own skin**… there's a lot of **societal pressures** on how you look and how you're perceived which are **reflected in the corporate space**.' (Serena)*	**Lived (and ordinary) experience of fat leaders**

Table 4: Coding progression - The 'sick body'

THE SICK BODY		
Categories	**Sample Quotations**	**Themes**
Sickness equated with weakness; a failure of self-management; lack of competence; undermines illusion of control; triggering organisational panic	*[illness] would be seen as a **weakness**. **They haven't managed themselves**. They haven't looked after themselves. (Mary-Louise)* *... you don't want the commander-in-chief to be incapacitated and **we're all lost at sea** as a result of them not being there. (Jacob)*	Stigma of a 'less than ideal' body
Brand management; issues of disclosure; negative impact on career runway; help-seeking behaviours; disguising/minimising illness visibility	*…our **brand and image** is, you know…when you're working in a large corporation the **pressure** in terms of **how you're perceived** or **how you need to be perceived** is there, absolutely it is. (Abigail)* *I'd rather be a few minutes late and walk in **not huffed and puffed** than walk in on time and have that **perception** of Warren, **he's not coping.** (Warren)*	Negotiating a stigmatised identity
Reframing career/ personal priorities; engaging in workplace activism; changing habitual behaviours; displaying 'ethical sensitivity' towards others; returning business as usual	*I think it's influenced my… **ambition**… I said, well okay, let me more look at what I can learn and keep myself motivated by learning things **rather than necessarily just promotion** and **more work**. (Warren)* *So I'm **active and open about it**, not everybody is. But you do find when people know that you've had an illness like that, **other people** in the organisation come and **talk to you**. (Cynthia)*	Possibilities and limits of epistemological transformation

Table 5: Coding progression – Personal responsibility and leader health

PERSONAL RESPONSIBILITY & LEADER HEALTH		
Categories	**Sample Quotations**	**Themes**
differing expectations of leaders; dissolution of personal/ professional boundary; lack of work/life balance; limited opportunity to express vulnerability; 'opt-in approach'; individual agency trumps structural factors	*We have rhetoric about supporting work-life balance and in the whole always we will do our utmost to make sure that our frontline employees…have a good life balance, have a good health and wellbeing. However,* ***there is a very different level of expectations of senior leadership. We don't have it. It's almost like we have no need for that.*** *(Jennifer, Mid-level executive, Finance)* *Some people will just plough on regardless and be* ***oblivious to any health call-outs*** *that they get and just continue to kill themselves until - sorry, work until they kill themselves****, but that's an individual thing. It's not a corporate culture that drives that. It's an individual desire…*** *(Reggie, Lower-level Executive, Operations)*	Leader health, leader responsibility

3.5.4 From Analysis to Research Question

It was in the movement from categories to themes that I began to reevaluate my exploratory research questions in light of the emergent data and the extant literature I had reviewed. I was cognisant of avoiding the tendency to look for literature 'gaps' and was instead guided by a desire to generate research questions through problematisation, that is, 'identifying and challenging the assumptions underlying existing theories' in the hope of generating 'more interesting and influential theories' (Alvesson & Sandberg, 2011, p. 247).

Constantly moving between empirical data and theory, I became gradually more drawn to the work of critical leadership scholars who were questioning the assumptions that underpinned the embodiment of leadership (e.g. Charmaz, 2006; Collinson, 1994; Connell & Wood, 2005; Ford & Harding, 2011), in particular the idealisation of masculinity as the default norm. I noted that whilst there had been some insightful analysis into corporeal idealisation, there had been little exploration of the stigmatisation of bodies that did not live up to these expectations. Further, the critical literature exploring athleticism seemed to suggest a

homogenous and non-reflexive view of athletic cultures in organisations, which was at odds with my empirical data.

Drawing upon the key themes I have previously outlined, I observed that three dimensions of leader health were consistently present in the data: fitness, fatness and sickness. With these classifications in mind, I collapsed my main themes and their corresponding categories under three main concepts: the fit body, the fat body, and the sick body. Underlying each of these appeared be a set of assumptions about the agency of leaders and the responsibility they had for their own health. This assumption appeared to ferment a contradiction between the establishment a bona fide leadership identity and the expression of an embodied vulnerability. It is the tension between these areas that my research primarily explores.

3.6 Conclusion and Research Question

In this chapter I have outlined the epistemological and theoretical perspectives that have framed this study; specifically noting that this research is located within an interpretivist paradigm, and drawing on critical leadership studies in order to critique the normative assumptions of embodiment in leadership studies. I have articulated how I engaged reflexively with this research, noting the importance of my embodied subjectivities as part of the sensemaking process. I have discussed the research design, data gathering and analytic processes that led to the development of the research question that underpins this study:

> *How do leaders make sense of the relationship between leadership and health, and what do the shared meanings made of the 'ideal' and 'less than ideal' body reveal about the norms governing leader embodiment?*

In the following four chapters (Chapters 4-7), I will provide an empirical account of the data that I have collected in accordance with the overarching themes discussed above. Each empirical section is followed by a discussion that draws upon the relevant theoretical frames to provide an analytic account of the empirical data as it relates to the research question. The following chapter begins with an exploration of NetCom's executive health and wellbeing culture and discusses the problematic assumptions which undergird the idealisation of the leaders' self-managed body.

Chapter 4: Personal Responsibility and Leader Health

This chapter provides contextual information for the chapters that follow and focusses on participants' general perceptions of NetCom's executive health and wellbeing culture. Specifically, I will discuss what was referred to as the organisation's 'opt in' approach to executive health, a phrase that encapsulated NetCom's devolved role in executive health and wellbeing. I note how the boundary between personal and organisational responsibility for executive health appeared to become more contested when participants spoke about the challenges to their own health. I suggest that the executives' comments appeared to reveal a set of underlying assumptions about the permissibility of leaders' seeking support from NetCom, which did not necessarily correspond to the organisation's health and wellbeing rhetoric. I argue that these contextual factors are important to foregrounding the value that NetCom's culture places on body sovereignty and individual control over one's health, and the tensions that may exist for leaders whose bodies may challenge the norms of leader embodiment. Finally, I conclude with a discussion about central role of the self-managed body in the construction of leader as an 'ideal worker', and the constraints this may impose on the expression of embodied vulnerabilities.

4.1 An 'Opt-in' Approach to Executive Health

There appeared to be a consensus amongst executives that whilst NetCom had a strong policy focus on health and wellbeing across the broader organisation, there was no consistent, discernible executive health 'culture' *per se*; rather, NetCom's approach to it leaders' health and wellbeing was largely viewed as 'opt in'. This phrase encapsulated the view that while there were adequate services and infrastructure in place to support executive health, and though some efforts were made to encourage take up, participation ultimately remained voluntary and at the individual leader's discretion:

> *…there isn't a group culture that really embraces or you know talks about or has planned for executive health…It's pretty much up to the individual to manage all physical and mental, and overall well-being level. So…I can't say that, I can't comment on the culture because there isn't, in my observation, an executive health culture. (Benjamin, Lower-level Executive, Sales)*

> *I think it's more of a case of there are some basic…amenities given to you, and it's really up to you to look after yourself, so [no] obligation. (Tristan, Senior Executive, ICT Infrastructure)*

I think generally executive health is subject to an individual's choice as to what they want to do, but the company certainly encourages and supports leading a healthy lifestyle. (Bryce, Senior Executive, Finance)

They make a lot of things available, but the self-serve model means it's kind of up to you to help yourself get there. (Tai, Mid-level Executive, Business Development)

Whilst NetCom was noted as being supportive of broader staff wellbeing, these comments suggest that there was no coherent *executive* health culture. The 'self-serve model', as one executive described it, appeared to place the emphasis on the intrinsic motivation of each leader rather than on mandating any explicit wellbeing policy. NetCom provided the 'basic amenities' and 'encourages and supports leading a healthy lifestyle' but ultimately it was viewed as an executive's call about how they 'get there'. By relegating the organisation to a purely facilitative role, this approach appeared to place an emphasis on personal choice and self-management, thereby affirming the view that senior leaders are 'in control' of their own bodies.

The 'opt in' philosophy was one that appeared to extend throughout the organisation; from management's decision to ensure there was both healthy and 'unhealthy' food available in the workplace - 'because it's people's choice' - to the implementation of 'smoking zones', which one executive described as 'bizarre', considering the known effects of smoking cigarettes. The 'opt in' approach was also noted as being consistent with NetCom's 'slightly out there, slightly innovative' culture, which preferenced individual expression over centralised control. According to Dale, who oversees the organisation's HR function, NetCom does not have a culture that would respond positively to a 'mandated' approach toward executive health:

…it's not a culture I can tell people what to do… That culture doesn't allow for me to force people to do [that], it doesn't work. So, it's got to be opt in and from my own personal view, if you get opt in, you get a far better outcome… So, I'm comfortable with opt in, but it's a very different strategy to mandated. But culturally where we've come from is not a culture of mandate, it doesn't work. (Dale, Senior Executive, HR)

Mandating any form of overt control over an executive's health and wellbeing was perceived to be counter to NetCom's cultural norms, which strongly reinforced an individual's autonomy and right of employees to make choices for themselves. Rather than attempting to

enforce a more overt executive health policy, Dale suggests that 'a far better outcome' is achieved by allowing executives to take up the services they feel they need, when they need it. Dale is emphatic that a 'culture of mandate… doesn't work' and suggests that historically, NetCom's culture is one that has valued personal choice. He went on to make a further distinction between the way executives at NetCom and its Asian-based offshore parent company ('ICT Corp') responded to an 'opt-in' approach:

> *But in ICT Corp, if a leader asks you to do something, you don't question them, you just do. That's a very different [culture]- opt in works really well up there, absolutely works perfect up there. They love it, they don't have to think, down here we like to think and challenge. (Dale, Senior Executive, HR)*

Dale seems to suggest that ICT Corp's collectivist orientation, which operates under a more traditionally hierarchical model, means an 'opt-in' approach effectively achieves the same result as a formal mandate because employees are culturally primed to 'just do' whatever a leader asks. This infers that the meaning of 'opt-in' may be interpreted differently, depending on the cultural lens through which it is filtered, that is, 'opt in' may be read as 'culturally compulsory' even if it is not technically so. According to Dale, a culture that fosters its leadership to 'think and challenge' is incongruous with a mandated approach to executive health, presumably because he believes such a policy is likely to be perceived as overly paternalistic and therefore an infringement upon the autonomy and privacy of leaders. This view seems to have informed NetCom's thinking about executive health which has sought to move from 'awareness to action' through expanding the services offered, promoting services, and encouraging (rather than mandating) participation. To support his observation that this approach is working, Dale noted that he had seen a marked improvement in the health of the executive population overall:

> *I don't see a huge amount of burnout. I've seen prior years where the organisation's really on a knife edge. There's not high burnout, there's not a tremendous amount of sickness. There's some stress but it's not anywhere what I've seen in the past. (Dale, Senior Executive, HR)*

Dale suggests that the proof is in the pudding when it comes to NetCom's 'opt-in' policy; he argues that there has been a reduction in the levels of stress and burnout in the organisation and 'not a tremendous amount of sickness'. From a managerial perspective then,

the ‘opt-in’ approach seems to be rationalised as not only culturally appropriate, it is also deemed to be strategically sound and yielding successful outcomes where overall executive health is concerned. There was a clear reluctance to appear too heavy-handed in matters pertaining to personal health. Jason, a non-executive director who was also a former CEO of the organisation, noted that an ‘opt in’ policy does not mean that NetCom is ‘hands off’ when it comes to executive health:

> *It's [not] hands off. It's opt-in. So I think there is an important distinction between the two. If you opt in there is tremendous resources available to you. But yeah, I think this issue of privacy and how we operate makes, certainly makes us culturally a little bit reluctant to intrude too much. But I would like to think that people feel that if they want to get involved then we're there. (Jason, Non-Executive Director)*

Where ‘hands off’ might imply that an executive is left completely to their own devices, an ‘opt in’ approach avails leaders of NetCom’s ‘tremendous resources’ should they ‘want to get involved’. Jason seems to affirm Dale’s position that historically there has been a cultural reluctance to ‘intrude too much’ into the personal health of executives, and he contextualises this view as an ‘issue of privacy’ rather than being rooted in a lack of concern for its senior staff members. It appeared that NetCom management interpreted the ‘opt in’ approach as reinforcing a benign boundary of care, whereby NetCom’s health and wellbeing resources were made available to executives at their discretion, without judgement or expectation. However, this boundary seemed to become somewhat less clear when the conversation shifted from a general discussion about the provision of health and wellbeing services to the challenges of seeking out organisational support in times of greater need.

4.2 Beliefs About the Self-Managed Body

The daily exhortations of working in a competitive and demanding corporate climate appeared to furnish some NetCom executives with a somewhat sceptical view of the mantra of ‘work-life balance’. For many executives, a focus on health and wellbeing was perceived to be incompatible with the realities of executive life. The working environment of NetCom was indicative of many corporate firms in the ICT sector in that it was variously described as being highly competitive, mentally and physically demanding, and extremely results-driven with ‘little room for non-delivery’. Therefore, it is perhaps unsurprising that a number of executives

expressed views like Sean, who gave a very stark impression of what he perceives to be the reality of life at the top of the organisational pyramid:

> *…whatever sign of weakness that you actually have, if people are wanting to exploit it, it's just another possible chink in the armour that can be seen and people will focus on that and manipulate that against an executive…So I think there's more pressure on executives today around no chink in [their] armour. (Sean, Lower-level Executive, Sales)*

Sean evokes some well-worn imagery of life in the corporate fast lane; one where there is no room for weakness, where the threat of scrutiny and manipulation is common, and where people are out to exploit any 'chink in the armour' that may become visible. From such a perspective, it is easy to understand how NetCom's corporate promotion of organisational health and wellbeing may be met with occasional scepticism by executives. Jennifer commented that there is an 'underlying level of stress, level of high expectation, of turnover, of long hours, of deliverables, that is incongruent with that very healthy lifestyle.' Her experiences of senior leadership seemed to lead her to the conclusion that the expectations placed on executives were not matched by the levels of support offered to them:

> *We have rhetoric about supporting work-life balance and in the whole always we will do our utmost to make sure that our frontline employees…have a good life balance, have a good health and wellbeing. However, there is a very different level of expectations of senior leadership. We don't have it. It's almost like we have no need for that. (Jennifer, Mid-level executive, Finance)*

Jennifer's view was supported by Michelle who also noted that NetCom's rhetoric about health and wellbeing was not necessarily matched by a commensurate practice:

> *If you're talking about from the top down, the messaging that comes about health is - it's very much a corporate message about yes, we need to look after our people. I think that when the rubber hits the road and the numbers aren't doing so well, nobody cares if people are working 24 hours a day. So it's just 'do it' type attitude. (Michelle, Lower-level Executive, Business Development)*

Jennifer and Michelle identified what was to become a consistent theme of this research, which was that the rules of engagement for health and wellbeing were very different for

executives than for lower-level employees. With few exceptions, the view appeared to be that the higher one's organisational status, the more personal sacrifices an individual was expected to make which could then affect their health. Further, there was an implicit expectation that leaders were expected to draw upon their own resources rather than those of the organisation to manage risks to their personal health and wellbeing. As Jennifer suggests, the end result of this assumption is that when it comes to an executive's health, 'It's almost like we have no need for that.' Some NetCom executives viewed the structural nature of executive life as being a primary impediment to maintain their health and wellbeing. The comments below were emblematic of the struggle some NetCom executives articulated about managing the personal/professional boundaries:

> *...you have zero time to think about anything else so home life suffers, family life in general suffers, your relationships suffer, your health suffers just by having way too much on. (Raymond, junior executive)*

> *The work-life balance sometimes you feel is a little lip service… So, if I said, okay, I'm going to work nine-to-five, all that would happen is the pressure would build. So, to manage that, I work pretty long hours. (Grant, senior executive)*

Generally, however, NetCom executives appeared to be reluctant to blame a lack of time for failing to build an exercise schedule into their day; as one participant noted, a failure of time management was not a satisfactory excuse for someone in a position of seniority:

> *If our former Prime Minister Tony Abbott had time to exercise, look at John Howard [former Australian Prime Minister], he was doing his morning walks all the time. Or look at Obama, he can play basketball. There's no reason that a corporate senior manager can say that they just don't have time. (Bianca, Low-level executive, Retail)*

Despite these struggles, one set of logics that seemed to be consistently put forward by NetCom executives was that, by virtue of their seniority, they had to navigate a completely different set of beliefs regarding organisational dependency. As another executive noted: 'I think there's that level of expectation that… at the end of the day it's your decision to be in that role, then you should be able to manage that.' (Warren, Mid-level Executive, Finance). Being a high status worker appeared to somehow delimit the permissibility of seeking out

organisational help, or at least, compounded the complexities of doing so. This in turn oriented the way some executives thought about their right to *impinge* on NetCom for organisational support when it came to matters regarding their health:

> *…certainly if anyone in my team were unwell then they would…have my full support around their health and also maintaining their employment. But it's a different ball game when you move further through the senior executive ranks. (Benjamin, Lower-level Executive, Sales)*

> *I would certainly say that to my senior people that work for me, if you need something, you let me know so that I can be aware. I guess that there is not a space created for us to be able - for me to be able to call out that I needed help. (Jennifer, Mid-level Executive, Finance)*

> *Once you get up to the executive levels or even the senior management levels it's more, it's your accountability, it's your life, it's your health, you need to look after it. Someone else can't look after it for you. (Albert, Mid-level Executive, ICT Infrastructure)*

Benjamin, Jennifer and Albert articulate a clear distinction between the avenues of organisational support accessible to lower level employees than senior leaders; for the latter, it's a 'different ball game' because 'it's your accountability'. These comments suggest a perception that the further one climbs up the organisational hierarchy the less one can expect to lean on the organisation in times of difficulty, and the more one should draw upon your own (internal and external) resources. Some executives seemed to interpret this differentiation as being indicative of a lack of organisational care shown by NetCom management. For instance, in response to a query regarding whether the organisation showed concern for its leaders' health and wellbeing, George noted that:

> *… I think maybe the next levels down I can see what you're saying [about NetCom being a supportive organisation]. But I don't see that in the top team - yeah, I don't see that in the top team. (George, Senior Executive, Sales & Marketing)*

George clarified that he is 'not saying that the company didn't 'care', however, organisational support for the health of the senior management team is not something he believed to exist. In this way, he is echoing the thoughts of other executives who suggested that there are different rules that apply to executives, that is, the higher one climbs, the greater the pressures and expectations, the less one should expect organisational support. These are views

that one might anticipate - particularly when considering the overriding perception of leadership as an individualistic, heroic ideal – but they begin to shed some light on the complexity of health management for senior leaders who may have internalised a leader identity that precluded the expression of embodied vulnerability.

4.3 Discussion

When discussing the management of their health and wellbeing, NetCom executives generally subscribed to the doctrine of personal responsibility (Leichter, 2003), that is, they considered that the onus was on each individual leader, rather than an organisation, to take responsibility for their health. Their views are consistent with the individualistic principles that underpin contemporary health discourses in many western, liberal democracies, including Australia (Cheek, 2008). These discourses suggest that leaders must epitomise the 'enterprising self' (Rose, 1990), taking care to shape their own lives and bodies through individual choices that have self-improvement as their primary goal (Bröckling, 2005). The experience of some NetCom executives, however, suggested that this ideal existed in tension with the lived reality of bodies that do not always cede to an individual's desire for control. An executive's health and wellbeing, no matter how well it is managed, is also subject to fluctuations, making the steadfast adherence to the doctrine of personal responsibility a challenging proposition for some leaders.

Part of the conundrum that NetCom executives seemed to be articulating was the belief that the responsibility for self-management increased the higher a person ascended the organisational hierarchy. Therefore, whilst it was acceptable for lower level employees to display a dependency on the organisation for their health and wellbeing needs, for leaders, demonstrating such a need could expose a 'chink in their armour'. Executives felt that they were expected to uphold the mantra of 'it's your accountability, it's your life, it's your health', which suggested a low tolerance for the expression of embodied vulnerabilities in leadership. I contend that what these executives' comments reveal, is the central role the self-managed body plays in constructing leader identity - it is the contained, controlled, and masculine body that epitomises a leader's symbolic status as the 'ideal worker' (Gatrell et al., 2017).

The ideal worker 'believes that everything is a personal responsibility - and a personal victory - rather than ever being a result of structural circumstances' (Ekman, 2015, p. 596). In its original conception, the notion of an ideal worker denoted 'the male worker whose life centres on his full-time, life-long job, while his wife or another woman takes care of his personal

needs and his children' (Acker, 1990, p. 149). Over time the hegemony underlying this construct has been rendered less visible such that an 'ideal worker' now defines any worker (irrespective of gender) 'who can effectively balance their professional commitments with their non-work personal desires' (Bloom, 2016, p. 595). However, the 'balance' referenced here should not be interpreted as working towards a genuine aspiration of a reasonable work/life balance, rather 'the ideal worker schema reflects the assumption that workers should privilege work over other roles, exhibiting full devotion to the organization' (Dumas & Sanchez-Burks, 2015, p. 821).

Management scholars have critiqued the notion of the ideal worker from numerous perspectives, including: problematising the assumptions underpinning personal/professional boundary management (Bloom, 2016; Dumas & Sanchez-Burks, 2015); calling out the normalisation of extreme work (Bloomfield & Dale, 2015) and overwork (Lupu & Empson, 2015); and identifying the gender biases inherent in the construction of such an ideal (Gascoigne et al., 2015; Stone & Hernandez, 2013). It is the latter research that has paid most attention to the embodied dimension of the ideal worker, in particular, the deviation of female, managerial bodies from the masculine standards of leadership.

The fluctuations that are viewed as innate to female embodiment have been constructed as proof of unpredictable or 'out of control' bodies (Haynes, 2008). Menstruation, pregnancy and menopause (and the emotions that may be associated with such physical changes) can all be signifiers of a body that has the potential to disrupt the business goals of production (Gascoigne et al., 2015). Gatrell et al. (2017, p. 246) note that whilst the lived experience of male bodies may invariably mean that they are not (in reality) always healthy 'the *idea* that male bodies are physically robust confers advantages for men in organizations' (emphasis added). Whilst I support these arguments, I also seek to extend this critique by suggesting that these 'advantages' can also become impediments when leaders' bodies (both female and male) betray the principles of self-management that underpin contemporary health and wellbeing discourses.

According to the ideal worker thesis, responsibility for one's health lies with the individual who must consistently maintain practices that discipline the body to effectively manage the professional/personal boundary (Dumas & Sanchez-Burks, 2015). For many NetCom executives, engaging in practices of self-care (through regular exercise regimes for instance) was viewed as critical to enabling them to manage their work and non-work lives effectively. However, such 'technologies of the self' (Foucault, 1988) are not neutral practices

that only impact the health and wellbeing of leaders. They also signal the adherence to a self-management protocol which validates their status as leaders (Lovelace et al., 2007), thereby granting them the moral authority to control the bodies of others. As Ehrenreich (2018, p. 62) suggests, there is a 'widespread suspicion that if you can't control your own body, you're not fit, in any sense, to control anyone else.'

Maintaining the visage of the self-managed of body, however, is not an unproblematic proposition for organisational leaders. Some NetCom executives were able to acknowledge the difficulties of maintaining consistent self-care practices in a role that implied they 'had no need' for, or indeed no claim to, work/life balance. The perceived lack of time available for self-care was not deemed to be an adequate 'excuse' for not prioritising one's health, as it conflicted with the belief that as members of the 'dominant classes', leaders 'have the time and resources to treat the body as a project' (Shilling, 1993/2012, p. 139). Failing to prioritise one's health was therefore commonly reasoned as a failure of self-management, as Kirkland (2014, p. 977) suggests:

> *Striving for wellness is a personal responsibility that an individual can achieve if she really wants to, and if she fails to undertake it, it must be because she lacks information, access, or incentive.*

The executives that spoke about the challenges inherent in the self-management ideal appeared to identify a struggle to negotiate the paradox of their autonomy (Mazmanian et al., 2013). As high status employees, NetCom executives enjoyed a significant degree of discretion over personal and organisational resources, however, some of their accounts suggested that this autonomy was constrained in the face of their job demands. The role of 'leader' was imbued with the expectation to forgo work/life balance because being an executive necessarily demanded this degree of sacrifice of the personal/professional boundary. In this they epitomise the ethos of the 'ideal worker', whose single-minded devotion to work is paramount (Dumas & Sanchez-Burks, 2015). To demonstrate a struggle to live up to these expectations is to signpost that one is not coping and therefore has failed to self-manage (Pedersen, 2008), potentially devaluing one's leadership credentials.

Michel (2014, p. 515) refers to this paradox of autonomy as 'self-entrapment' and notes how those in positions of power 'can also entrap themselves into structures of their own making' which they appear to have chosen for themselves. She argues that the 'self-entrapment of the powerful is less visible' as the actors themselves 'do not notice it', because ultimately it

is experienced as self-chosen (Michel, 2014, p. 515). Whilst Michel's research is specifically referencing knowledge workers, I suggest, that this can be extended to leadership more broadly. In fact, the problem of 'self-entrapment' may be even more pertinent to leaders who are the symbolic emissaries of their organisation, and for whom there is a pressure to model behaviours that demonstrate they have control over their domain (Muhr et al., 2012) - including the personal domain of their bodies.

The comments of some NetCom executives suggest that where a leader's health is concerned, demonstrating a vulnerability can become problematic for an elite class of people whose bodies represent the self-management ideal. Executives have access to significant economic resources and occupy bodies that are signifiers of organisational power; they cannot easily decry the structural conditions they are seen as having created and benefiting from (Fotaki & Prasad, 2015). Images of contained and 'in control' bodies are central to the hegemonic masculinities that dominate leadership (Collinson & Hearn, 1994) and the perceived absence of such control exposes a 'weakness' that may diminish a leader's status and their ability to claim authority over others.

4.4 Conclusion

This chapter has provided an insight into the perceptions of NetCom's executive health culture, to the extent that such a 'culture' was deemed to exist, and provides important contextual information for the findings that are to follow. By focussing on management's commitment to an 'opt in' service model, I have sought to convey the degree to which the doctrine of personal responsibility has informed NetCom's approach to executive health. I suggest that by emphasising executive autonomy and personal choice, the organisation seemed to simultaneously reinforce the idea that a leader is in control of their own health, and relegated its own role to that of a supportive partner. I have noted that whilst executives by and large agreed with this approach, it was more likely to become contested when leaders discussed the challenges of seeking organisational support when their own health and wellbeing was threatened. The comments of NetCom executives indicated that they could feel there was a disconnect between the organisational rhetoric of health and wellbeing and the lived reality for leaders.

I have argued that there appeared to be implicit understanding that those in high status positions were expected to take care of their own health rather than rely on organisational resources for support, which in turn could complicate the perceived permissibility of help-

seeking. I suggest that the tensions inherent in NetCom's approach to executive health illustrate the expectations of body management implicit in leadership, and the challenges this presents to a leader embodiment that may not meet this normative standard. I have concluded this chapter with a discussion that articulates how the self-managed body is central to defining the construct of the 'ideal worker', and have noted the constraints that this ideal imposes on a leader's ability to express their embodied vulnerabilities.

In the next chapter, I will explore the way the importance of fitness was discussed and practiced by NetCom leaders, and discuss what these findings suggest about the relevance of athleticism in the construction of the leadership body.

Chapter 5: Leadership and the Fit Body

In this chapter, I will look more closely at the varying ways that NetCom executives perceive and experience the importance of fitness in the context of performing leadership. I use the term the 'fit body' to denote bodies that broadly conform to contemporary discourses of health and fitness, and therefore an ideal embodiment of leadership. I explore the views of NetCom leaders regarding the place of athleticism in leadership, specifically how the influence and participation of senior executives seemed to be central to determining the meanings made of fitness within the organisation. Through a case study of NetCom's athletic (sub)cultures[3], I explore the significance of such groups in organisations and I analyse the meanings made of the fit body. Finally, I discuss my empirical findings regarding the concepts of energy and energy management, particularly how they appeared to be an important signifier of the fit body, and were ascribed an important role in the construction of a valid leadership identity.

5.1 Contesting a Culture of Athleticism

NetCom executives broadly expressed the view that there was not a pervasive culture of extreme athleticism within the current configuration of the leadership group. It was acknowledged that under the auspices of the previous CEO, an influential cycling clique had emerged and became a cause of some concern for central management, predominantly because of the culture of risk and elitism that it engendered. Though some remnants of localised fitness 'fanaticism' remained, these were predominantly discussed as being contained to specific subgroups or individuals rather than being reflective of a broader cultural norm. One executive summed up the dominant view regarding the present culture of athleticism when she noted that:

> *There's probably maybe one or two people who I think maybe would be borderline in that camp. They like to be seen to win in lots of things and it's an important part of their overall persona and repertoire, but I'd say that that's just a relatively small portion of people. Most people I wouldn't put in that camp. (Joelene, Senior Executive, Customer Service)*

[3] Throughout this thesis I identify NetCom's athletic groupings as a '(sub)culture'. In bracketing the prefix 'sub', I am acknowledging that although these were not necessarily large groups, they were populated by very senior leaders and therefore had the potential to significantly influence organisational culture.

NetCom executives also appeared to exhibit a healthy scepticism about whether the phenomenon of the 'corporate athlete' existed at all, or whether it was in fact an invention of the business media: 'I think the magazines are writing about it [corporate athleticism] and talking about it and I don't think it's happening. I really don't.' (Aiden, Senior Executive, Subsidiary Services). As Donald noted: 'I'm not sure I agree with that corporate athlete stuff. I think sometimes that's a bit contrived.' (Mid-level Executive, Finance). There was a general repudiation of the notion that espousing any kind of athletic ideal was good for business or that such an ideal even sat well within an Australian cultural context:

> *I can't imagine [the NetCom CEO] saying, okay everybody, we're going to get in our gym gear and do calisthenics in the morning. That sort of thing wouldn't sit well in an Australian culture. (Grant, Senior Executive, Infrastructure Services)*

> *Maybe in Australian culture… [athleticism] would come across as a bit wankerish, whereas in maybe US culture, I think that's probably a bit more acceptable. (Neil, Mid-Level Executive, Marketing)*

Jason, a non-executive director at NetCom, likened the corporate athlete to a 'Hollywood version of an executive', which predominantly 'gets serviced by business literature and by management'. Another executive suggested that if the corporate athlete did exist it was more likely to be found in the banking or finance sectors where there was more of a 'Type A' culture, 'where you get a lot of people who are ex-athletes… I guess *that* culture is very different' (Leo, Mid-level Executive, Strategy). Fabian, a senior executive in corporate communications, observed that 'you did see a fair bit' of athleticism in professional service firms in Australia and 'in certain US corporations depending on the nature of the leader'. Though, to the extent that it might be a dominant identity taken up by individual leaders within NetCom, he suggested that even the executives that were heavily invested in their fitness did not 'see themselves as some sort of super human Praetorian Guard'.

Whilst most executives believed in the value of organisations and individuals paying attention to health and wellbeing, encouraging 'extreme' behaviours akin to corporate athleticism was generally viewed as unnecessary, counterproductive, and potentially harmful for organisations. The inherent distrust of corporate athleticism seemed to range from its potential to reinforce gendered norms and leadership ideals, to cultivating a sense of exclusivity amongst the organisational elite, and to its spurious links with organisational performance:

It's okay to be in front of a magazine jogging like a lunatic. But what does it mean? Is that going to transform people here in this environment and make people exercise more? (Lucia, Lower-level Executive, Sales)

The wrong extreme would be we need a team of athletes. No, we don't…Because you could go to the other extreme where you're in a…alpha male environment, everyone's got to be an athlete and if you're not talking about what you're doing on the weekends and what marathon you ran, you're not in the group. (Morgan, Mid-level Executive, Sales and Marketing)

You have to be a little bit careful that people don't suddenly become these sort of gods who are Olympian types and therefore they're to be sort of revered as opposed to - we're working collaboratively together... You don't want them to be so high that they're almost detached. You almost are expected to join the eliteness if you tend to succeed in the organisation. You don't want that. (Tai, Mid-Level Executive, Insurance)

The perceived elitism associated with corporate athleticism was consistently observed as one of the perils of promoting it within organisational cultures; executives voiced fears that it ran the risk of projecting an unattainable idealism which could make leaders appear less relatable. Instead of feeling inspired by their leaders, employees may feel that such an extreme focus on health was unachievable for them, which may lead to projections of elitism and create a relational distance between leader and follower:

For an organisation to perform and for people to be inspired, we don't need those executives to be ultimate athletes… if people can't actually connect to what they're doing and apply that in their own lives, then it's wasted. (Sean, Lower-level Executive, Sales)

Some of the negative might be, well, lucky him or lucky her, she has got time to do that. How do you find the time? Like, I've got the kids or the parents or the other responsibilities, or the money? It's possible that - it could be seen as - I don't know - I'm going to say - the word that is coming into my mouth is elitist. (Hilda, Mid-level Executive, Marketing and Communications)

I think it may be setting too high an ideal…it's almost like portraying supermodels and all that and I'm not sure whether that - I'd be wondering whether that would be motivating for employees. Maybe for some, but alienating to others. (Neil, Executive, Marketing)

The view of corporate athleticism as a potential relational impediment between leaders and their subordinates, was also supported by Charlene, the CEO of *Corporate Health,* NetCom's external executive health services provider. She suggested that a person who embodies the persona of a corporate athlete can be perceived as a 'nutbag' or as 'elite' individuals who do not operate within the same constraints as other employees:

> *So the downside is that their workforce see that as unattainable; 'I'll never run a marathon. It's all right for him. He's not married and can get up and runs his own life and can work the long hours. I can't do that. I'm married, I've got small children. I can't get up at five o'clock and go running. I'll never run a marathon I've got a bung knee.' The general population can't do that stuff. (Charlene, CEO, Corporate Health)*

Broadly then, it was acknowledged that there were pitfalls associated with cultures that espoused the ideals of athleticism, particularly the propensity for them to set 'unattainable' standards or even be perceived as 'elitist' by others. Though there seemed to be a general agreement that NetCom's culture did not reflect such an environment overall – at least not currently - there was some reservations expressed about two groups that existed within the organisation and were both led by senior executives. The first, a cycling group which was established by the then CEO and current CFO some years ago; and the second, a less formalised gym group that was also identified strongly with another senior NetCom executive. In the following section I will look more closely at these two groups, specifically how these fitness collectives suggested that the fit body was, despite claims to the contrary, still a visible presence within NetCom's corporate culture, and one that promoted feelings of exclusion within the organisation.

5.1.1 Case Study I: The 'gym buddy' group and the cycling 'clique'

Quinn is one of NetCom's most senior executives who had been with the organisation for over seven years at the time he was interviewed. He spoke unequivocally about the importance of maintaining good physical fitness, and was a regular gym goer, tennis player and practitioner of martial arts. The fitness group that he founded at NetCom, referred to jokingly by one executive as the 'gym buddy' group, consisted of a 'rotating team of about eight or nine people', ranging from executives to more junior leaders, and met up to four times per week for workouts. The group was well known within executive circles and across the broader

organisation; the manager of NetCom's reception services noted how she would always see them gathering in the morning before work where they'd have their 'boxing sessions' in the car park.

Quinn described the group as being open to anyone with an interest in their personal health and wellbeing, but he mentioned the reluctance of some individuals to join, something which he attributed to a 'lack of motivation':

> *I've invited a number of people to say, hey, come and join us at the gym, 8am. No, it's too difficult. Well okay, let's go do it at 7pm, 8pm in the evening. It's too difficult. So I think it's their lack of motivation to do it. That's the only thing I can put it down to. (Quinn, Senior Executive, Retail)*

Even though Quinn was a strong advocate of 'personal choice' and did not believe in mandating health and wellbeing programs in organisations, he appeared to find this lack of interest from his colleagues disappointing. Because he himself believed passionately in the benefits of employees engaging with their physical health, he seemed to find it difficult to understand why others would not prioritise it in the same way. Quinn described his belief in the benefits of fitness training in the following way:

> *So my strong belief is there's two elements to it. (1) Is it certainly does create a level of mental fitness which I think would be very good here; (2) I think it creates a comradery in the organisation which is beyond simply the physical fitness, right.*

In addition to the 'mental fitness' which he suggests would be 'very good' for the organisation, Quinn notes that one of the key benefits of gym training with colleagues is the 'comradery' it is engenders between work colleagues. More specifically, he suggests how building such an intimate rapport through shared fitness regimes, can improve communication between the members of the group and make them work together more effectively: 'You can get things done a lot easier with the folks that you are training with, because they get the picture - there's a performance culture around it. I see that.' Quinn seems to be arguing that the bonding that occurs in his fitness group makes 'it a lot easier' to get things done in the workplace because a like-mind orientation develops; 'they get the picture', because there is a shared understanding about what a successful 'performance culture' looks like.

This was a view that seemed to be shared by Finn, another executive who agreed that the group cohesiveness achieved through shared fitness activities could positively influence workplace outcomes. Here, he discussed his observation of how the relationships between members of a cycling group (from a previous workplace) began to change the way these individuals worked together:

> *Their inter-personal dynamic changed so fundamentally…It was just surreal. It just removed so many barriers… But then you had dual pace, because you had this group of people that could do things really quickly. Then they'd hit the standard pace of decision making, because you didn't have the interpersonal relationships in the way you did there. You had this group of people that could do things really quickly.*

The 'dual pace' that Finn refers to, distinguished those who 'could do things together really quickly' because of the bonds they had developed through cycling, and the 'standard pace of decision making' which was the speed that everyone else in the organisation was working. According to Finn, it is the 'interpersonal relationships' forged through this physical activity that 'removed so many barriers' to getting work done; he went on to suggest that these relationships 'were tighter' that the usual social or collegial groups people formed in the workplace:

> *I reckon those relationships were tighter than teams that had just worked together a long time, or teams that socialise together a lot. I think there was something quite vulnerable about seeing one another in such a physical state of exhaustion, I guess.*

Finn's assessment appears to be that it is the witnessing of colleagues' embodied vulnerabilities, in this case their 'physical state of exhaustion', that enables group members to shift the speed work is done. This was because individuals in the cycling group would remember things like that time, 'You took me home in an ambulance when I had an accident' or when 'I took you home when you had an asthma attack'. Such incidents, Finn argued, deepened interpersonal relationships between colleagues, minimising the 'friction and the politics' normally associated with work. He intimates the intensity of the bonds formed can remove ordinary work obstacles such that the work almost becomes secondary to the relationships: 'Oh, this work thing, yeah, don't worry, I'll take care of it.' However, Finn, also saw a down side to the collegial bonding; in discussing his

observation of the ‘gym buddy’ group, he notes how exclusory behaviours can begin to emerge without people even realising it:

> *There's a group that trains every morning at the gym, quite senior. I dip in and out of that infrequently. But what I have noticed is they can actually - they can almost reject people that aren't part of that ecosphere. They have a lot of quite important conversations in quite informal environments, and I don't think they log that. So they bring that conformation bias into formal meetings, and I can see it play out… I have actually… found it quite unhelpful at times.*

Finn suggests that there are potentially negative consequences of the intense bonding experienced by collectives like the ‘gym buddy’ group; in particular, the relationships formed in ‘informal environments’ can lead to the manifestation of typical in-group/out-group behaviours. Beyond creating environments that could be experienced as exclusory, Finn also noted how this bonding could negatively affect organisational performance; in his previous workplace the dynamics of relationships changed so much that ‘the CEO was concerned about how effectively people were working together, because they were almost too effective!’. Speaking in reference to the ‘gym buddy’ group, there does not appear to be any suggestion that the exclusory behaviour is malicious or even intentional, rather Finn hints at a degree of obliviousness about these potentially negative workplace consequences: ‘I don’t think they log that’.

The in-group/out-group phenomenon was also noted by Sheena, a senior retail executive, who described the ‘gym buddy’ group as a ‘tribe’ and commented on how their ‘closeness’ tended to make them appear quite ‘clubby and cliquey’:

> *I mean, it's almost a tribe here that religiously gets together - of leaders that gets together and goes to the gym in the morning. So it's part of their culture and part of their DNA, and it is quite clubby and cliquey… I think it probably brings them together in a closeness that's - they have a common thing. You do notice at Christmas parties and whatever they're high fiving, doing that stuff. (Sheena, Senior Executive, Retail)*

Sheena suggests that she has witnessed the group’s tribal nature on full display in more relaxed work forums like Christmas parties where members are ‘high fiving’ each other in very masculine displays of ‘closeness’. However, unlike Finn, she is reluctant to concede that this has any significant impact in the work domain: ‘But I don't think the boundaries of them doing that are so much exercised

outside that room.' Similarly, Joelene, also believes that although there may have been a period where the 'gym buddy' group was viewed as exclusory, she's not sure that this is the case now:

> *I know there was a time when there was a gym group and there were a lot of things discussed in that particular group, and I know that people felt excluded from that, but I don't see it quite so much these days but perhaps it does happen. I'm just not as observant of it. (Joelene, Senior Executive, Customer Service)*

Whilst perceptions of exclusory behaviour may (or may not) have been a thing of the past for this group, the impact of such perceptions was not lost on Dale, the head of NetCom's HR department. He seemed to be very aware of the potential benefits and pitfalls about senior executives leading fitness collectives:

> *So you've got to be really careful about this, and there's been a couple of occasions where MDs [managing directors] have got right into the health side, and meet in the morning down at the gym. Everyone sees them, and it's all good and it creates energy, but it also creates us and them, and that's what you've got to be very careful about. So leaders need to be aware and what you educate leaders on is that unconscious bias, and also not creating an 'in and out'. (Dale, Senior Executive, HR)*

Dale appears to place the lion's share of responsibility for the creation of exclusionary cultures upon the group leaders themselves, which is why he believes it is necessary to educate them on the 'unconscious bias' that may exist. Although this insight appears to have been at least partly informed by his experience of the 'gym buddy' group, perhaps the most pervasive example of the in-group/out-group phenomenon at NetCom's was the existence of the network of 'cult' cyclists.

NetCom's cycling culture was initiated in 2009 by the then CEO and the current CFO, who was still the figurehead of the group at the time the research was conducted. The signature activity associated with group was NetCom's annual sponsorship of, and participation in, an endurance cycling event – 'the Tour' - a charity fundraiser for cancer. A small number of riders from all levels of the organisation are selected each year to participate in the event, and train for up to six months in order to take part. Participants are awarded up to ten days of additional annual leave to support their engagement in the Tour. Initially, the most pressing concern for

central management was to enforce some safety protocols around the cycling group's training activities. As the head of HR noted:

> *I recognised it wasn't safe, they didn't have proper riding protocols. Now I'm not a cyclist, so I can't tell this stuff, but they didn't have proper riding protocols - it was all a bit amateurish. (Dale, Senior Executive, HR)*

As part of a harm minimisation strategy, Dale enlisted some external expertise to 'read them the riot act on how to set things up properly because it was all amateur day'. However, once this issue was dealt with, it appeared that a different organisational risk emerged and required management. Here, Dale discusses how the cycling culture began to symbolise a threat to NetCom's 'egalitarian' philosophy:

> *I think it became a mini cult…when the CEO gets on a bike and starts riding with a group, and the CFO is also in that group, and then before you know it there's other members of the executive team riding. That becomes a little bit too far out. Because gone is the egalitarian approach to how we do things here, and it's seen like an unfair advantage. For a while there, everything that the CEO talked about was cycling, and so we sponsored the NetCom Tour. (Dale, Senior Executive, HR)*

Dale's comments indicate some of the challenges an organisation faces when high profile leaders become central to the initiation, promotion, and participation of fitness cultures. According to Dale, the cycling group bucked NetCom's 'egalitarian' principles and seemed to create perceptions of 'unfair advantage' for those who were part of it. The perception of some other executives was that this was an already exclusive sport that was principally being championed and enjoyed by an elite managerial class. That cycling is a highly competitive, hyper-masculine and white dominated sport, was commented on by a number of executives:

> *…the nature of the activity tended to preselect a lot towards Anglo males. So again, by its nature, [it] was a little bit discriminatory or potentially discriminatory…we had the sense that it was exclusionary, because that's not a sport that's particularly adopted by other groups (Jason, Non-Executive Director)*

> *First of all I think it excluded many women because it was a bunch of MAMILs [Middle-Aged Men in Lycra] to use the acronym. (Fabian, Executive, Corporate Strategy)*

Yeah, lots of people standing around in their Lycra having a coffee in the morning after they've done their cycle and so on, a bit macho, a bit sort of competitive. (Arlen, Mid-level Executive, HR)

The cycling group was variously described as a 'club', a 'clique', a 'cult', a 'tribe' and an 'inner sanctum' by executives. Jason, a non-executive director, noted how some within NetCom became 'quite concerned' because the cycling group 'did indeed seem to create a clique' and 'a sense that if you were one of these weekend warriors… that somehow or other you were more respected than otherwise.' According to Jason, there was also concern about how the cycling culture could unduly influence employee behaviour, particularly 'whether or not people would feel they had to do it in order to be seen to be okay.' This view was supported by other executives who noted the potential for employees to be influenced by their peers and of a desire to become part of the 'in group':

I dare say there were probably people who thought unless I'm on the bike in the morning with those guys, I'm in the B club, not in the A club and I won't get that. There's a bit of that sort of thinking that starts to creep in to the organisation. (Tai, Mid-level Executive, Insurance)

…there's a lot of tribalism, clique(iness) or mateship amongst the senior leaders and they all want to appear confident, super fit, super resilient. There was a deluge of people getting into the cycling arena because it was seen as being very elitist or very 'in group'. The CEO did it. The CFO did it. (Warren, Mid-level Executive, Finance)

We had a number of people before who were all part of the Lycra mob and it became a thing that people should do. Because the previous CEO and the CFO were doing it so lots of people jumped in with that. (Raymond, Mid-level Executive, HR)

I think in previous incarnations where you had three out of eight people [in the senior executive group] doing a weekly bike ride together, I think that created a sense of clique and if you weren't in Lycra you weren't part of the inner-sanctum a little bit. (Joelene, Senior Executive, Retail)

Despite the criticisms levelled at the cycling culture, no single executive expressed the view that it had ever been the intention of the group's founders to purposefully exclude

individuals or set out to create an environment of elitism. Almost universally it was felt that this had been an unintended outcome; as one executive who was particularly critical of the cycling group commented: 'I don't know that it was necessarily intended, I think it was all accidental… the wrong perceptions developed about this [group].' (Fabian, Senior Executive, Corporate Services)

Bryce, the executive who was recognised as the cycling group's leader, was widely respected by his colleagues and peers, and his commitment to the Tour was acknowledged as having had a positive influence by many within the organisation. His love of cycling was readily apparent during the interview; his personal meeting room was adorned with photographs from the Tour, framed cycling jerseys, and a large picture that contained one of NetCom's corporate characters reads: 'Bryce, you put the like in Lycra'. He described his own journey to cycling as being a very personal one that occurred later in his life, and one that he also kept to himself for a very long time. Bryce gave off the aura of someone who did not necessarily enjoy all the attention he received because of his association with the cycling group. When asked about some of the less positive views expressed about cycling culture he appeared quite bemused by the criticism of it:

> *It's never been something I've done to create a profile or to create a perception in relation to a certain cultural element within the organisation…If people interpret it as negative, I'd be a bit disappointed in that. I just think… we're not hurting anybody. We're not impinging upon anyone else. We're not mandating it. If people feel pressure, for whatever reason, that they should be participating, well, that shouldn't be the case. (Bryce, Senior Executive, Finance)*

He earnestly insisted that he did not engage in the activity to 'create a profile' or develop a specific 'cultural element' in the organisation, and seems to genuinely struggle with how people could possibly perceive the cycling group in a negative way. His somewhat naïve resolve that 'we're not hurting anybody', appears to demonstrate a difficulty to accept (or at least acknowledge) than an organisational leader such as himself, wields significant organisational power and influence. These comments seem to affirm Dale and Finn's observations that there might be some degree of 'obliviousness' on the part of some of NetCom's senior leaders about how their actions and associations may be perceived as exclusory to those who exist outside it. This seems to be especially true in the case of the cycling group, where claims of in-group behaviour might have become magnified because the sport itself projects a certain elitism, which was not helped by the homogenous nature of the group's membership which consisted

of mainly white, heterosexual men. Though a culture of corporate athleticism was largely dismissed as hyperbole by many executives, the existence of the 'gym buddy' and cycling 'clique' suggests that the fit body does indeed exist as a symbol of some potency for leaders. Its problematic nature as a signifier of leader identity appeared to be recognised by some of those in NetCom's leadership team, while others appeared to be somewhat 'oblivious' to the exclusory feelings it could engender in those outside the 'in group'.

5.1.2 Discussion

Day et al. (2012, p. 421) note that there are a number of characteristics shared by athletes and those in elite leadership positions: 'Both have been selected for special scrutiny and developmental opportunities, and performance expectations are very high for members of both the groups.' As privileged members of an elite sphere, executives also have the financial means and the professional motivation to cultivate an athletic persona that may lend credibility to their identity as leaders (Ryan & Dickson, 2016). However, my research suggests that whilst NetCom executives generally placed a high value in their health and wellbeing, overall, they adopted a much more circumspect position regarding the glorification of the athletic body in leadership.

As an ideal, athleticism in leadership is a somewhat easy target for criticism; the coopting of sports science for corporate ends (see Chapter 5.2.2) and the promise of body mastery (Loehr & Schwartz, 2001), reinforce hyper-masculine fantasies that in many ways represent a bygone era of leadership. It is perhaps not surprising that so much of the critical literature exploring athletic ideals has mounted evocative warnings about the increasing pervasiveness of the fit body in leadership and the normative threat it poses to individuals and organisations (P. Kelly et al., 2007). But I suggest that, in an effort to document what is no doubt a visible phenomenon in organisations, there has at times been a missed opportunity to give a more nuanced account of the impact of athleticism in leadership.

For example, the study by Johansson et al. (2017, p. 15) is replete with anecdotes from senior leaders who, the authors argue, 'expect others to admire and imitate their controlled athletic lifestyle and the healthy and fit body that it helps to produce.' Whilst I do not dispute the validity of this assessment, it is important to recognise that such research is only concerned with the lone voices of organisational leaders who are already committed to the project of cultivating athletic bodies. I posit that such research tends to create an impression that leaders have unchecked power (and a universal desire) to institute cultures of athleticism in organisations, without there being a capacity for resistance. I do not suggest that there is no merit in these arguments and I will later discuss how constructions of the athletic leadership

body does pose a problem for those who do not embody these ideals. However, I do argue that it is useful to also explore the meaning other leaders make of athleticism (i.e. not just the corporate athletes) to ensure a more fine-grained, and contextually embedded analysis of how fitness norms may be shaping the leadership body within organisational contexts.

My research suggests that cultural context may be critically important when seeking to understand the meaning that is made of athleticism by those in senior leadership positions. The importance of Australian identity was rendered visible in the way that NetCom executives were often keen to distinguish their organisational culture from that of its offshore parent. For instance, ICT Corp was portrayed as having a command-control structure with a hard-nosed focus on the numbers, while NetCom was viewed as being more relaxed, egalitarian and as preferring non-hierarchical ways of working. This seemed to be an important cultural narrative which reaffirmed the 'Australian-ness' of NetCom, particularly its adherence to the principles of fairness, and a belief no-one should think too highly of themselves (Feather, 1994).

Rather than being proponents of athleticism, many NetCom executives were openly critical of the negative effects of normalising embodied ideals within organisations and largely rejected the notion that athleticism was something that businesses should aspire to model. In part, this rejection was rationalised as being culturally incongruous with NetCom's espoused organisational expectations; a view I argue appeared to be anchored in Australian cultural norms of egalitarianism and a loathing of self-aggrandisement (Shields & Harvey, 2010). I suggest that in order to understand the NetCom's apparent antipathy toward cultures of athleticism in leadership, one must also appreciate the Australian cultural tradition of challenging authority - a characteristic often attributed to its convict past (Tranter & Donoghue, 2007). Australians are generally disinclined to view leaders as being beyond reproach, instead, they often have a 'propensity to denigrate high achievers in society' (Ashkanasy, 2008, p. 310) – a phenomenon known colloquially as the 'tall poppy syndrome'. Whilst such cultural characteristics are complex and often themselves contested (Feather, 1994), I suggest it is a useful frame through which to explore NetCom's response to the 'elitism' of the cycling clique.

The calling out of corporate athleticism by many executives as a media concoction, a 'wankerish' fad, or a construct much more likely to find a home in a North American context, suggest that there may have been a specific national lens through which athleticism in leadership was filtered. For example, whilst many executives espoused what may be viewed as traditionally individualistic, neoliberal views about health and wellbeing (Coffey, 2015), an underlying preoccupation with egalitarian ideals and of 'not standing out' too much, seemed to

constrain executives' beliefs about the virtues of athleticism in leadership. One of the primary concerns identified by executives about tropes such as the 'corporate athlete' was not only that they set unrealistic standards that were ultimately irrelevant to a leader's performance, but that embracing athleticism risked creating a relational distance between leader and follower. This was deemed to be problematic in that it could be counterproductive to group cohesion and, therefore, organisational performance.

Such a view accords with theories of leader prototypicality, which emphasise the importance of followers' perceiving leaders 'as embodying the group's identity' in order for the them to be seen to have 'the group's best interest at heart' (Bligh et al., 2011, p. 1064). Put simply, followers must see aspects of themselves reflected in the leader to achieve group harmony and effectiveness, and in this case, overemphasising the importance of athleticism may separate, rather unite a group, or organisation. Managing this relational distance can be a source of tension for those in leadership positions because whilst 'the ability to control distance' - effectively separating leader from follower - is central to 'maintaining the mystique of leadership' (Grint, 2010, p. 101), it can also be alienating. Thanem (2013, p. 398) touches on the centrality of embodiment in this dynamic when he argues that far from being motivating, leaders' 'embodied passions' can 'provoke distancing and resistance rather than commitment and followership'.

My research suggests that the experience of 'distancing and resistance' is not limited to employees traditionally considered as 'followers' but can also emerge within and between the ranks of senior leadership. In NetCom, this dynamic was most clearly represented by the insular culture of the cycling clique, which came to symbolise a managerial elitism that was ultimately viewed as contrary to NetCom's slated commitment to egalitarianism. Established by the then CEO and CFO, the cycling clique was recognised as having the potential to be inspirational (principally because of the charity work it conducted through the NetCom Tour) but also divisive (due to the exclusory air it engendered).[4] On the one hand, the cycling clique reinforced the 'leadership mystique' (Kets de Vries, 1994) by exulting the athletic feats of its mostly male

[4] A similar argument could be posited regarding the 'gym buddy' group, though its lower profile and lesser reach within the organisation, meant that the ire that it raised within the executive ranks was more contained.

and senior leader participants, however, this became problematic when the group's existence appeared to create too great a distance between the leader and the led.

The response by NetCom's central management to quell what it viewed as the potentially destructive formation of in/out groups, provides a unique illustration of how cultures of athleticism are always in flux and can be contested, even when they are instituted by the managerial elite. In his work exploring employee responses to health organisational initiatives, Thanem (2009, p. 72) argues that resistance is an overlooked but important part of understanding the way 'neo-liberal and other forms of managerialism' may be contested. Whilst I concur with this view, my research suggests that this resistance is not necessarily limited to people at the lower end of the organisational hierarchy, that is, those who are usually portrayed as bearing the brunt of managerialism (Fotaki & Prasad, 2015). In the case of NetCom specifically, it was the board chair and the head of human resources that acted to contain the negative impact of NetCom's cycling clique, in the face of mounting concerns of 'eliteness' from other organisational leaders.

NetCom's deep involvement in 'the Tour' cycling event was an example of how organisations can align themselves with sporting activities in order to promote desired aspects of professional and organisational identity (Kärreman & Rylander, 2008). As a pet project of a former CEO and current CFO who were both keen cyclists, it also exemplified how those in senior leadership positions can be central influencers in the establishment of cultures of health and fitness (Thanem, 2013). However, the organisation's decision to significantly scale back its involvement in the annual event, partly because of concerns about the culture it had engendered, was testimony to how corporate cultures of athleticism are not static and unidirectional but are temporal and subject to vicissitudes of leader influence *and* mechanisms of organisational feedback.

The concerns expressed by NetCom executives about the (sub)cultures of athleticism appeared to be grounded in a number of observations about these groups, in particular: the homogeneity of the groups' membership (i.e. predominantly white, male leaders), the emergence of an informal network of influence, and the impact of having members of the top management teams as figureheads. I suggest that taken together, these criticisms reflected a tension between NetCom's view of itself as a progressive organisational culture, celebrating diversity, and a (sub)culture of athleticism rooted in a relic of the masculine embodiment of leadership. I suggest that it is in this context, that NetCom's experiences of athleticism must

also be considered, that is, not simply as environments of bodily exclusion but as refuges for contested displays of masculinity in the modern workplace.

Management scholars have noted how changes in contemporary work practices and the way managerial work has been written about, have effectively *feminised* the managerial environment (Fondas, 1997; Knoppers, 2011). The privileging of knowledge work over physical labour, the flattening of hierarchies, an emphasis on relational rather than command-control styles of leadership, the greater presence of women in the workforce (and therefore an increasing competition for leadership roles), and a broader societal focus on 'toxic masculinity' and misconduct by those in positions of power (Banet-Weiser & Miltner, 2016), are all factors that have contributed to disrupting the foundations of hegemonic masculinity that used to unequivocally symbolise organisational power (Acker, 1990; Kerfoot & Knights, 1996; Searle et al., 2017). As Connell and Wood (2005, p. 359) suggest, men tend to feel far less secure in their position at the top of the organisational hierarchy:

> *there is not the rock-solid confidence in men's position in the world that their actual power and wealth might imply and that an earlier generation of businessmen might have shown.*

Scholars have previously paid attention to how masculinity and managerial identity have become entwined in workplace fitness and sporting cultures, and the way they can exclude women and men who do not conform to hegemonic masculinities (Gregory, 2010; Ryan & Dickson, 2016). Collinson and Hearn (1994, p. 14) note it is in the formation of informal boys' networks that men are 'concerned to identify with other men in the 'in-group', while simultaneously differentiating themselves from other groups of men and from women.' I argue that NetCom's male dominated (sub)cultures existed as informal networks that not only legitimised fitness pursuits, but also provided homosocial bonding environments (Knoppers, 2011; Knoppers & Anthonissen, 2005) which upheld traditional masculine norms.

NetCom's cycling clique and 'gym buddy group' appeared to mimic masculinised ideals of corporate leadership by encouraging intense competition, tribal-like bonding and privileged insider networks. Roper (1996, p. 224) observes that: 'Intimacies between male managers are crucially important… because it is through them that 'exclusionary circles' are formed and maintained' (emphasis in original). As one senior NetCom executive noted, what occurred through these informal networks was about more than simply physical fitness; these (mostly male) environments enabled the codification of a specific performance culture which made it

much easier to achieve corporate goals because people who participated in them 'got the picture'.

I suggest that the bonding that occurred in these groups encouraged competition, through spirited displays of physical strength and endurance, but it also enabled collaboration by becoming a sanctioned place for vulnerability. As Evans (2017, p. 181) notes: 'When we exercise intensely with others, we share this endorphin rush and feel bonded to our fellow athletes.' Experiencing the embodied vulnerability of other group members was viewed as deepening interpersonal relationships which removed some of 'friction and politics' of getting work done. These (sub)cultures then, appeared to epitomise how athleticism and sporting prowess can create 'a basis of alliance' (Sinclair, 2005a, p. 94), that uphold the values of corporate masculinity.

My research aligns with other scholars' critiques of cultures of athleticism as potentially reifying masculinity at the expense of 'other' non-conforming leadership bodies (Coupland, 2015; Johansson et al., 2017). However, I suggest that their function (however problematic) might also be considered as sites that facilitate the expression of embodied vulnerability, and that part of the 'obliviousness' of NetCom leaders lies in their inability to look beyond the positive effects of such 'bonding'. This analysis does not suggest that the masculine ideologies that have underpinned managerial work are in any real danger of collapsing, rather, it is to emphasise how, in the face of perceived threats, there may be an embodied (and discursive) retreat to enactments of athleticism, which have tended to ritualise and provide sanctuary for male hegemony (Clayton & Humberstone, 2006; Knoppers & Anthonissen, 2005; Messner, 1989). Organisational cultures of athleticism may therefore be viewed as not only reinforcing embodied ideals of leadership, but also providing a space for a type of masculinity that is being more commonly contested both in the workplace and in broader society.

In the following section, I will more closely explore the discourses of athleticism that were adopted by many NetCom executives, in particular the way in which 'energy' appeared to be interpreted an important signifier of a valid embodiment of leadership.

5.2 Embodying the 'Energetic' Leader

For those NetCom leaders that were intrinsically motivated, engaging in the discipline associated with fitness regimes appeared to be one way of asserting a degree of control over the demands of their working lives. Maintaining high levels of fitness, especially by committing to a regular exercise schedule, was an important component of self-management which many

executives argued assisted them to function well in a high-pressure and mentally draining environment. These were individuals who did not see themselves as part of the aforementioned sub(cultures), but for whom fitness was nonetheless viewed as central to the successful performance of leadership. For instance, reflecting on why she believes that there's 'not too many shabby people' in senior leadership roles at NetCom, Abigail suggested that:

> *I think that comes with the level of motivation too that you need at that level to be where you are and keep going and deal with the daily stress. I think it would be hard for me, the kind of stress levels I have in my role I need to be able to deal with them and that's I think feeling fit and healthy helps you deal with them. (Abigail, Mid-level Executive, Client Relations)*

Abigail suggests that 'feeling fit and healthy' is critical to enabling a leader to 'deal with the daily stress' that is inherent to the everyday experience of an executive. To be working 'at that level' requires a motivation to maintain one's fitness, even though (as she expressed later in the interview) 'it's really bloody hard' to get up at 5 o'clock in the morning each day because, 'I'm not a morning person, I've never been a morning person, I hate it.' For Abigail, then, a necessary part of being an executive is getting up very early (even though she loathes early mornings), and going the gym so that she has the mental and physical edge she needs to perform optimally. The need for such consistency and discipline was echoed by George, who explained why his own fitness regime was critical to his leadership performance:

> *Unlike some roles further down the organisation where you can actually come in and say - I'm just going to do this one thing - executive life is more challenging because the multidimensional dynamic nature of it… That's why you need to be alert, and stay active, look after yourself as an executive. (George, Senior Executive, Sales and Marketing)*

George's comments make a clear distinction between the 'multidimensional dynamic nature' of executive life and those 'roles further down the organisation' which may not require the same sustained mental agility to discharge their role effectively. He argues that the need to be constantly focussed and alert, necessarily demands an engagement with practices like regular exercise because it is not possible to work at the required level if 'you're run down, tired and your concentration is waning'. George's observation was supported by Warren, who suggested that there is something unique to senior leadership that makes attention to one's health particularly important:

There are certainly a lot of [middle manager] roles [that] are very busy but I think the difference is the stress level's a bit less…the pressure of trying to manage politics, perceptions, is a bit less. They can focus more on the job at hand…I think you do need that extra…strength and that fitness level to be able to cope with the mental pressures as well as the amount of hours you've got to do to be able to keep resilient. (Warren, Mid-level Executive, Finance)

For Warren, part of the complexity of being an executive lies in the types of stressors that an organisational leader has to contend with, particularly the management of 'politics' and 'perceptions' which he suggests are not as prevalent for middle managers who can 'focus more on the job at hand'. Warren's comments illustrate his belief that paying attention to one's health is necessary to develop the strength and fitness required to remain resilient and 'cope with the mental pressures' of being in a senior leadership position.

Generally, NetCom executives appeared to be particularly attuned to the consequences of not maintaining a regular fitness regime, and suggested that they noticed a marked difference in their physical and mental wellbeing when they did not exercise. For instance, one senior executive, Albert, noted that being out of his usual routine because of an injury made him feel 'like an amoeba'; he noticed his energy levels were 'sapping' throughout the day which meant that he was 'just not quite as sharp'. Albert's comments were reiterated by many other executives who indicated that a lack of regular exercise affected their energy levels, which in turn impacted their work because of its influence on their cognition, sleep, and mood:

During periods where I've lapsed and not worked out, I've not done well. I know that. I can see it mentally, I can see it energy wise. I can see it certainly from the perspective of results. So for me it's a part and parcel of living. (Quinn, Senior Executive, Retail)

No, I can feel different energy levels as well [when I don't exercise]. I'm not as physically tired, so I get to night and I can't get to sleep…I can definitely notice a difference. (Jennifer, Mid-level Executive, Finance)

I think that all relates back to mental health which all relates back to physical energy. I think you need energy to have the, I suppose, the willpower to be disciplined when it comes to food, the willpower to be disciplined when it comes to exercise. I need all that working for me for my balance score card to be working. (Serena, Mid-level Executive, Customer Experience)

These comments reflect popular health discourses (Cheek, 2008) as well as accepted scientific knowledge (Penedo & Dahn, 2005) regarding the benefits of exercise in supporting individual health and wellbeing. Even those executives who struggled to build exercise regimes into their daily life tended to accept the importance of physical fitness improving their feelings of wellbeing. What is more interesting, is how the discourse of 'energy' seemed to be an integral part of articulating the effective performance of leadership, specifically, skills in managing its supply, maintenance and dispersal. Moreover, the very presence of abundant energy appeared to be deeply entwined marker of leadership identity. For example, in discussing athleticism in leadership, Jennifer observed that:

> *I don't think it's the athlete that leads to the CEO. I think it's the CEO mentality that leads to an athlete, because you have what I call this tapping, nervous energy. It's just got to go somewhere. (Jennifer, Mid-level Executive, Finance)*

The inference here appears to be that a 'CEO mentality' precedes an athletic identity, that is, an executive mentality is, at least partly, defined by an innate 'nervous energy' that requires management (in this case, dispersion). Jennifer seems to suggest that while athletic endeavours may provide the much-needed release for those in leadership roles, the practices themselves are not the defining feature of the executive but the existence of the underlying energy *is*. Therefore, while athleticism was largely derided by NetCom executives as a marker of leadership identity, the presence of energy and its effective management, is argued here as an essential quality of the leadership body.

When discussing whether it was necessary to be fit and healthy to be a good leader, Morgan points out, 'fit and healthy' can come in many guises, but underlying this is a fundamental need for energy:

> *… well fit and healthy sort of fits various forms, doesn't it? But I think there's a need to have energy and passion and there's a need to be consistent and to perform…So one aspect of thinking about an individual is maybe their level of passion and energy levels they have. (Morgan, Mid-level Executive, Sales and Marketing)*

Morgan's comments suggest that he believes that passion and energy are entwined, and are both important qualities that leaders 'need to have' to perform leadership successfully. Through the course of the interview, he went on to discuss how once, at a corporate training event, he

listened to a female marathon runner speak about the need for leaders to adopt good energy management practices:

> *She made the point that, who's trying to give their best in the day but has had three cups of coffee, not drunk enough water and probably didn't sleep as much the night before?*

What stayed with him was her comment that she would never do that as an ultra-marathon runner 'but we do that day in, day out and try and perform as leaders'. So, whilst Morgan didn't believe he needed to become a marathon runner, he did agree that the principle of managing one's energy more effectively was an important part of leadership.

As indicated by Jennifer's earlier comment about 'nervous energy', some executives appeared to grapple with an excess of energy that could only be managed through intense physical exertion, and a need to push the boundaries of their physical limits in order to 'de-stress'. Finn described the benefits of exercise, particularly reaching the point of fatigue, as necessarily for the 'dissipation of nervous energy' which, if it is not managed, could lead to a lack of confidence and negativity:

> *Nervous energy can translate into insecurity which can translate to negative energy pretty quickly, right. I'm certainly guilty of that. (Finn, Mid-level Executive, Marketing & Communications)*

He went on to describe how he felt after a CrossFit class the previous evening: 'I was going to die'. However, the day after, he felt the benefits of pushing himself to this extreme and seemed to attribute the exercise to his ability to not be so 'worked up' about issues at work, enabling him to forget about his negative feelings: 'I feel better for it. I don't feel some issues today have worked me up in the way they might. I forgot about that, that feeling.'

Lynden discussed his commitment to cycling in great detail during our interview, and was keen to explain the benefits he felt it brought him both personally and professionally. Intensely competitive, particularly with himself, he described how a four to six-hour ride was insufficient to give him the 'release' he required:

> *I'd do four, five, six hours…Which is still not good enough for me, because I actually like to hurt myself when I ride, because that's my de-stress. It's to release the bad endorphins and bring in the good ones. (Lynden, Lower-level Executive, Sales)*

For Lynden, then, exercise needed to go beyond an ordinary cardio workout and extend to the point of 'hurting himself' for him to feel sufficiently 'de-stressed' and to release the 'good endorphins'. He was aware that might sound extreme to others but this was something that he felt was part of his identity and what made him 'unique': '… there's not many people that like to hurt themselves and train hard and get the outcome for themselves. But as far as I'm concerned, I need to do it'. His abundant supply of energy, and the discipline to know how to manage it, in this case by 'hurting himself', appeared to be a central part of what gave Lynden confidence in his belief that he was an effective leader: 'I think a good leader needs to…be able to do what you preach, so if you say go out and exercise, [then] do it'.

Jennifer also noted her own need to push herself to her limits as a 'release mechanism' from whatever stresses she was managing at work. Recounting her recent experience of participating in a charity bike ride, she reflected on how competitive she became during the fundraising process. When her sister questioned what was motivating her behaviour, Jennifer responded:

> *...because I need to push, I need to know where I'm going to break...It was really funny, because it was the first time that she made me think why is that necessary? That's not life or death. She sits there and meditates; I need to go and punch out 100 kilometres. We're totally different. I go I don't know why; I just need to know where my limit is and I need to push it. (Jennifer, Mid-level Executive, Finance)*

Jennifer herself appears to be somewhat perplexed by her need to push herself quite so far – 'why is that necessary?', her sister doesn't seem to have the same need to find her limit and 'push it'. But, as was noted earlier, she seems to believe that it is the presence of this 'nervous energy' that forms part of the 'CEO mindset' and is core to a leader's identity.

For Shauna, the need to push herself to physical extremes was not such a mystery. She described herself as 'a highly energetic individual' who might have been diagnosed with 'Attention Deficit Disorder' had she have been born in a different era. Shauna explained how she would 'have to exercise to get rid of the energy, the natural energy I have.' Her daily exercise ritual was central to enabling her to get 'rid of the excess energy' so that she could 'reset every morning before I hit work':

> *I recognised since I need to go back to the gym because I'm starting to get grumpy, I'm not sleeping as well, I'm thinking too much about work and I'm not giving people the time that they need because energy levels are too high…I'm talking about that tense energy when you actually need to do something physical, your body physically needs to move. (Shauna, Lower-level Executive, Sales)*

Shauna's notes multiple triggers that let her know she needs to disperse the 'natural' energy she has. From her changing moods, to inadequate sleep, and obsessively thinking about work; these are all signals that she must 'get back to the gym' and move her body physically.

None of these 'high-energy' executives appeared to be making specific claims that this degree of energy was absolutely necessary to be a good leader. In the same way that Jennifer acknowledged her sister's approach to managing stress – 'She sits there and meditates' - Lynden too recognised that his colleagues will find different ways of 'de-stressing' that do not necessarily include the need to break the pain barrier:

> *There are other people that ride a horse, that's fine, it's a way of de-stressing… If it's as simple as go home play with the kids, or coach a football team or whatever. To me what is more important [is] that you break that work mindset, and move it in to something completely different…if you can go to bed with a clear mind, you'll have a good sleep. (Lynden, Lower-level Executive, Sales)*

However, there did seem to be a common view that the physical and mental exertion associated with physical activity, was an important way of managing the energy input/output relationship, and this was central to being able to perform effectively in an executive role. So, while one did not need to embody the heroics of corporate athleticism to be a leader, the existence of a 'natural' energy and the evidence of being able to manage it effectively, was something that did seem to be associated with the discipline and control that was part of leadership. In the next section I will look more closely at the energy discourses that were associated with one particular senior executive who appeared to be lauded for his boundless energy and his ability to control it.

5.2.1 Case Study II: Tyler - The energetic absent presence

At the time the research was conducted, Tyler was part of NetCom's top management team. Although he did not make himself available for an interview, he was repeatedly mentioned as someone I should speak with as part of this research because of his interest in his

health and wellbeing. Tyler's presence loomed sufficiently large in the minds of other executives to be illustrative of the perceived importance of energy as a marker of leadership, and the reverence that energy itself could inspire in others. As these comments suggest, he appeared to be perceived as an exemplar of charisma, health and control:

> *Tyler, always looks well, healthy, always is well attired. I don't think he's ever put on weight or he's ever lost weight. I think he's been the same for four years, so I don't know how he maintains that…he gives you the level of [sense that] he's always in control. (Mary-Louise, Lower-level Executive, Operations)*

> *But he is healthy looking, he's charismatic, he will…have a few drinks with you and be a human being with you…you can talk to him about your family. But when it's work, it's work. He is definitely somebody that you would look up to from a leadership perspective. (Shauna, Lower-level Executive, Sales)*

> *Tyler's very fit… looking at his health now, he looks probably better than I've ever seen him, which is fantastic. With the stressors he has to deal with I'm glad, because you can do one or two things, you can go to the bottle or you can go to exercise it. (Lynden, Lower-level Executive, Sales)*

> *… physically leading by example in health and wellbeing is extremely important…someone like Tyler is a picture of health, as a person. (Sean, Lower-level Executive, Sales)*

These descriptions paint Tyler as the classic embodiment of a charismatic leader: he is magnetic and 'high-energy' but not chaotic, quite the opposite. He is described as always appearing to be 'in control', which is evidenced by his not having turned to the bottle to manage the 'stressors of role'. He has high expectations of his reports - 'when it's work, it's work' - but he also leads by example, and manages to project a very relatable (and 'healthy') visage that appears to make people look up to him. He is always 'well attired' and his weight has 'been the same for four years', a fact that seemed to confound Mary-Louse – 'I don't know how he maintains that', but not another of his subordinates, Sean, who portrayed Tyler as the poster boy of calorie restraint: 'I've eaten and dined with Tyler, and he's very controlled.'

It was no surprise to Cynthia that Tyler was in sales because 'he can talk about anything' and 'you want to listen…you want to be inspired'. She also noted how infectious his energetic personality is:

> *Yesterday we had our weekly trading meeting and I hate our trading meetings normally but yesterday he [Tyler] was like I want 200 million this quarter and everybody else is going around the room like saying '200 million!'. He bumped into me earlier and he said 'Cynthia, leave on a high!'. It's a bit infectious. (Cynthia, Mid-level Executive, Operations)*

In true charismatic leader fashion, his energy was experienced as being contagious; he can get a room full of people chanting the mantra '200 million!'. Despite having already decided to move on from NetCom, Cynthia still found him to be 'infectious': 'Cynthia, leave on a high!'. But where charismatic leaders can be criticised as inauthentic and manipulative, Shauna had no doubt that it was all genuine: 'You can fake it to a point but you'll get caught out'. Tyler, on the other hand, didn't need to fake it because:

> *Tyler has a lot of drive, he's a highly competitive individual, he wants to win, he wants the team to win, he wants to feel good. He's got that whole serotonin [thing]…the one that the gym gives you. (Shauna, Lower-level Executive, Sales)*

Shauna compares Tyler's drive and competitiveness to the chemical release of endorphins experienced from a gym workout; 'he wants to feel good' and the way to do this is for he and his team to 'win'. She seemed to strongly identify with Tyler's energetic disposition, given her earlier identification as someone with a lot of 'natural' energy, and suggested that like her, he would have to go to the gym to expend that energy.

Alyssa, another executive who reported to Tyler, reflected on his ability to push people beyond their own limits of exhaustion with his infectious enthusiasm. He did this to such an extent that she recalled how she and her colleagues nicknamed Tyler 'crack', referencing the highly addictive free base form of cocaine that gives a short but intense high to its users. His powers of persuasion and influence were not lost on Anthony either who noted:

> *…he will call us at any hour if he really has to and we will all beckon to that call. I think it's the same with us all reporting to Tyler. We see his call come through [and] you answer his call. (Anthony, Mid-level Executive, ICT Infrastructure)*

But he was not necessarily experienced by his direct reports as being unreasonable in his demands because he appeared to lead by example. Michelle, an executive in the business

development area noted that Tyler 'works harder than anybody else I know'. Another suggested that: 'Tyler will make you work hard, but he won't make you work as hard as he works himself, if he doesn't think you're up to it.' (Donald, Mid-level Executive, Finance)

Tyler's seemingly bottomless energy and his ability to manage it effectively seemed to inspire a degree of awe in many of his colleagues. Serena, an executive who works alongside Tyler but does not report directly to him, suggested that his energy could not be matched by any other NetCom leader and any attempt to do so would be foolhardy:

> *He's the highest energy leader around and to try and match that is silly…He's not caffeinated, he doesn't drink a lot. It is his high energy and if you try and match that energy each meeting and each day, you will burn out. (Serena, Mid-level Executive, Customer Experience)*

Like Shauna, Serena's comments seem to suggest that there was shared understanding which identified Tyler's disposition as 'authentic'; it was an innate embodiment of energetic leadership, not chemically assisted, not even by caffeine. Serena went on to add that, as a leadership team, 'it's quite interesting to watch how we all adapt to that energy'. Responding to Tyler's energetic disposition made Serena reflect on her own energy management, specifically how, 'I preserve some energy for me, how I stop giving it to everybody and everybody's problems and go home with a bit of energy left in my own body.' Serena was also one of a number of colleagues that praised Tyler for the way he absorbed the stress of his role and shielded his colleagues from experiencing that pressure directly:

> *I know that Tyler…shelters our business by carrying a lot of that weight and then not relaying it down. That requires a significant amount of energy to remain optimistic and balanced when he does have that pressure. (Serena, Mid-level Executive, Customer Experience)*

Serena acknowledges the 'amount of energy' it takes to retain some semblance of balance and optimism in a demanding role such as Tyler's. But while his efforts were applauded, it was also recognised that intensity and relentlessness of the work inevitably has its downsides no matter how much energy one has. Referring to the impact of Tyler's role, one executive noted: 'I'm sure he suffers as a result and I'm sure his family life has suffered and that's why he says he's no role model.' (Anthony, Mid-level Executive, ICT Infrastructure)

According to Anthony, Tyler had mentioned that he does not see himself (or his working style) as 'role model' worthy; which, if taken at face value, suggests that even Tyler himself

was aware that his work ethic impacted him beyond the work sphere. In fact, Tyler was often cited by his colleagues as an example of the extreme intrusion of work into the personal life of NetCom leaders. There were anecdotes of Tyler having to catch 'red eye' (overnight) flights because the parent company, ICT Corp, did not believe employees should fly on company time; and of him having to fly to Asia whilst on a family holiday in Europe to attend a work meeting. One colleague referred to him as a 'workaholic', and another noted that 'his wife books holidays in the ski fields…where his mobile won't work' in an attempt to carve out some work-free time with her husband and family.

Therefore, while many executives felt there was much be admired about Tyler's boundless energy, and his seeming ability to manage that energy efficiently, it was also acknowledged that this could set an unrealistic benchmark for work practices within the organisation. Gabriel, an executive who at one time reported to Tyler, suggested that his then boss tended to make assumptions that all his subordinates would replicate his willingness to place work before all other considerations:

> *So Tyler is very much work first, family second…I think that was hard because his expectation of me was to basically do the same sort of thing as what he's doing. So it was hard for me to juggle family first when work was obviously a priority. (Gabriel, Lower-level Executive, ICT Infrastructure)*

Gabriel's comments suggest that while Tyler's 'natural' excesses of energy may arguably predispose him to being better able to cope with the demands of executive life, it may also be alienating to subordinates who do not have access to those same reserves. This is likely to be especially true when that energy is viewed as being directed in a singular direction, that is, work, and at the expense of family or one's personal life. In the same way that athleticism may make leaders appear unrelatable to their followers, some NetCom executives recognised that the 'high-energy' leader may also embody a set of unrealistic standards of performance.

5.2.2 Discussion

Whilst extreme practices of athleticism may have been derided by many NetCom executives, the belief that maintaining one's health and fitness was a necessary part of leader self-management was consistently voiced by those interviewed. I argue that this 'necessity' can be predominantly understood in two ways: as a response to the actual labour associated with senior leadership, and as part of the construction of a bona fide leadership identity. Both views

intimate the importance of a 'fit-for-purpose' body; the former can be seen as an individual's pragmatic response to the exhaustive demands of corporate life, while the latter alludes to the social construction of embodiment as being central to leadership (Kelan, 2013). It is to the latter I will turn to below, paying particular attention to the role of 'energy' in constructing an idealised version of leader embodiment.

In their analysis of early trait-based theories of leadership, Bass & Bass (1990) suggest that the emergence of leaders was highly correlated with visibly high energy levels. This 'vitality' was said to be visible in many forms; some 'leaders were capable of dramatic bursts… followed by periods of lassitude', while others were able to sustain 'a continuously high rate of activity… on little sleep, and do so without signs of fatigue' (p. 89). Supporting this trait-based view of energy, Kirpatrick & Locke (1991, p. 50) argue that to sustain the drive required for leadership, leaders must invariably have a lot of energy, more so than their lower-level counterparts:

> *Working long, intense work weeks (and many weekends) for many years, requires an individual to have physical, mental, and emotional vitality. Leaders are more likely than nonleaders to have a high level of energy and stamina and to be generally active, lively, and often restless.*

These findings also concur with the assertions of Chen et al. (2016, p. 745) who, in their analysis of employee energy, suggest that those in senior leadership positions are more 'energetic' than junior members of an organisation, indicating that leaders tend to be more 'dynamic' people. The importance of the relationship between energy and leadership has also been an implicit premise in charismatic and transformational leadership research, which has tended to view the flow of energy from leader to follower as key to engagement and motivation (Kunze & Bruch, 2010). Taken together, such scholarly contributions paint a picture which suggests that 'energy' may be considered a distinctive marker of leadership identity, a characteristic that may be rendered visible through a leader's activity and apparent indefatigability (Bass, 1990, p. 89).

In his seminal ethnographic study of corporate leaders, Jackall (1988, pp. 90-91) observed how energy was central to the way leaders were defined:

> *It is said that some managers move so quickly that "their feet never touch the ground." These women and mostly men usually have a great deal of energy and "dynamism" that draw others*

> *to themselves; with their articulateness and personal magnetism, they can "motivate" others and provide a galvanizing "vision" of the future. They are said to be like "skyrockets" or "shooting stars" or "sparklers" that light up the night sky. All big organizations feed off this kind of renewing energy. (emphasis in original)*

Jackal's observations demonstrate the common use of energy metaphors when describing the attributes of leaders and offer an insight into how the somewhat amorphous quality of energy can be adopted as a distinctive marker of leader identity. The importance of the embodied dimension of energy is taken up by Meriläinen et al. (2015) who, in their research into executive recruiters, noted how executive search consultants sought out bodies that not only looked fit and healthy but that embodied that less tangible characteristic of 'energy'. The authors surmised that, 'to become a serious contender for the executive position on offer, the candidate needs to appear energetic and intensive' (p.10), making 'bodily features such as energy… the target of sensory interpretation and evaluation' (p.9).

Numerous NetCom leaders appeared to subscribe to the belief that energy, particularly excessive amounts of it, was not only necessary to do the work of leadership but that it was also an innate characteristic of leaders. This was exemplified by what Jennifer labelled the 'CEO mentality', which suggested that excessive amounts of 'nervous energy' was inherent in leaders and could be understood as a precondition that explained some of the athleticism often displayed by those in leadership positions. Within NetCom, Tyler's embodied feats became the most obvious object of 'sensory interpretation and evaluation' and an example of how energy was viewed as integral to leadership. It perhaps bears repeating that Tyler himself was not interviewed for this research, however, frequent accounts of his seeming indefatigability, his ability to motivate others, and his capacity to endure the relentless demands of his role, made for a compelling case of the way energy is made sense of by other leaders. The admiration of Tyler appeared to be focussed on both his 'innate' energy levels and how he was able to successfully discipline his body in order to manage the bounty of his 'natural' resources. As Schippers and Hogenes (2011, p. 194) observe, 'having a lot of physical energy is no guarantee of success', it also needs to be effectively managed.

It was the control that Tyler was able to exhort over his body - for example, his ability to be consistently restrained in his dietary intake and having a consistently slim body – that was a source of wonderment and awe for many other executives. Similarly, executives noted how they turned to their exercise regimes in order to manage their energy, which they deemed as essential to their personal health and wellbeing and their effectiveness as leaders. This speaks

to the performative dimension of energy management in which displaying the effective control of your personal resources becomes a core competency of the self-managed body. Johansson et al. (2017, p. 15) hint at this when they suggest that it is not sufficient to simply *be* healthy, a leader must also exude 'the signs of energy, endurance and self-control' if they wish to be truly impactful.

In their study of autonomy in knowledge workers, Pérez-Zapata et al. (2016, p. 41) argue that a critical skill of the self-managed worker in to be able to effectively manage boundaries, 'whether these boundaries are to sustain mental and physical health or to replenish consumed energy'. My research suggests that the importance of energy management is not only relevant to knowledge workers, rather, I posit that it has also become enmeshed with the performative ideal of the self-managed body in leadership. The argument that leaders need to be energetic and even adopt behaviours, and language to emphasise this, is understandable given their role as key organisational motivators and influencers. Similarly, I am also not disputing the necessity for leaders to have sufficient energy to meet the often unrelenting demands of their work (Svetieva et al., 2017) as there is little doubt that work itself can be an energising force for leaders, that is, it can 'restore resources rather than just diminish them' (Muhr et al., 2012, p. 207). What is less clear and more contentious, however, is how intimately notions of energy are bound up in the displays of practices that may be considered constitutive of an idealised leader embodiment.

The popularising of energy management in leadership can be traced back to Loehr and Schwartz (2001), who originally coined the term 'corporate athlete' and were instrumental in transposing energy management from the world of elite sports to the executive boardroom. Drawing on their knowledge of the sports sciences, they posited that: 'On the playing field or in the boardroom, high performance depends as much on how people renew and recover energy as on how they expend it' (Loehr & Schwartz, 2001, p. 128). Accordingly, they replaced time management, once viewed as an important gatekeeper of performance (Gregg, 2015), with the more ephemeral descriptor of energy management because, according to Schwartz (2007, p. 64), 'The core problem with working longer hours is that time is a finite resource. Energy is a different story.' Recognising that time may be beyond individual control, they argued the solution to the increasing demands and complexity of leadership lay in was argued to lie in a leaders' ability to effectively manage their energy. Through the prism of the sports sciences, managing the energy of leaders is based on the 'idea of helping healthy people become extraordinary, rather than sick people become healthy' (Garcia, 2015, January). It is a concept

defined by its appeal to an elite body, hence its attractiveness to those in senior leadership positions.

Consistent with the move away from trait-based perspectives on leadership (Day & Antonakis, 2012), a view of energy as trait-based has undergone further (successful) adaptation. Rather than being seen as a necessarily intrinsic characteristic, energy has become something that can be cultivated by all leaders through the adoption of specific embodied practices labelled 'energy management', in ways that reflect broader contemporary health and wellbeing discourses. Some management literature, particularly that which is practitioner-oriented in nature, has applied this thinking to argue for the importance of energy management in leadership: for instance, Kaiser and Kaplan (2006) are earnest in their explication of Loehr and Schwartz (2001) 'ideal performance state' and Fritz et al. (2011, p. 29) wholeheartedly adopt Loehr and Schwartz's (2001) claim of a 'human energy crisis' in knowledge workers. I suggest that such literature is indicative of a wider movement that has helped to broaden the focus from purely essentialist views of energy (i.e. belonging solely to the outlier individual with excesses of energy), to something that can – and arguably *should* - be cultivated by all those who call themselves leaders.

I suggest that when explored critically, the views of NetCom leaders do more than uphold traditional trait-based beliefs about energy and its existence as an 'innate' quality of leadership. Instead, they also reflect the broader appeal of energy management as an embodied practice available to *all* leaders who are sufficiently committed to their role. So, for example, when Abigail states that she gets out of bed at 5 o'clock in the morning to exercise (even though she has 'never been a morning person' and hates it), she is exhibiting the capacity to override an instinctive biological response and discipline her recalcitrant body. She may not have the natural resources that Tyler has at his disposal, but she can still exhibit the energy management practices that are considered integral to leader identity.

As a somewhat subjective and nebulous construct, energy is available for 'the sensory interpretation and evaluation' (Meriläinen et al., 2015, p. 11) of others, and its presence (or absence) may be inferred through particularly embodied practices. For leaders then, displaying abundant energy and exhibiting the discipline to manage their energy through regimes such as diet and exercise, can become an identity marker associated with doing leadership well (Ford et al., 2008). Whilst going to the gym does indeed release the endorphins that sustain leaders through the busy schedules, such embodied practices may also yield other rewards insofar as they help to construct the essential characteristics of the energetic, self-managed body. The

origins of the relationship between athleticism and energy management (Loehr & Schwartz, 2001) should therefore come as no surprise. Discipline and control have long been viewed as traditional markers of a masculinised leadership identity (Collinson & Hearn, 1994), so to practice the embodied regimes associated with health and wellbeing is not a neutral act. Rather, it serves as a way for those in senior leadership positions to reinforce their identity as leaders, and to distinguish themselves from those who are not.

My argument is not to dispute executives' claims about the importance of energy to the act of leading, rather it is to illustrate that such views rely, in part, on the meanings made of embodied practices which lend legitimacy to the self-managed body as a potent signifier of leadership. I suggest that popularising the relationship between athletic endeavour and energy management is consistent with the individualising discourses of health and wellbeing, and upholds a particular set of ideals about leader embodiment. It associates leadership with visible displays of control or athleticism that may be inherent to charismatic leaders such as Tyler but may disadvantage those who embody leadership differently, or who may exhibit symbols of embodied vulnerability. As one NetCom executive observed, attempting to mimic Tyler's energetic disposition would be 'silly' and eventually lead to 'burnout', and even Tyler himself was noted as acknowledging that he was not a role model for other leaders. But in competitive corporate climates in which leaders are often keen to exhibit their edge over their peers (S. P. Brown et al., 1998), it is not difficult to foresee how those who can display or mimic a 'natural' high-energy disposition may become esteemed as the perfect embodiment of leadership. This may become problematic for those leaders whose bodies are 'read' as lacking energy and vitality, and it is to this discussion that I will turn in the next chapter.

5.3 Conclusion

In this chapter I have discussed how discourses and practices of the fit body were adopted by NetCom executives and how these inform the perceived relationship between fitness and leadership. I have argued for a more contextually embedded understanding of athleticism in organisational leadership; one that recognises cultural distinctions and refrains from the temptation to depict the idealisation of fitness as a static, incontestable phenomenon in organisations. My research presents a diverse interpretation of the fit body, recognising the role that senior leaders play as potential influencers and also the mechanisms of organisational feedback that are in play, particularly when cultures of athleticism may conflict with principles being espoused by an organisation. Further, I have argued that NetCom's (sub)cultures of

athleticism can be interpreted as refuges for homosocial displays of masculinity: sites which both mimic the tribalism of corporate life but also provide opportunities for the expression of embodied vulnerability.

My research suggests that the language of health and fitness was deeply entwined with the embodiment of leadership, even though most NetCom leaders rejected the moniker of 'corporate athlete'. I have focussed on the way in which displays of energy and energy management appear to be interpreted an amorphous signifier of leader identity. Finally, I suggest that this can become particularly problematic insofar as such views may contribute to unsustainable leadership practices, embedded as they are in yet another version of the masculinised and heroic body. In the next chapter I will explore a counter embodiment narrative, in particular how overweight or obese bodies were often associated with a lack of energy and self-discipline deemed intrinsic to leadership identity.

Chapter 6: Leadership and the Fat Body

In this chapter I discuss the perceptions and experiences of NetCom executives regarding the relationship between bodyweight and leadership. I adopt the conceptual category of the 'fat body' to describe bodies that, because of their size, do not conform to idealised norms of leader embodiment. I begin by exploring the perceptions of NetCom leaders about the overweight and obese, and note what these views suggest about the subtle (and not so subtle) biases that are associated with the fat body in leadership. I then document executives' lived experiences of weight sensitivity and discrimination, before turning to an in-depth case study to explore how weight biases may be present in the recruitment processes that executives lead. I briefly introduce Goffman's (1963) work on stigma to provide a conceptual framing to understand executives' experiences and perceptions of the importance of bodyweight in leadership, in particular, how the overweight and obese may be tarnished with a spoiled leader identity.

6.1 Perceptions/Experiences of the Overweight and Obese Body

Some NetCom executives observed that whilst they were aware of the wider social discrimination that overweight and obese people had to contend with in society, the same kind of discrimination was not so readily visible within their own organisation. For instance, Mia recognised that in society, 'people do tend to think that if someone is overweight that they don't look after themselves', however, she didn't believe this was such an issue in her workplace - 'I haven't seen it here as such' (Mia, Lower-level Executive, Innovation). Reggie also pointed to the work that NetCom does in an effort to stamp out discriminatory practices and noted how the organisation's annual diversity training has 'drummed' into employees that they must refrain from 'judging people because they're fat'. He added that, 'judging people by their physical appearance… It's just not something you're allowed to do here.' (Reggie, Lower-level Executive, Operations)

Whilst Reggie and Mia's comments seem to toe the organisation's official anti-discrimination policy line, it is interesting to note the subtler, or even unconscious, ways in which weight discrimination was being played out in NetCom. For example, earlier in Reggie's interview, he had offered the following anecdote in response to a question about whether a leader's physical appearance affected his perception of their ability to carry out their role effectively:

Absolutely it would, I'm sure. But not necessarily in the nicest possible way either. I mean, I just had spring to mind an incident this morning… I was walking back to the kitchen with an apple core in my hand… that was my morning tea… an apple. Then walked past another guy at 10 o'clock in the morning who was carrying a packet of chips, and who is not the slightest person in the world, he's a little bit chunky, and it's just like, there's something wrong with this picture. (Reggie, Lower-level Executive, Operations)

The fact that Reggie brings this anecdote to mind in reference to a question about physical appearance and perceived leader competency, is suggestive of the role visible characteristics such as weight can play in leadership. He appears keen to distinguish his own healthy eating behaviours from that of his 'chunky' colleague; *he* was eating an apple (the universal symbol of good health) whilst his colleague was 'carrying a packet of chips'. Perhaps, in recognition of his own biases, he later attempted to mollify his comments by suggesting that he didn't have 'any lesser opinion of this guy' because of his early morning chip-eating habit, rather 'it was more of a thought of just looking after yourself".

The '*I'm not judging you, I'm just worried about your health'* rhetoric, appeared to be an argumentation that some executives used to defend what could otherwise be considered politically insensitive comments about overweight people in the workplace. For instance, one executive offered this assessment of obese people:

I don't know, but do obese people have as much self-respect as fit people? I don't know. It's nice to work with people that respect you but also have a bit of self-respect. (Blair, Mid-Level Executive, Corporate Services)

After first questioning the level of self-respect that obese people might have, and then inferring that they make less enjoyable people to work with because they lack 'self-respect', Blair proceeded to justify his comments as an act of sympathy: 'I don't dislike or disrespect fat people. I am probably just concerned or maybe feel a bit sorry for some of them, particularly if they look uncomfortable.'

Whilst Blair attempted to wrestle with his conscience about his assessment of obese people, other NetCom executives were very transparent about their distaste for the overweight, as well as the messages they might convey if they are in positions of leadership:

[Referring to the well-known Australian business leaders Clive Palmer and Gina Rinehart] I can honestly say, I'm conscious now I'm being recorded… but I don't take them probably as seriously - I probably look for what I don't like about them and don't take them as seriously if they were just what I perceive to be a normal human being, like a human example of being fit and healthy (Abigail, Mid-level Executive, Client Relations).

If you… see a leader like Clive Palmer, I [almost] can't be bothered to listen to him… It's unconscious bias. So you look at leaders, if they're not quite as healthy looking then I don't think that people view them in the same way. Not these days. (Shauna, Lower-level Executive, Sales)

During the interview, Abigail emphatically commented on the negative aesthetic impact a 'grossly overweight person' had on her; in short, she found them 'quite revolting and repulsive'. This feeling seemed to be reflected in her perceptions of two of Australia's most prominent business leaders who happened to be overweight. Whilst Abigail was very self-conscious about the comments she was making and kept glancing down at the voice recorder, she was clear that the weight of these individuals *did* affect her perception of them as leaders, particularly her ability to take them seriously. Her observation that her opinion of these leaders differed from that of a 'normal human being', that is, someone who was 'fit and healthy', appeared to be a frank admission that illustrated the way an individual's weight could be dehumanising regardless of their seniority.

Many NetCom executives believed there to be negative correlations between an overweight or obese leader and their work performance. One executive reeled off a list of assumptions that might be made about an overweight leader which included; 'a lack of discipline, lack of attention to detail, lack of organisational planning, lack of motivation, lack of valuing if they have family' (Benjamin, Lower-level executive, Sales). These are not qualities that a person in a senior leadership position would aspire to project into the workplace, nor are they likely to be qualities that leaders would be looking for in their employees.

Shauna also used the example of Clive Palmer to suggest that his size is part of why she 'can't be bothered to listen to him'. Although she recognises the presence of an 'unconscious bias', there appears to be no question that 'these days' not being 'healthy looking' will impact peoples' perceptions of a leader's credibility. This line of thought was echoed by Mary-Louise, who recounted the observations of one of her former colleagues:

He had a manager - this is really quite awful, but he was a very large man. He was quite obese. He used to get gout all the time. He always said to me he's not a leader, to me, because if you can't look after yourself and take care of yourself, how are you going to take care of us as employees and take care of the company? (Mary Louise, Lower-level Executive, Operations)

I subsequently asked Mary-Louise what she thought of this view, and she acknowledged that while at first, she was reticent to agree with her colleague's comments, she now shared them:

I didn't agree at the time, but I actually - now I do… I actually get why you'd say that. If you really can't look after yourself and manage yourself and the family… If you can't do that at that level, then how are you going to be able to do that at a more senior level? You will get stressed. You will get sick… Isn't that dreadful?... I'm an obesist! (Mary Louise, Lower-level Executive, Operations)

Far from projecting a utopian organisational environment free from discrimination, these comments reflect the reality that NetCom's leaders represent a microcosm of society's views on the overweight and obese. As an employer of over 8,000 people with over 100 senior leaders, it should not be surprising that executives will espouse a broad range of views that expose their own unconscious (and conscious) biases, assumptions and prejudices. What is useful for the purposes of this research is how their views on the subject of weight, particularly being overweight or obese, factored into executives' perceptions of leaders (including themselves) and of leader identity more broadly.

There were a number of executives that could not countenance the possibility that an individual's weight was relevant to their leadership, or that it affected their perceptions of leaders. Serena, who herself felt stigmatised by her own weight, suggested that she did not care about a leader's weight but rather how suitable they were for the job, whilst Sean suggested he looks at leadership through a performance lens which made weight irrelevant:

I don't think I have a bias towards weight. I think you have to be fit for purpose for the role… So the demands of the job are just physically being able to do - that may not necessarily make you the best candidate for it. (Serena, Senior Executive, Retail)

If two executives are doing the same thing and performing the same way and one is larger in presence and not as fit as what someone else is, it's irrelevant to the way I see them. (Sean, Lower-level Executive, Sales)

Jason too, argues that it would be 'nuts' to allow your perceptions of a leader to be skewed by their weight, and appears shocked at the possibility that this might be a view being espoused by NetCom executives. He uses the recent promotion of an overweight employee to illustrate his belief that NetCom is a weight-blind organisation:

> *We'd be nuts to have that [weight discrimination] heavily impact your judgement of people, completely nuts…Without naming names, one of our best guys at the moment, who we've just promoted to senior role, is overweight. That has not in any way coloured our view. (Jason, Non-executive Director)*

Finn supports Jason's view that weight and leadership should not be correlated and used the example of the same colleague to make his point:

> *… I think the best leader here is an incredibly overweight, out of shape guy called Julian, who in my opinion should be the next CEO. Amazing leader. Whatever an athlete is, he's the absolute opposite. (Finn, Mid-level Executive, Marketing and Communications)*

Julian did not make himself available for an interview, so it was not possible to ascertain whether he would draw the same conclusions about NetCom's culture being weight-blind, or whether he experienced any feelings of discrimination in the organisation because of his size. What is apparent, however, is that despite views to the contrary, there were many executives who believed that an individual's weight *did* have a bearing on the way they could be perceived as leaders, and that NetCom's culture was not as much of a judgement-free-zone as some would like to project. These judgements and perceptions could be very potent, particularly when they were being espoused by senior organisational leaders. For example, Jacob recounted an experience of being in an internal group meeting in which the former CEO was discussing an encounter he had with executives from a competitor organisation:

> *[the former CEO] was talking about the performance of one of our competitors… and he said – I met some of the management folks from Code One yesterday and he said…"it surprised me, they're all fat, they're really fat" … He kind of made an off-hand comment, he said I wonder if their financial results are related to the fact that they're fat and unhealthy. I think there was some statement to the effect, 'and look at all of us, we're all healthy or whatever and we're*

beating them in the marketplace'. I thought that was an interesting comment, a bit - not unprofessional but slightly out of context. (Jacob, Mid-level Executive, Marketing)

Jacob's anecdote illustrates how biases transcend hierarchy – anyone may have the proclivity to discriminate - however, when one is the CEO or a senior leader in an organisation, the potential to influence organisational culture is generally understood to be greater. Whether conscious or not, the former CEO's comments reveal subtle but pervasive beliefs about the weight of leaders and its relationship to organisational performance. Jacob, noted that the majority of those present in the room, including the CFO, were keen cyclists, 'mainly male… sort of middle aged, sporting types'. It is questionable whether the CEO would have felt comfortable enough to express this view had he not been surrounded by people that reinforced his own image of what a leader's bodyweight *should* resemble.

Musing on NetCom's culture and how one might be perceived if you did fit the acceptable norms of fitness, Warren suggested that, 'I think in NetCom there is a bit of a tendency to be critical if you're a bit overweight'. He then recalled a conversation he had had with one of the senior executives of the parent company, ICT Corp:

Warren: Somebody said to me once, Warren, you've put on weight. You're not working hard enough. I was like, I'm skin and bone. What the hell are you talking about?
Researcher: Was that said in a jokey way or was it like a serious…
Warren:… I don't know. [It was said] by somebody who's quite senior and who doesn't joke a lot.

Warren went on to confide that he was also prone to bias when it came to overweight people, and it was only when this was pointed out to him that he began to modify his behaviour:

People used to say to me - you don't like fat people, do you? It wasn't until they said it that I went, okay, actually I'm behaving that way… It's not that I don't like fat people but I think I had to change my perception and how I interacted with people and try and change my language a bit, like, don't judge. (Warren, Mid-Level Executive, Finance)

Warren noted that because he had always been 'skinny' and never struggled with his weight he had failed to understand 'how people who are overweight can cope when carrying around so much body mass'. His argument seems to be that personal ignorance and lack of firsthand experience, precluded him from having any empathy or awareness of what it might

be like to occupy such a body, that is, until the potential offensiveness of his views was pointed out to him. Warren's comments underline some of the complexities regarding attitudinal issues associated with weight in an organisational environment, namely, that is possible to be a senior leader and to un/consciously hold views that would be considered discriminatory by today's standards. But it also possible, because one's weight is such a personal and visible component of personal identity, that leaders may themselves be sensitive to perceived discrimination from others, even if they do not see themselves as belonging to that identity group – 'I'm skin and bone. What the hell are you talking about?'

6.1.1 Executives' Lived Experience of the Fat Body

Some NetCom executives were very open about the challenges that they'd had managing their weight and others' perceptions of them. Fluctuations in individual weight were sometimes attributed to the stresses of work and the inability to find the time for exercise, however, it was more common for executives to frame their weight challenges as a failure of self-management rather than as a result of work. For instance, Shane suggested his poor dietary choices and the associated weight gain that comes with it were his responsibility, not that of NetCom: 'Unfortunately I'm savoury and sweet so I like chocolate and I also like peanuts. They're a bad combination. But I know what causes it when I put weight on. It's not NetCom's fault. It's mine' (Shane, Mid-level Executive, Operations). Similarly, whilst Mary-Louise correlates her cycles of weight gain with particularly stressful times at work, she also notes how her own wavering commitment to the gym comes into play:

> *I'm one of these where I'll go [to the gym] for three or four months and I'm really good and disciplined… Then we have so many fire drills and… everyone has to jump because something's happened. Then suddenly, before you know it, you're in here at seven o'clock every morning, and suddenly that exercise has gone out the window. I always recover, but… I end up putting on about 10 kilos. I'm like great, thanks for that, but I blame myself more than the organisation, in a way. (Mary Louise, Lower-level Executive, Operations)*

By labelling herself as 'one of these' irregular gym goers, Mary-Louise intimates that she is inconsistent in her approach to exercise regimes, or at least easily distracted by work, which leads her to blame herself 'more than the organisation' for her weight gain. Her comments were consistent with the lens of personal responsibility through which most

executives viewed their health. With little room to blame anyone other than themselves, it was perhaps unsurprising that those executives who did struggle to manage their weight exhibited a tendency toward self-criticism. As the comments below suggest, this did not appear to be a particularly gendered phenomenon, with men just as likely as women to express sensitivities about their physical shape:

> *I mean, in 2010 I put on weight and… yeah, you kind of look at yourself and go, God, you look fat. You don't look healthy. (Charlie, Mid-Level Executive, Engineering)*

> *I watch my weight very carefully. There's barely a day when I'm not thinking about [it] - because my weight… can fluctuate quite sharply. (Tai, Mid-Level Executive, Business Development)*

> *I now know that in May I'm going to be up on the scales again generally in front of very fit people [for the annual health check] … I've got a goal this year to lose about eight or nine kilos which I've chipped away about two kilos of that. But it's going to take me a full 12 months to chip away at it. (Shane, Mid-level Executive, Operations)*

These comments seem to reflect broader social anxieties about weight, and it should not be surprising perhaps to hear such ordinary concerns being voiced by individuals who are highly visible and whose performance is subject to close scrutiny. From Charlie's displeasure at his appearance - 'you look fat' - to Tai's hyperconsciousness about his fluctuating weight - 'there's barely a day when I'm not thinking about it', these comments reflect normal, human concerns about how one's body is experienced by individuals and perceived by others. Shane's self-consciousness about appearing overweight in front of 'very fit people' echoed a comment made by another executive, Joelene, regarding the competitive nature of NetCom's annual executive health check, and how it could make overweight leaders feel uncomfortable.

During our interview, Joelene recalled a meeting she was having with a peer group in which 'there were some people who were bragging about what levels they got up to in the physical test and their biological age.' She then noted how one member of the group was not participating in the conversation:

> *It was clear that one person in the room had not done it [the health check] yet had been at NetCom for a while, but physically quite generous in size. Yeah, just didn't participate at all in*

the conversation, and clearly would have been able to take it up but hadn't taken it up. For whatever reason, they hadn't done it. Interesting. (Joelene, Senior Executive, Retail)

Joelene appears to suggest that the person in question did not participate in the conversation (or the health check) because they may have been self-conscious about their 'quite generous' size. This reluctance to participate in the health check was also noted by NetCom's head of health and wellbeing, who is here describing her observation of an overweight executive who chose not to participate in the health check:

So, I'm thinking of one particular executive who's quite overweight and drinks a lot, he's not going to have his medical because he knows he's overweight and drinks a lot, he doesn't want to hear it from anybody else though and he's not ready to make a change. So, he makes a joke about the fact that he doesn't need to go for it… I think there's a little bit of shame in there. He is in this group and yet, look at him. Yes, facing the facts can be difficult. (Deborah, Manager, Health & Wellbeing)

Deborah suggests that this executive's avoidance of the health check is related to the fact that he is 'quite overweight and drinks a lot' and that he is not motivated enough to want to change his behaviour. According to Deborah, he masks these feelings by 'making a joke about it' but perhaps most interestingly, she suggests that he feels 'a little bit of shame' about his place in the executive group, specifically because of his weight: 'He is in this group and yet, *look at him!*' These are, of course, only Deborah's observations but placed in context with other executives' comments, they do provide some insight into the normative expectations internalised by some NetCom executives.

Being overweight carries potentially stigmatising connotations in society so it is perhaps unsurprising that executives who are highly visible members of an organisational elite and who are often charged with the responsibility of being role models, should be concerned about having their own weight subject to scrutiny. This contention was supported by Jennifer's comments, who here gives her explanation as to why she had not previously participated in the health check:

I'm interested; I just don't prioritise it. I really don't, and I'd have to say it's also because I was overweight. I'd go hey, I don't need you to tell me I'm fat; I know I'm fat. (Jennifer, Mid-level Executive, Finance)

Jennifer's comments appear to reflect a degree of apprehensiveness about what the health check might expose about her own health status. Jennifer went on to speak about the judgement she felt she has had to contend with from others due to her size. Describing herself as a very active person who is into her fitness, she discussed how struggles with her mental health began to affect her weight. After much deliberation, she decided to have bariatric surgery and became very slim as a result. Here she discusses the way she feels she is treated differently in the personal and professional sphere after she lost 30 kilograms in 12 months:

> *It's massive, the response you get from people, the way people treat you and look at you. It's totally different. It's like wow, who's this amazing new, young thing that has come on board? You're full of energy, you can do anything! It's ridiculous. What are you doing? Wow, you look great. People come up to you and sometimes I actually change topic because I feel embarrassed… I'm going wow, I'm exactly the same person I was 12 months ago, I think exactly the same thing, I'd vote for exactly the same person, I go to the same church. Nothing has changed. The only thing that's changed is the size tag on my clothes. But you get treated differently. You do. (Jennifer, Mid-level Executive, Finance)*

Jennifer's account provides a rare glimpse into the perspective of a senior leader who is having to contend with the reactions of people who have known her before and after her weight loss. Even though in her own mind it is only the 'size tag on my clothes' has changed, Jennifer suggests that her weight loss has prompted others to heap praise on her for her renewed youth, energy, and limitless potential – 'you can do anything!'. Jennifer did not tell her colleagues about her surgery, only her immediate supervisor was informed, and after she spoke about it during the interview she commented, 'So, you're the second person who knows. Well, outside of my family.' The desire for secrecy is understandable given the social stigma that surrounds obesity, but it also reaffirms the way those in high status positions are sensitive to, and not immune from, the prejudices of weight discrimination.

Serena is another female senior leader who was frank about how she felt she had to manage some of the negative associations of being overweight. Here she discusses what this experience of overcoming the 'social pressures on how you look':

> *Throughout my life, I've had people that have encouraged me, like a personal trainer that said there's a big myth that you can't be overweight and fit. You are fit, you are active, you don't*

stop. But I think I'm very comfortable in my own skin… there's a lot of societal pressures on how you look and how you're perceived which are reflected in the corporate space. I'm probably not too worried about that myself. I'll do what makes me feel confident and I'm probably quite comfortable in my skin. (Serena, Mid-level Executive, Customer Experience)

Serena seems to recognise how the societal views about being overweight 'are reflected in the corporate space', but says she does not consider her size to be an impediment to her being active. She suggests that she has overcome the stigma associated with being overweight and is 'not too worried about that' any longer. Serena repeatedly uses the phrase, 'comfortable in my skin' to indicate how far she has come in challenging the 'big myth' that 'you can't be overweight and fit'. Her self-acceptance and ease within her own body was also noted by one of her colleagues, Mary-Louise, who described Serena as someone who does not fit the usual corporate mould:

Everyone else is in a suit. She'll be in trousers and a long shirt. Never wears makeup. Is probably a large size, but she's made it all the way to the top. So, she doesn't fit that mould at all, but she's managed it. I find that interesting because she's bloody good at her job, and it appears that those making those decisions have put that to one side and have looked past all of that. Then I look at everybody else who are peers. They are all suited and booted and they all look how I imagine the corporate world to look like. (Mary-Louise, Lower-level Executive, Operations)

In Mary-Louise's summation, Serena appears to be someone who literally 'doesn't *fit'* the mould of a stereotypical corporate executive. Her characterization suggests that it is *in spite* of the way she dresses, her absence of makeup, and her 'large size', that she has 'made it all the way to top'. These things should all have been impediments, according to Mary-Louise, so it seems a genuine surprise to her that those who have promoted Serena have managed to look beyond the superficial factors of appearance to consider her actual aptitude for the role above all else. That this seems to be such a unique phenomenon in Mary-Louise's mind, perhaps gives some indication of the implicit physical constraints imposed on executives, especially women, and how easy it is to transgress them by being overweight. In the next section, I will discuss how these perceptions of overweight and obese people can spill into the realm of recruitment and reveal the inherent biases of some NetCom leaders.

6.1.2 Case Study III – Callie's overweight but 'lovely, lovely man'

When it came to decisions about recruitment, one of NetCom's most senior leaders was emphatic that it was imperative not to be influenced by an individual's appearance: 'You do not pick people around you because they look good. You will not survive. You have got to pick people based on ability' (Jason, Non-executive Director). Whilst this sounds perfectly rational and appeals to the merit-based view of recruitment and advancement, there are other factors that came into play during the recruitment process. At the macro level, for instance, the way NetCom has positioned its corporate brand in the labour market is likely to influence the kind of candidates that will apply to it in the first instance. This is something that was noted by Sheena when she suggested; 'The brand's positioned itself as young, funky things. So unconsciously, that probably even plays out with some of the people that may even apply to the company as well.' (Sheena, Senior Executive, Retail) At the micro level, senior leaders hold significant organisational power and it is here where individual unconscious biases are most likely to impact the recruitment process. So, while Jason may suggest that it is counterintuitive to pick people 'because they look good', if an individual leader holds a bias about overweight individuals, which some NetCom leaders clearly do, this is likely to factor into their decision-making processes.

Callie was a NetCom executive who recently joined the organisation from a competitor firm. Her role was responsible for overseeing the strategy of major corporate accounts, part of a team which consists of up to 160 individuals across sales and operations. In discussing whether there were pressures on leaders to appear fit and healthy, Callie began her response by making a reference to Tyler whom she had known 'for many years' and who was widely recognised within NetCom for his ebullient personality and limitless energy (see Section 5.2.1). She described a recent encounter with him and reflected that 'he looks fit and well and healthy… probably more so than I've seen him.' Then, as a contrast, she offered an alternative example to illustrate the importance of fitness in leadership, and spoke about a recent experience of recruiting for 'a senior, very senior role in my business':

> *… I had a fellow, lovely, lovely man. I mean he didn't have the right skills but that aside, I remember if I'm really honest looking at him and he looked like a heart attack waiting to happen to be honest… you do sort of think... aww… you know which is bad. But I am being honest. You want, you want somebody that looks like that they've got energy and health and wellbeing, and that they look after themselves. I do think it sends a message if it's otherwise. (Callie, Lower-level Executive, Sales)*

Callie seemed to be describing a very visceral response to her interview candidate, one that was sparked by a reaction to his physical appearance. Although she doesn't explicitly mention his weight at this stage, Callie's assessment that 'he looked like a heart attack waiting to happen', coupled with his lack of 'energy', were indicative that it was the size of this 'lovely, lovely man', (and what it suggested about his level of self-care) that was particularly problematic for her. She was aware that she was uttering a politically incorrect view - 'which is bad' - but by being 'really honest' Callie appeared to be attempting to square her own responses with the reality of needing to recruit people who look like they have 'got energy' for a demanding role. The 'aww' exclamation seemed to be one of pity rather than revulsion, and hinted at a sadness that a person could get to the stage where they allowed themselves to be so heavy. As she later added:

> *What does it say if you don't take that pride in yourself? I need someone that's going to have lots of energy, lots of drive and I think that is more than physical appearance but I think that's part of it. If you see someone that is fit and healthy then I think their ability to cope with things is better. (Callie, Lower-level Executive, Sales)*

The candidate's overweight body appeared to communicate a 'lack of pride', 'energy' and 'drive', which Callie conceded does come down to more than physical appearance. But this candidate's overweight body seemed to suggest a lack of resiliency, an inability to 'cope' with the pressures of organisational life. She went on to give an example of the CEO in her previous workplace and how he exuded images of vitality and health. She knew, for example, that he participated in an annual charity cycle, and that he 'rides bikes on the weekends', and that he also 'loves to paint'. For Callie, these things are important 'for the reasons I've spoken about but also because it's important to see them as people.' According to Callie, these activities cultivate the impression not only as a healthy leader but also that one has a life outside of work. This has a humanising effect as they can be seen as real 'people' by others and therefore set a positive example. The implication seems to be that the overweight leader does not convey such a life-affirming and inspiring image.

As the interview continued and I gently challenged her assumptions about overweight people, Callie began to recall another time she *did* hire 'quite a large girl':

And for example, I've just hired a girl… and to be honest, she's quite a large girl. But she's so high energy, and so bubbly, and so fit, you don't even think about it… And this girl goes to the gym. She goes to the gym four days a week. She is, does a whole lot of stuff… so it's different. I compare her and she was equally, you know in terms of her body shape, equally as overweight as this fellow but this fellow, just had that sense of yeah… it's just, and I could be completely wrong, lovely, lovely man. But to be honest it's not why I didn't put him through the process. I didn't put him through the process because he wasn't the right… didn't have the right skills. He was, you know, if I am honest, he was very yesterday's leader. You know and I need someone a little bit more forward thinking. But yeah, I must admit you know you, you do kind of, does have some bearing, but like when, you know, when Vicky said to me 'I go to the gym five times a week and I do this and I do that', I was like, 'Oh cool, good on you'. (Callie, Lower-level Executive, Sales)

Callie's comments suggest that she was able to overlook Vicky's size because she was so 'high energy', 'bubbly' and 'fit'; descriptors that buck the stereotypes of an overweight person. It was interesting that energy – or at least the appearance of it – not only seemed to be a major currency that Callie felt her subordinates needed to embody, but energy in the way it is discussed here also appears to have the potentially ameliorative power of countering her implicit biases. It is okay to be fat, as long as one still engages in embodied practices like going to the gym and projects an 'energy' that suggests an ability to cope with the role. Callie seemed to be genuinely taken aback that Vicky went to the gym and was as active as she was; her comment, 'Oh cool, good on you', appeared to be one of surprise and warmly patronising in tone, reminiscent of the pity some of her colleagues had previously expressed towards overweight and obese people. One can only speculate as to whether Vicky felt the need to be more 'high energy' than usual, not simply because she was in a job interview trying to put her best foot forward, but also to overcome the stigma associated with being 'quite a large girl'.

6.2 Discussion

NetCom executives exhibited a broad range of opinions regarding the relationship between bodyweight and leadership. Central management, in particular, espoused views that accorded with widely held expectations of modern organisations to deplore discriminatory behaviours and practices. However, my research suggests that many NetCom executives still held views (and had had personal experiences), that reflected the findings of other scholars regarding the societal biases toward overweight and obese leaders (Bresnahan et al., 2016; E.

B. King et al., 2016). In fact, the often very frank opinions elicited from the research participants, indicated that many executives had formed views that were indeed laden with preconceptions that characterised heavier individuals as pitiful, repulsive, devoid of energy, as well as lacking discipline, competence, and self-respect. Such views allude to the potentially stigmatising effects of bodyweight for leaders, a discussion to which I now turn.

The majority of stigma research has tended to concentrate on those in society who occupy low power positions (Crocker et al., 1998), a focus that has been replicated in organisation studies literature. The most common framing of stigma reflects an assumption that those in high status positions are either unlikely to directly suffer from stigmatisation, or at least have sufficient social capital to moderate its negative effects (Wiesenfeld et al., 2008). Some scholars have gone so far as to warn about the potential of diluting the conceptual value of stigma research by making it 'a much broader concept that might be applied to lawyers, politicians, Wall Street investors, and white people' (Link & Phelan, 2001, p. 376). Whilst such views rightly warn against the problem of not acknowledging the role of power in the experience of stigma, I suggest this should not preclude exploring how those in high status positions may themselves be both perpetrators *and* targets of stigmatisation in organisational life.

Sutton et al.'s (1987) work on the stigma of bankruptcy, is a formative example of the application of Goffman's (1963/1991) stigma theory on those in high power positions. The authors observe how the stigma of bankruptcy can be deeply discrediting for those in top management positions:

> *such signs of poor leadership make it difficult for top managers to maintain "face," or to present an image that enables them to claim to the status associated with their role. Discredited leaders may feel embarrassed. They may be fired. And their careers may sustain long-term damage.' (Sutton & Callahan, 1987, p. 406, emphasis in original)*

Whilst Sutton et al.'s (1987) work focusses on the potentially stigmatising effects related to the failure of organisational performance, I am concerned with the more intimate domain of the body and the way embodiment can be a contributing factor in the stigmatisation of leaders. My research suggests that whilst those in high power positions may be prone to propagating discourses that reveal their own biases about leader embodiment, leaders themselves may also experience the stigma associated with being overweight or obese.

Goffman (1963/1991, p. 61) noted that stigmatisation occurs when individuals are identified with a condition which threatens the 'normative expectations regarding conduct and character'. From an embodiment perspective, Frank (1995, p. 31) observed that Goffman's work on stigma showed: 'that society demands a considerable level of body control from its members; loss of this control is stigmatizing, and special work is required to manage the lack of control.' I suggest that the fat body calls into question the 'conduct and character' of those in leadership positions by contravening the myths of leader embodiment that are welded to images of discipline and control (Gatrell et al., 2017). In the same way that fitness can be used by executives to suggest competence (Gregory, 2010; Riach & Cutcher, 2014), its absence (in the form of the 'flabby' leader) can be taken as evidence of a lack of competence.

In their exploration of the stigmatising impact of corporate failures on leaders, Wiesenfeld et al. (2008, pp. 240-241) adopt a stigmatisation model that includes a phenomenon called 'blanketing', in which a 'negative evaluation diffuses from a specific and isolated defect of the CEO to a generalized derogation of everything about the person'. I suggest that this is a useful conceptual tool to think about the way in which the stigma associated with being overweight or obese may become diffused and implicate a wider set of a leader's attributes, in this case, their managerial competence.

Within NetCom, the blanketing process was apparent in the way some executives intuited the existential threat posed by a fat-bodied leader to an organisation's success and survival. Variations of the dictum, *'if you can't look after yourself, how can you look after the organisation?',* demonstrated how a 'specific and isolated defect', i.e. being fat, could quickly snowball into a presumption of wider failings about a leader's competence. For example, the comments attributed to the former NetCom CEO, specifically inferred a relationship between the fatness of a competitors' management team and the company's poor organisational performance. In this case, the fat bodies of a leadership team were effectively 'blanketed' to encapsulate a 'generalized derogation' of the organisation's overall performance. For those in positions of leadership, in which any kind of failure may be interpreted as a sign of weakness (Collinson & Tourish, 2015), the fat body may simply become one more signifier of managerial ineptitude.

One of the main challenges the fat body appears to pose for leaders, is the association between bodyweight and self-management, that is, the fat body represents an un-worked-upon (or undisciplined) corporeality that is far from 'fit for purpose' (Coupland, 2015). Beatty and Kirby (2006, p. 35) observe that if a stigma is assessed as something a 'person cannot control

and is seen as innate and immutable, then the person is seen as a victim and is ascribed less culpability for their situation.' However, if the condition is attributed to personal responsibility, as is likely to be the case for the overweight or obese leader, 'the deviant condition may evoke anger and stigmatizing behavior' (Bos et al., 2013, p. 2). The precarious position occupied by the overweight leader was apparent in the discourses surrounding recruitment at NetCom, reflecting the issues faced by heavier employees more generally in the hiring process (Rudolph et al., 2009).

The importance of the body in the recruitment processes of leaders is a nascent field of research, and has only been explored by a small number of critical management scholars. In their study of executive recruitment firms, Meriläinen et al. (2015, p. 4) suggest that 'embodied characteristics are more central in executive search processes than has previously been understood', and argue that this can be at the expense of bodies that do not conform to the idealised imagery commonly associated with leadership. In her exploration of professional identity formation, Haynes (2012, p. 503) notes how professional services firms use the hiring process 'to reproduce themselves in their own image, recruiting from a relatively narrow pool of institutions', thereby rendering the possibility of embodied diversity a 'very difficult and slow' process. However, neither of these studies specifically address the potential stigmatising effects of being an overweight or obese leader.

My research suggests that, despite some protests to the contrary, the biases that inform recruitment processes were indeed in evidence in the hiring assessments made directly by some NetCom executives. This was most clearly apparent in the case of Callie and her decision not to hire an overweight candidate for an organisational leadership role. Although Callie argued that her assessment was ultimately based on the candidate lacking the requisite skills, her reflections – e.g. 'he looked like a heart attack waiting to happen' - revealed how occupying an overweight body could severely disadvantage those being recruited into leadership roles. The visibility of the candidate's fatness appeared to, at least partly, inform Callie's assumptions about his ability to manage his body in line with normative expectations and was used to draw inferences about his managerial competence – he was 'yesterday's leader'.

Neither this case, nor the provocative 'obesist' comments made by some NetCom executives, necessarily describe a pervasive culture of weight-based discrimination and that is not the conclusion proffered here. However, what these examples do suggest is the way those in high status roles can, through their role as the gatekeepers of organisational culture (Dwivedi et al., 2018), use the recruitment process to propagate stigmatising beliefs about the overweight

and obese, whilst simultaneously upholding standards of embodiment that they may also fail to uphold, leaving them open to also becoming targets of stigma.

In performance-oriented cultures where there is an emphasis on continuously proving competence and avoiding any confirmation to the contrary (Edmondson, 2003), the fat body can become a fraught corporeal identity to take up. When NetCom leaders spoke about struggles with their own weight, this was almost universally acknowledged as a failure of self-management; even when the stressors of work were cited as contributing factors, ultimate responsibility was deemed to rest with the individual. As with executives' views regarding NetCom's 'opt in' health and wellbeing policy, these rationalisations appeared to reflect broader individualistic, neoliberal discourses which dictate that a leader's weight status must be primarily viewed through the lens of personal responsibility (Goldberg, 2012). To do otherwise risks an admission that one is not in control of their body, and, for leaders this may represent a repudiation of their mandate to control the bodies of others (Ehrenreich, 2018).

As privileged, well-remunerated, well-educated individuals with access to good healthcare, organisational leaders are likely to have little recourse to claim that *systemic* factors are contributing to a struggle with their waistlines. Similarly, they are placed in a difficult position if they accept the diagnoses that lifestyle factors such as poor diet and the absence of a regular exercise regime is responsible for their fatness. To do so is to admit that they are not in control of their bodies, and that they lack the discipline and drive to engage in health-conscious practices, which are often considered an essential part of the modern leader identity (Johansson et al., 2017). Equally, to claim that one's weight is a result of the conditions of overwork and stress, is unlikely to be an avenue open to leaders who may fear having to manage perceptions about their ability to cope with the demands of their role (Zopiatis & Constanti, 2009).

Some NetCom executives did exhibit a willingness to discuss their own weight anxieties and, in doing so, they revealed how fatness could be experienced as a stigmatising condition by those in senior leadership positions. Where most extant literature on the stigma of weight in leadership has focussed on others' perceptions of the fat body (e.g. P. V. Roehling et al., 2014; P. V. Roehling et al., 2009), my research offers an insight into the first-hand experiences of such feelings of stigmatisation. NetCom leaders offered unremarkable examples of the very human challenges of weight management, including Shane's desire to slim-down prior to his health check because he knew he would be exposing himself to a room full of 'front of very fit people', and Serena's journey of self-acceptance and her busting myths that 'you can't be

overweight and fit'. These examples provided a rare insight into the embodied vulnerability of leaders who were susceptible to experiencing feelings of stigmatisation, regardless of their seniority or gender.

From a gendered perspective, it was notable that both women *and* men openly discussed personal vulnerabilities about their weight, and concerns about how their bodies might be perceived by others. Whilst in and of itself this appeared to reflect an evenly distributed level of candour, it is nonetheless important to note that traditional masculinised constructions of leadership mean that the stigma surrounding weight is likely to be highly gendered, making women generally more mindful of their 'bodily baggage' (Hope, 2011, p. 142). As critical scholars of embodiment have noted, women's bodies are already 'subjected to a controlling masculine rationality' which governs 'voice, weight and self-representation' (Haynes, 2012, p. 502). When leader identity is still so closely moulded to the masculine form it should perhaps not be surprising that there continues to be a disproportionate amount of discrimination faced by heavier female leaders (Fikkan & Rothblum, 2012). As Kirkland (2014, p. 981) suggests:

> *perceived excess weight is much more deleterious to women's careers than to men's (for educated white women in particular), and similar amounts of excess weight attract more discrimination to a woman's body than to a man's.*

The praise that Jennifer recalled receiving for her new slimmed-down, post-surgical body may partly originate in societal aesthetic norms which highly esteem slimness, particularly in women, and reinforce acceptable standards of femininity (Maguire & Mansfield, 1998). However, I suggest that such commentary needs to also be understood in the context of a leadership paradigm that prizes bodily transformations which exhibit mastery over one's physical domain (e.g. weight-loss, muscularity in men etc.), as opposed to those transformations that signal a 'out of control' body (e.g. weight gain, illness etc.). In this context, a transformation from fat to slim also represents the temporal nature of stigma, and how:

> *Unlike people who are stigmatized entirely by their category membership (e.g., race), a corporate leader may go from being admired to being stigmatized [or vice versa] in a dynamic process that unfolds over time.' (Wiesenfeld et al., 2008, p. 242)*

Jennifer's weight loss may be viewed as severing her association with a discredited group (Goffman, 1963/1991); her body was no longer a target of stigmatisation but instead

became something that was again worthy of praise, at least in eyes of others. For Jennifer, however, I suggest that what may be perceived externally as a disassociation from her discredited category, may also be interpreted as only a partial reentry into the acceptable bounds of leader embodiment. Jennifer's insistence that she was 'still the same person' and her discomfort with the praise she received for her weight loss, are suggestive of the difficulty of shedding one's former identification with a discredited group as well as her critical awareness of the unjustified attributions that are made about fat people. She was aware that the public stigma - i.e. people's social and psychological reactions to someone who is overweight or obese (Bos et al., 2013) – remained unchanged, so Jennifer's newfound status was entirely dependent on her retaining her slim body. Therefore, whilst stigma may indeed be a 'temporal process', where bodyweight is concerned, it may be one that a fat-bodied leader may feel they are never completely released from.

I suggest that what is interesting about these examples, is that by normalising the vicissitudes of the leader's flesh, they seem to offer an alternative embodiment narrative to athleticism. While earlier critiques have recognised the problematic nature of normalising athletic ideals in leadership (Johansson et al., 2017; Meriläinen et al., 2015), there has been a relative failure to explicate the lived reality of the fat-bodied leader. Perhaps, this oversight can be partly explained by the conceptual difficulty the fat body poses to the idealised construct of leadership, and the empirical challenge of locating leaders willing to claim such an identity. Articulating a fat body narrative requires a recognition of the *ordinariness* of leaders, and an admission of the lack of mastery that they too may exhibit over their bodies.

It is easier, therefore, to focus on the corporeal exceptionalism of the fit body (Neck, 2000) than the reality that leaders' bodies are like that of any other employee. However, my research suggests leaders' bodies can also become sites of stigma and struggle for acceptance, despite their position in the organisational hierarchy. Such an erosion of the prescribed boundaries of a leader's embodied identity begins to expose the vulnerability of leaders' bodies (Adamson & Johansson, 2016) such that they may be also understood as *prosaic* rather than simply heroic. But to do so risks the emergence of a spoiled identity (Goffman, 1963/1991), or more pertinently a spoiled *leader* identity, that is, the potential devaluation of a leader's social identity due to the experience of occupying a 'less than ideal body'. This a discussion to which I will turn in more detail in the following chapter.

6.3 Conclusion

In this chapter, I have suggested that NetCom leaders both affirmed the biases associated with bodyweight and leadership, and gave voice to the struggle of occupying a body perceived as fat. I have noted that whilst previous research into weight and leadership has shown that leaders are not immune to the processes of stigmatisation, this research has tended to overlook the lived experiences of leaders themselves. Drawing from Goffman's (1963/1991) work on stigma, I have suggested that fatness may be experienced as stigmatising by leaders because it contravenes the mythologies associated with the leadership body, especially the assumptions of masculinity and bodily control. I therefore argue that the stigmatisation propagated *and* experienced by NetCom leaders was based in a mismatch between normative expectations of leader corporeality and the biases regarding the overweight in society. The fat body then offers an interesting counterpoint to the fit body; where the latter can be viewed as upholding the norms of personal responsibility and individual control, while the former depicts a socially embedded and ordinary prescription of the leaders' body. In the next chapter, I will discuss the ordinariness of the leaders' body in more detail as I explore the potentially stigmatising (and redeeming) experience of illness in leadership.

Chapter 7: Leadership and the Sick Body

The focus of this chapter is on the narratives of serious illness that emerged from the interviews with NetCom executives. The conceptual category of the 'sick body' is used here to denote a body that, through the experience of illness, disrupts the images of strength, control and self-management that are inscribed into the bodies of leaders. Firstly, this chapter will explore what appeared to be deeply ingrained perceptions that NetCom executives held regarding the expression of illness within senior leadership, namely its association with weakness and the existential threat it seemed to pose to organisations. I discuss the strategies and acts of illness concealment that executives enacted, and through the case study of Abigail, I explore how these may be considered ways to avoid being targeted with a stigmatised leader identity. Secondly, I explore how NetCom executives perceived and experienced the process of renegotiating a sick-bodied identity in the workplace. In particular, I discuss how for some individuals, illness appeared to alter their habitual ways of embodying leadership, while for others there was a return to 'business as usual', and a rejection of the transformative potential of illness. Through the case study of Cynthia, I explore the willingness of some leaders to publicly disclose their heath challenges and to openly engage with their embodied vulnerability in the workplace.

7.1 Illness: An Expression of Weakness

As NetCom executives spoke about their personal experiences of illness and their perceptions of the challenges of navigating illness in the workplace, it became apparent that there was a frequent association made between illness *and* weakness. For example, in responding to a question regarding her observations about perceptions of illness in leadership, one executive commented: 'I think you do see it [illness] initially as a weakness… which is awful to say, isn't it? ...You do go there. I went there' (Mary-Louise, Lower-level Executive, Operations). Whilst, Mary-Louise exhibits some sense that it might not be publicly acceptable to say so, she nonetheless affirms that there is an 'initial' response that conflates a leader's illness with weakness. She seemed to attribute this, in part, to her assessment that illness could stoke fears about an individual's ability to lead the organisation, thereby representing some kind of existential threat to the organisation's survival:

If you see someone who looks unwell at the top, you would be concerned about whether the organisation is going in the right place or the right direction because maybe that leader isn't the right person. (Mary-Louise, Lower-level Executive, Operations)

Mary-Louise's comments are instructive insofar as they identify how the very appearance of illness can be undermining for a leader, even alluding to how corporeal symbols of ill health may compromise perceptions of a leader's competency. According to this assessment, an executive does not necessarily have to *be* unwell but just *look* unwell to destabilise organisational confidence in their ability to be the 'right person' for the job or to take the organisation in the 'right direction'. She added that even the act of observing visible signs of distress in leaders, let alone illness, could cause organisational panic to set in: 'If you can visibly see [the senior leadership team] looking stressed, you start to panic. The organisation starts to panic.' The potential for ill (or even visibly stressed) leaders to induce organisational panic was a claim also made by Neil, who, in response to a question about challenges of navigating illness in senior leadership, noted:

People look up to leaders and they want to have confidence in them in what they stand for and that they're going to be there… if little cracks start to appear in that, then if leaders lose their people's confidence, that's a big deal… It creates this lack of cohesion and almost eventual anarchy if it's not managed I suppose. (Neil, Mid-level Executive, Marketing)

Neil's comments seem to reflect a perceived fragility in the leader-follower relationship which can easily be ruptured when 'little cracks start to appear' or they suspect 'something is going on' (in this case illness), which can turn into 'almost anarchy' if not well-managed. Jacob too suggests that seeing your leader incapacitated can leave people feeling 'lost at sea':

I think there is the potential for individuals to try and hide issues to a greater extent, again in order to keep up the image. It's not quite Hilary Clinton and Donald Trump but you know what I'm saying, it's like there's that sort of - you don't want the commander-in-chief to be incapacitated and we're all lost at sea as a result of them not being there. (Jacob, Mid-level Executive, Marketing)

It is interesting that Jacob invokes the imagery of a 'commander-in-chief' because taken together, these comments reflect an individualistic view of leadership, where all power and organisational success is vested in a single (and likely male) heroic leader. There appears to be

an assumption that an organisation will fall apart or descend into ‘panic’ or ‘anarchy’ if that one leader becomes unwell, or even if a leader begins to look ‘stressed’. These views offer some insight into why executives who developed a serious illness became so concerned with being tarnished with a stigmatised identity that it prompted them to ‘try and hide issues… in order to keep up the image.’

Having to negotiate the stigma of being identified as ‘weak’ seemed to be a common experience for many NetCom leaders who had had a direct experience of a serious illness. This was the case for Warren, an executive who managed a chronic asthma condition rendered visible at times due to his obvious breathlessness. When Warren arrived for the interview he was breathing heavily, which precipitated a frank conversation about his condition and the strategies he employed to disguise his illness:

> *I've got chronic asthma and sometimes it gets me into positions where I'm breathless… rather than walking into a meeting huffing and puffing you almost have to go, ‘I'll be late but I'll walk in confident, not out of breath’. That's a perception I have to constantly [manage] - rather than going in late to the meeting and then everyone says, what have you got to talk about, I'm like I can't breathe... I'd rather be a few minutes late and walk in not huffed and puffed than walk in on time than have that perception of Warren, he's not coping. (Warren, Mid-Level Executive, Finance)*

Warren’s approach to dealing with illness in the workplace appeared to be very much concerned with employing impression management techniques to reduce the visibility of his condition. Walking into a meeting ‘huffing and puffing’ not only undermined his own confidence but, according to Warren, the perception others may have of his competence – ‘he’s not coping’. When asked why he thought he engaged in these practices of concealment, he responded:

> *Well it's I suppose a sign of weakness and you have to always - there's pressure to remain always very confident. You should know what you're talking about. You should be confident in your presentation. Don't show weakness, show strength… it's a theme at NetCom. If you show a sign of weakness well then that means you're not good at your job because you're weak. Execs should be strong and forthright. Just because you walk into a meeting out of breath doesn't mean you're not confident or you don't know what you're doing but there's a perception.*

For Warren, then, masking the visible symptoms of his chronic asthma appeared to at least partly be about the preservation of an acceptable leadership identity, one that he perceived to be in keeping with the 'theme at NetCom'. Executives should be 'confident', only 'show strength', be 'strong and forthright' and not 'show weakness'. Warren's observation that any visible sign of weakness could be seen as 'not being good at your job', was also in keeping with observations from other executives that an individual's health was intimately bound up with perceptions of their competence. Warren strongly refuted this relationship, arguing that simply because one can be out of breath does not mean 'you're not confident or don't know what you're doing'. However, he appeared resigned to the fact that 'there's a perception' that needed to be managed. Further, he seemed to attribute his engagement with practices to conceal his chronic asthma as a direct response to his belief that NetCom was an organisation intolerant of illness. For Warren then, the visible signs of corporeal fragility represented overstepping the acceptable bounds of a leader's demonstrable vulnerability.

Jennifer, who had herself struggled with mental and physical health issues, agreed that as a leader; 'You cannot show a moment of weakness'. She added that, 'the only moment that is created [to show you need help] is when you actually are at that collapse point, because it's self-evident that there's no out' (Jennifer, Mid-level Executive, Finance). According to Jennifer, then, leaders must maintain an aura of imperviousness at all times; it is only when they reach 'that collapse point' and 'there's no out' that it becomes permissible to admit one's weakness, because by then it has become 'self-evident' that they are not coping. This was consistent with what one executive described as the 'Buzz Lightyear' view of NetCom's view of leadership in which any expression of vulnerability was considered circumspect.

For George, a senior NetCom executive, it was the relationship he had with his supervisor that appeared to be a key factor in how he interpreted the permissibility of illness disclosure in the workplace. Following a routine health assessment, George was rushed to hospital for emergency heart surgery; he was soon discharged but rather than take extended leave to recover, he returned to the office almost immediately. Reflecting on why he chose to return to work so soon, he commented that he felt a pressure 'to get back at full throttle' very quickly. When asked why this was the case, he explained:

> *... my boss is a workaholic, he would've just seen what happened as a sign of weakness - get back on the horse, get going again. Can't afford to have a man down, so that would've been his attitude... (George, Senior executive, Sales and Marketing)*

George appears to attribute his decision to go back to work quickly to his 'workaholic' supervisor's 'can't afford to have a man down' attitude. He suggested that his boss would have been largely unsympathetic to his serious health event and was likely to have viewed what happened to him as a 'sign of weakness'. George's interpretation of this event is interesting because it suggests that even for those in very senior organisational roles (both George and his supervisor were part of the top management team), the supervisory relationship can play an important role when it comes to modelling behaviour regarding illness disclosure in the workplace. Holding the view that one's supervisor would view you as 'weak' and want you 'back on the horse' immediately, is unlikely to be conducive to full and open disclosure or viewing help-seeking as an acceptable behaviour.

Whilst the power and influence a leader wields may be experienced positively in times of good health, it appeared that it might also intensify their feelings of exposure during periods of serious illness. When Sean was asked what he might do if he found himself in a situation where he became unwell he suggested that that he would be 'disguising it as much as you can'. Anthony, however, presented a more nuanced view of the complexity of disclosing illness to superiors. Firstly, he acknowledged that speaking with his supervisor about his heart condition was difficult for him to do because of the feelings of weakness such a disclosure precipitates:

> *Even I know sitting down in front of my leader and telling him I had a heart issue which is going to threaten my role in some way is hard for me to do because it feels like a weakness. (Anthony, Mid-level Executive, ICT Infrastructure)*

The reticence expressed by Anthony suggests that to confide in his supervisor means not only acknowledging a personal 'weakness', but also facing the prospect that the condition may 'threaten his role in some way', that is, call into question his ability to remain in a leadership position. However, rather than blame his supervisor, he suggested that this was something for which leaders themselves must take responsibility:

> *I think the first people we have to question in all these scenarios are the individuals themselves, the execs themselves. Do you call out when something is wrong and you need help? I would say I have not had an issue with support from the business when I've needed it. Am I open and honest enough about my health challenges and what I need from the business? Probably not but I think that comes with the territory. (Anthony, Mid-level Executive, ICT Infrastructure)*

Anthony appeared adamant that it was the individual who was failing to 'call out when something is wrong'. He noted that he 'has not had an issue with support from the business', instead it was his own reluctance to be 'honest enough about my health challenges' that was at issue. This, he suggests, 'comes with the territory' of being an executive which appears to support the contention that it is the internalisation of particular leadership ideals which disinclines people in high status positions from admitting their 'weaknesses'.

Jason, a non-executive director and former CEO of NetCom, concurred that it was not the organisation that was at fault, and suggested that one of primary factors that influenced a senior leader's approach toward illness disclosure was the fear of negative career impacts: 'People are sometimes concerned that it could in any way impact their ability to be promoted and advanced.' Whilst Jason seemed to recognise that the demonstrable expression of illness might be interpreted by some executives as a potentially career limiting move, he ultimately dismissed these concerns as not reflecting the reality at NetCom:

> *How much of that is subjective in the individual's own projection, as opposed to how the organisation responds? … But I could imagine that individuals themselves, in a competitive world, might be reluctant [to disclose] because they may perceive themselves that somehow or other they're handicapping their progress. (Jason, Non-executive Director)*

Jason's view that there is a perception that the competitive culture at NetCom may mean that people feel that they are 'handicapping their progress' is consistent with the concerns expressed by some executives. However, by claiming that this is purely an 'individual's own projection' rather than reflecting on how 'the organisation responds', he appears to be placing the onus squarely on the individual executive's shoulders for the existence of this perception. Moreover, in his keenness to absolve the organisational culture of any responsibility, he seems to be divorcing individual subjectivity from broader societal expectations placed on leaders. As Shauna commented, the challenges illness poses to executives extends well beyond NetCom, and disrupts the fundamental underpinnings of leader identity:

> *I think it's a problem that we have in society, that if you show that you are unable to cope then therefore you're showing signs of weakness, if you show signs of weakness as a leader then why are you a leader? … that's why I said it's not necessarily a [NetCom] challenge, I think it's a business challenge. (Shauna, Lower-level Executive, Sales)*

Shauna's comments suggest that the association between illness and weakness in leadership goes beyond NetCom's culture and reflects a deeply ingrained societal intolerance for illness in leadership. Part of the 'business challenge' posed by illness appears to be that by associating illness with weakness, a 'spoiled' identity is created for any leader who becomes unwell. If showing 'signs of weakness' challenges the foundation of leadership as Shauna suggests – 'then why are you a leader?' The manifestation of a sickness, then, may be seen as undermining leadership ideals that are still wedded to notions of heroic individualism and generally abhor displays of embodied vulnerability.

7.1.1 Case Study IV: Abigail – 'I'd actually cover it up!'

Abigail was a mid-level executive that has worked for NetCom for over fifteen years; she worked in a fast-paced and stressful sales environment and her role required significant national travel. Despite the challenges of her position she had a strong affection for NetCom and her work which she described as 'not always just a job, it's a great place to be'. However, she was also pragmatic about the precariousness of executive life and noted that senior roles were 'hard to hold down for a long period of time' because 'there's always a zillion people just waiting to step into your role if you're not there'. She was keen to point out that she was 'not for one moment worried about' her own job security, rather she was noting that this kind of environment, 'would inhibit people discussing things' such as illness:

> *No one needs to feel too precious or special in a corporate company because you're not, and you're not irreplaceable either. So, I'm fairly pragmatic like that but I could understand why people don't [discuss health issues].' (Abigail, Mid-level Executive, Client Relations)*

Abigail suggested that executives should not 'feel too precious or special' because they are not 'irreplaceable', which she conceded may indeed influence peoples' decision to be opaque about their health circumstances. She offered that it was much easier to stick to health-positive narratives concerned with 'promoting your image' rather than openly discussing the challenges one might face:

> *People don't discuss health here really at all. I mean you hear them all patting each other on the back because they got into work five minutes earlier on their bike path than they normally have or things like that… But it's more of a promoting your image type environment... there's*

very few conversations… where you'd start telling people about the fact that you were facing any challenges or your health wasn't very good.

Abigail's experience of NetCom, which may have been influenced by the hyper-competitive sales environment in which she worked, gave the impression that people were much more likely to engage in talk about their physical prowess rather than their health vulnerabilities. She seemed to suggest that this tendency towards the promotion of one's athletic abilities was bound up in professional identity management practices of being a senior leader:

… our brand and image is, you know, it's not just celebrities I don't think. It's like when you're working in a large corporation the pressure in terms of how you're perceived or how you need to be perceived is there, absolutely it is.

Abigail's comments about the pressure of managing one's external image 'in a corporation' are perhaps not surprising in an era when individuals are encouraged to think about themselves as being a personal 'brand'. Her reflections illustrate the importance that executives may place on the appearance of the 'healthy body' as part of their brand and therefore, why illness can be experienced as a threat to their leader identity. Abigail noted a senior leader may feel the need to disguise (or minimise) their impairments so as to not be seen as 'replaceable': 'I've certainly known circumstances where people have kept things like that [illness] hidden so as not to be seen as replaceable'.

During the interview, Abigail revealed how she had a 'hip issue at the moment' which was likely to require surgery. The resulting discomfort she experienced was a cause for some consternation because 'it holds me back a little bit at the moment and I find that a bit mentally frustrating'. She had been putting off the surgery both because of family commitments but also because she didn't 'want to make that big thing where I'm going to be laid up for six weeks in hospital'. Understandably, there was a reluctance to take an extended absence from work and 'make that big thing', which might mean possibly having to be open about the reason for her absence. Delaying the surgery meant Abigail needed to negotiate a workplace accommodation following a preliminary arthroscopic procedure she'd had done. This entailed placing a request with HR for access to a car parking space in order to make her journey to and from work easier. Here, Abigail speaks about her reluctance to make this request:

I had to get car parking downstairs so I could get to work and get up and down and do you know, I felt really uncomfortable asking for that…. I didn't feel completely comfortable with it, does that make sense?

Abigail's reflection on her reluctance to ask for a car parking space appeared to be intimately bound up with the idea that, in a competitive corporate culture, actively exposing some kind of physical impairment (in however seemingly minor a fashion), would be a public admission of her embodied vulnerability. She later noted that she 'was very [self]conscious too because I was walking really badly', and the display of her physical impairment would attract the attention of her colleagues, a scenario she preferred to avoid. During the course of the interview, Abigail became more open about how she was engaging in particular behaviours to conceal the symptoms of her impairment. She noted how she was actively minimising the pain she was experiencing in the workplace:

I was so conscious of it, I used to stand there and just pretend I was standing up and thinking about something just so I could walk off without, you know, and bear the pain of walking normally until I was out of sight. So I'm sure there's CCTV footage of me walking out into the lift well going 'oh god'. I could hardly walk. You've made me think about that because that's the truth, I'd actually cover it up. So, there you go.

The lengths to which she would go to disguise her impairment appeared to be somewhat of a revelation to Abigail during the course of the interview. As she uttered the sentence 'You've made me think about that…', it seemed that she was genuinely unaware of the extent of her concealing behaviours, which included: standing up and pretending to be thinking about something in order to alleviate the pain in her hip, forcing herself to walk normally until she was out sight, and seeking relief in the privacy of lift well where she could allow herself to experience her pain without the fear of being observed. Abigail's views about the expendability of executives and the importance this places on a leader's identity management, suggests that masking any visible signs of her physical impairment was a strategy, albeit a sometimes unconscious one, to circumvent any external perceptions of vulnerability. Her reference to there likely being CCTV footage of her engaging in these practices, may also be interpreted as an indication of the degree to which Abigail felt she needed to disguise her 'less than ideal' body from her colleagues' gaze.

7.1.2 Discussion

The reality that leaders experience illness should not be surprising, after all, as Davidson et al. (2006, p. 94) suggests, 'The pressures and responsibilities of a senior executive combined with the age of most senior executives can lead to serious illness.' However, even though many NetCom executives had either experienced illness themselves or been touched by it in some way, my research suggests that for many leaders, the emergence of a sick body was still commonly associated with weakness. This association seemed to be embedded in a logic that deemed the expression of embodied vulnerability as unacceptable, or at least highly fraught, because it appeared to undermine a construction of leader identity tightly welded to invulnerability. This presented challenges for those leaders that experienced illness directly, making some NetCom executives 'reluctant to reveal any feelings that might be perceived as a sign of weakness or incompetence' (Bunker, 1997, p. 129).

Although post-heroic leadership research has often trumpeted the value of leaders expressing their vulnerabilities (Avolio et al., 2004), to date this literature has disregarded those vulnerabilities associated with illness in the workplace. Kerfoot (2000) states that for those in leadership positions, the '[e]xperience of stress, of weakness and of failure must at all times be hidden' or it must be 'passed off as something *other* than the lived experience of discomfort and discontinuity with their organizational surroundings and its demands' (p.241, emphasis added). For many NetCom executives, revealing a sick body in the workplace was viewed as a potentially stigmatising act that they believed could negatively affect perceptions of competence and impact career prospects. This may be considered a somewhat surprising finding in a culture such as NetCom's which was often referred to as a 'caring' organisation. However, I suggest that this illustrates the heightened risks experienced by leaders who felt that disclosing an illness may lead to them becoming the target of a 'spoiled' leader identity (Goffman, 1963/1991).

Of course, there are many factors that may influence a leader's propensity to disclose their illnesses at work, including: the nature of an illness itself, its severity and visibility, individual temperament, the supervisory relationship, organisational culture etc. (Charmaz, 2010). However, I suggest that it is the inherent incongruity of a sick body in a masculinised, individualistic model of leadership which ultimately means that 'person with higher status, such as a leader, who has greater social power relative to others is less likely to express suffering' (Dutton et al., 2014, p. 289). The sick body represents a diminution of leader agency which is central to leadership identity (Alvesson & Kärreman, 2016), and exists in opposition to

contemporary health discourses which rely on the assuredness of the self-managed body (Lupton, 2012, 2013b).

I suggest that the claim made by Jason, a non-executive director at NetCom, which dismissed executives' concerns about illness disclosure is problematic for two reasons. Firstly, it disregards the reality that stigma may be 'felt in the absence of any direct discrimination' (M. King et al., 2007, p. 253). So, for example, it may well have been the case that George misinterpreted his supervisor's likely response to a request to take more time off to recover from his surgery. But this alternate reality is immaterial to George's actual experience of feeling stigmatised, which is at least partly informed by the leadership culture in which he is immersed. Secondly, and perhaps more importantly, Jason's view does not fully appreciate that stigma is a socially embedded construct 'woven into the fabric of social interaction' (Bos et al., 2013, p. 7). Consequently, the feelings of stigma that George's experience elicited are more than his 'personal projection' but are rooted in deeply ingrained societal beliefs that continue to define leadership as incompatible with displays of weakness.

Navigating illness in the workplace necessarily requires the enactment of help-seeking behaviours that may conflict with leaders' beliefs about the legitimate demands they can make upon their organisation (Rosette et al., 2015). Whilst, in general Netcom executives appeared to sanction help-seeking for those in lower level positions, there seemed to be an implicit understanding that the role of 'leader' was imbued with an indelible set of self-management expectations (see Chapter 4.3). Therefore, openly declaring the 'need' for organisational support due to illness could be experienced as a betrayal of the doctrine of personal responsibility (Leichter, 2003), demonstrating an inability to cope with the inherent demands of leadership.

Charmaz (2010, p. 14) notes that it is uncertain whether high status workers are less inclined to disclose their illness in the workplace than their lower level colleagues, but she explains that because of their status, 'higher-level employees may guard against any potential disruption or diminishment and avoid disclosure'. She offers the following example of an executive's concealing behaviours to indicate the way some executives may seek to avoid becoming a target of a 'spoiled' identity because of their chronic illness:

> *I interviewed an executive who disclosed his condition to no one but scheduled his workday to accommodate it. He believed that if he disclosed his illness at all the news would soon spread throughout his extensive business network and weaken his reputation and effectiveness. (Charmaz, 2010)*

Charmaz's example recalls Abigail's comment that executives are not 'irreplaceable', so are highly sensitive to reputational issues that may affect their personal 'brand'. In their theoretical exploration of concealable stigmas in the workplace, Jones and King (2014) offer a counter view to that of Charmaz (2010). Drawing from power-dependency theory (Emerson, 1962), the authors argue that because those in high status positions 'possess more power', have 'greater control of resources' and more people depending on them, they are less likely to conceal their stigmas than their lower level colleagues. They surmise that: 'as organizational level increases (i.e., as power increases), revealing increases and concealing and signaling [testing the waters of disclosure] decrease' (p. 1486). The assumption here appears to be that those in high status positions are less likely to avoid disclosure, and therefore would view stigma as less problematic, precisely because of the power and authority they wield.

My research, at least in part, challenges the hypothesis of Jones et al. (2014) and concurs with the findings of Charmaz (2010) that those in leadership positions can indeed still hold fears of stigmatisation, making them reluctant to disclose illnesses in the workplace. As high value organisational members for whom reputation management is a primary concern (Hall et al., 2004), they arguably have further to fall. As Wiesenfeld et al. (2008, p. 242) suggest, '[w]hen elites' identities are spoiled, the resources and compensation they can command subsequently are diminished.' I suggest that it is precisely because *status loss* plays such a central role in the formation of a stigmatised identity (Goffman, 1963/1991), that those in senior leadership positions may seek to protect their organisational standing by concealing or minimising the visibility of their illnesses. Rather than having protective effects, then, I argue that the comments made by NetCom executives suggest that a leader's high status and organisational visibility, may lead executives to believe their sick bodies make them more vulnerable to being tarnished by a spoiled identity.

Major and O'Brien (2005, p. 395) state that, 'people who are stigmatized have (or are believed to have) an attribute that marks them as different and leads them to be devalued in the eyes of others.' I contend that it is the threat of a devalued leader identity that caused some leaders to engage in concealing behaviours to minimise the visibility of their illnesses; this process 'gives leaders time to regain their composure and develop more sophisticated defining, denying, and accepting strategies' (Sutton & Callahan, 1987, p. 432). It is because the sick body represents a discrepancy between a leader's normative social identity (the norms of leadership embodiment widely shared in a society) and their actual social identity (the *actual* body

inhabited by a leader) (Goffman, 1963/1991, pp. 2-3), that leaders who become unwell were inclined to adopt strategies that minimised the conspicuousness of their illnesses.

Some NetCom executives adopted 'passing' strategies (Clair et al., 2005) that were clearly designed to dilute the discrediting impact of their sick body. Passing may involve individuals managing their appearance at work, downplaying their illness, or trying to hide their symptoms in the workplace (McGonagle & Hamblin, 2014, p. 431). Passing - as reflected by Abigail's attempt to disguise her hip pain and Warren's strategy to hide his chronic asthma – were deliberate acts of concealment that enabled NetCom executives to pass as 'normal' and therefore avoid being associated with a 'spoiled' leader identity. Whilst illness may evoke sympathy from others, it also leaves sick-bodied leaders vulnerable to projections of weakness and incompetence (Ghin, "in press"), so passing strategies may be considered as a useful mechanism to avoid 'disdain for the bodies of leaders that do not look and act right' (Johansson et al., 2017, p. 10).

Extant research has noted the reluctance of leaders to expose general vulnerabilities that might undermine their image of strength and power (Morrill, 1995), however, there has been very little exploration of how the manifestation of a sick body challenges the assumptions embedded directly into the construct of leadership. Even in the rare instances when leader experiences of illness have been the subject of critical scholarly inquiry (e.g. Michel, 2011), there has been scant reflection on the relevance of this phenomenon to leadership theory. I contend that the experience of the sick body needs to be understood within the broader discourse of leadership studies, in which leadership itself continues to be a highly individualistic and masculinised construct. Meindl and Becker (2004, p. 464) have famously argued that the stubborn persistence of romantic fantasies about leadership can be attributed to the need to relieve existential anxiety of organisational members:

> *The faithful belief in leadership is itself beneficial in providing a sense of comfort and security, in reducing feelings of uncertainty, and in providing a sense of human agency and control.*

My research suggests that perceptions of a leader's competence can be undermined when sickness is rendered visible to others, threatening the 'faithful belief in leadership'. Illness can undermine the perceptions of leader 'agency and control' and, as some executives noted, it can create 'organisational panic' amongst those who believe their success - and survival (Freud, 1922, p. 15) - to be intimately tied to that of their leaders. As one NetCom executive noted, this panic could be triggered even when relatively innocuous signals of distress became

visible, an admission which provides some insight into the sensitivity of leaders to the bodily cues they were projecting to their peers. As Yates et al. (2018, p. 100) argue in their study of female police officers, simply being identified as *stressed* could incur 'significant professional repercussions' which undermined perceptions of professional competency and designated stress 'as something to be locked inside, even when they were aware of bodily signals.' Therefore, the 'broken professional body marks a double failure, namely of not being able to display and enact neither autonomy *nor* ambition' (Costas et al., 2016, p. 18, emphasis in original).

I argue that the association that NetCom executives commonly drew between illness and weakness, exposes a dissonance which makes the sick body an often intolerable prospect for leaders. For those in leadership positions, illness may represent 'a moral failure which clashes with business values such as constant activity, speed, ability to keep a schedule, and expectation of good health' (Beatty & Kirby, 2006, p. 37). The conceptualisation of the sick body as it is presented here, is situated within an economic context that assumes the enduring productive capacities of business leaders, who, as the epitome of neoliberal success, should never tire (Cannon, 2011), demonstrate vulnerability (Fletcher, 1994), or become sick (Michel, 2011). Moreover, the sick body is located within a social context, which places the individual leader's experience of illness within a health environment that offers up endless body possibilities and expectations of body mastery (Sinclair, 2005b). Weakness in this context is made manifest by the emergence of illness, which represents a failure on the part of leaders to demonstrate control over their own corporeality, thereby undermining their legitimacy to lead others (Ghin, "in press").

Finally, I suggest also that the sick body poses a greater existential threat to the embodied idealism of leadership than its fat-bodied counterpart. This is because while the fat body can be rationalised as an individual's failure of self-management or indicative of a leader's low moral fibre (Puhl & Heuer, 2009), the sick body exposes a starker reality - that control of over one's health is ultimately beyond the reach of even the most disciplined leader. As Ehrenreich (2018, p. 161) observes, 'You may be a slim, toned paragon of wellness, and still a macrophage within your body may decide to throw its lot in with an incipient tumor.' Therefore, I argue that the existence of the sick body not only challenges individualistic, masculine characterisations of leadership but also the promises of body mastery that are endemic to the discourses of contemporary health management (Johansson et al., 2017; Kerfoot, 2000).

7.2 Negotiating the Sick Body at Work

One of the themes that emerged in the research was the extent to which the experience of illness could alter a leader's relationship to work, and their behaviour in the workplace. As Reggie's comments below suggest, becoming unwell could catalyse a change of perspective in executives, causing them to weigh the value of their 'work pursuits' against the importance of their general health and wellbeing. One response illness may evoke is to broaden a leader's perspective about what is truly important to them, and to consider life beyond the 'corporate dream':

> *So, at some point in time logic has got to click in there and say, well, I can either continue what I'm doing with my work pursuits or I can look after my health. Which one am I going to choose?... life is worth a bit more than just contributing to the corporate dream I think. (Reggie, Lower-level Executive, Operations)*

Another executive noted how illness afforded leaders time away from the business and an opportunity to rethink their priorities, sometimes with very profound consequences. Reflecting upon her former managing director's return to work following her treatment for cancer, Mary-Louise offered the following insight:

> *She was off work for six months. She came back and had a completely different approach. Life is way too short… she was seven days a week, all day, every day. That's all she did. She actually got married, ended up having a child. Her life completely changed. She was still an MD… but she just had a very different take on how she managed stuff. She wasn't consumed by the job. She found other things that, I think, give her a better outlet… I actually think she is in a far better position and a happier place for that experience, as hard as it would have been for her. (Mary-Louise, Lower-level Executive, Operations)*

Mary-Louise's observation of her post-illness boss was that she was a deeply changed person when she re-entered the workforce. With her cancer in remission, and also now being married with children, she had a 'completely different approach', and was no longer 'consumed by the job'. It seemed significant to Mary-Louise that despite her former boss's health issues, she 'was still an MD'; her illness did not force her to relinquish her executive position, but it did apparently act as a catalyst to rethink what was important to her. In her final analysis, Mary-Louise suggests that, however difficult this period may have been for her boss, the illness experience was a transformational one and she is in a 'far better position and a happier place

for the experience'. It is interesting to note that Mary-Louise, who had earlier equated illness with weakness, was here championing its transformative potential which suggests that leader perceptions of illness can be seemingly ambiguous and contradictory.

Warren, who managed a chronic illness and had always had 'lots of health problems' in his life, offers a slightly less epiphanic assessment of how illness had changed him as a leader. He noted that his health concerns left him with no choice but to place his wellbeing 'a little bit higher up the priority list' than some other NetCom executives who are 'more naturally healthy'. Reflecting on how having to manage health issues his whole life has affected his relationship with work over time, he commented:

> *I think it's influenced my… ambition. When I was a bit younger I was very ambitious. I was always looking for the next promotion and worked really, really hard. Work was very important to me and progression was very important. If I didn't get promoted every two years, it was time to look for another job. Then probably five or six years ago I went, why am I doing this? It's not really good for my health. (Warren, Mid-level Executive, Finance)*

Warren appears to interpret his chronic illness as a catalyst for him rethinking his ambition and the climb up the corporate ladder. He stated that whilst in his youth he placed a high value on promotion and progression, in more recent years his health has given him pause for thought; 'why am I doing this? It's not good for my health?' This, he goes on to rationalise, made him alter his perspective toward work and career. Instead of continuously seeking career progression, Warren indicated that he had come to the realisation that he did not need constant 'promotion and more work' to be content:

> *I said, well okay, let me more look at what I can learn and keep myself motivated by learning things rather than necessarily just promotion and more work. That probably made me change my focus a bit. Now people get promoted and say, you should apply for that job. It's a bigger job. I go well, yeah, but I'm learning lots in what I'm doing. I don't need a bigger job. (Warren, Mid-level Executive, Finance)*

Warren appears to be aware that his decision to renegotiate his career aspirations may run counter to the norms of corporate culture, which generally places a premium on fostering competitive behaviours that ensure individuals strive toward continual career advancement. He suggests that his health has changed his focus, which inclines him to rebuff his colleagues' suggestions to 'apply for that job' because 'it's a bigger job', preferring instead to find

contentment in his existing role where he is still ‘learning lots’. By embracing the limitations of his body, Warren seems to have at least partially reframed his relationship to work, particularly how he derives meaning from his work.

In a similar fashion to Warren, George also discussed his serious cardiac event as having had a significant influence on the way he thinks about work. Whilst George had always had a high health consciousness due to his awareness of a hereditary heart condition, he attributed his hospitalisation and subsequent surgery as the ‘wakeup call’ that precipitated a change in his health priorities. Part of this reeducation was to focus on ‘the things that are important’, that is, the things he viewed as being critical to enabling him to stay healthy and do his work as an executive:

> *They're the things that are important to me now - eat well, get a good night's sleep, be able to do a full-on job like I've got without feeling tired and stressed, getting that balance. That was a wakeup call for me, they're the adjustments I guess I've made, and it's worked. (George, Senior executive, Sales and Marketing)*

George had long since instituted a regular exercise regime, having ‘only recently given up competitive sports’ in his early sixties. He also noted that he already had in place strong work/non-work boundaries: ‘my boss knows, and people at work know, that they shouldn't be contacting me on the weekend unless it's an extreme emergency, because I do tend to switch off on the weekends.’ For George then, the underlying ‘wakeup call’ seems to be only partly about understanding the importance of instituting good health and wellbeing practices - this is something he had already inscribed into his habitual body - and more about the idea that such practices to do not necessarily shield you from becoming ill. Or put differently, you cannot necessarily trust the way your body feels as indicating your actual health status:

> *To think that you’re sitting there thinking everything’s working okay, I feel good, I don’t feel like there’s a problem. But there can be a problem. (George, Senior executive, Sales and Marketing)*

This seemed to be an unsettling realisation for a person who described himself in stereotypical leader-like fashion as someone who likes ‘to think I'm in control of my life, nobody else’. It is the acknowledgement he was ‘standing on the edge of the cliff without realising it’ that appeared to be life-changing revelation for George. He noted that his decision

to open up about his experiences was a direct result of this realisation; 'I think educating a few people is a consequence of that.' George's initial approach to talking about his experience of illness was to not 'make a big deal about what happened', so very few people knew about what had occurred. His experience, however, made him be more open about his own health, and view himself as having a role in educating others about the prevalence of cardiac issues.

Whilst it may be tempting to interpret these leader experiences of illness through a redemptive lens, the stories of executives' responses to inhabiting a sick body were far more complex than such a simple narrative would dictate. For instance, Tristan, a senior executive who witnessed a former CEO deal with a serious illness, is dubious about the capacity of leaders to sustain behavioural changes following a major health event:

> *The alertness wears off with time... The next two or three months, people [are] all very conscious about health and everything, but after a few months… then they go back to their old ways. (Tristan, Senior Executive, ICT Infrastructure)*

Tristan seems to imply that it is human nature for alertness to 'wear off with time' and consequently that it is not long before leaders resort to their habitual behaviours. Even George, who returned to work promptly after his heart surgery noted that while there was a brief reprieve from the pace of executive life, it was short-lived:

> *Look I did have to take it a little bit easier for a while [when] I was in recovery, but now I'd say I'm working harder than ever. I think that's why you've got to look after yourself, because the world hasn't got any easier. (George, Senior executive, Sales and Marketing)*

George's observation that he was now 'working harder than ever', suggests that executives may struggle as they strive to reconcile their sick (or recovering) bodies with the relentless demands of senior leadership. Rather than pare back his responsibilities, George's response to coping with the pressure of re-entering the workforce appears to have been to double-down on his investment in self-care because the 'world hasn't got any easier'.

For other executives, a serious illness may not engender any kind of renegotiation with their habitual behaviours at all. Alyssa, who had taken extended leave from work following a serious gynaecological procedure, was adamant that her experience of illness had not changed either her relationship with work or the way she thought about her health and wellbeing: 'No, I think to be honest the only thing that I... give great priority to is my family… My health? To be

honest, no' (Alyssa, Lower-level Executive, Legal Services). In fact, even prior to her surgery Alyssa made a point of ignoring her health; and during the interview she was sheepish about her decision to disregard what 'felt like an orange' crunching in her side 'because there was no good time to go and see someone' about it.

Fabian, a senior executive who was diagnosed and successfully treated for prostate cancer, also indicated that his own illness did not trigger any major adjustments in his life. He suggested that any change had been marginal - 'A little, not radically'. His observation was that it was likely to be particularly difficult for people in senior positions to significantly alter their perspectives on work following a serious illness. In fact, he suggested that a major renegotiation was only likely to occur when illness affected lower level employees:

> *The interesting thing about it though is the higher you are up [the more senior you are], the more altruistic… and the more reflective the comments are made immediately after the event [of illness]. You do notice after several months that people recede back to their old ways, whereas if they're a bit lower down the food chain it can have a more lasting impact I think, certainly my observation. (Fabian, Senior Executive, Corporate Services)*

Fabian's comment suggests that it is in the immediate aftermath of a health crisis, that senior leaders are more likely to make 'altruistic' and 'reflective' statements', however, these would not necessarily lead to significant or lasting change because 'people recede back to their old ways' after a few months. His contention that a more 'lasting impact' was likely to be found in lower level employees, seemed to infer that there was something unique to the role of senior executives that precluded this change from sticking. Implicit in Fabian's observation appears to be the idea that the pressures and expectations of executive life, and perhaps the mindset of the executives who occupy these roles, present significant barriers to any enduring renegotiation of leadership behaviours. As Tristan pointed out, the nature of business itself is unlikely to change just because a leader has experienced a serious illness, the corporate machine will simply continue to roll on:

> *After a while you [will] find the business went back to BAU [Business as Usual]. Either the executive comes back or doesn't come back. People go back to BAU and things are forgotten again, until the next big thing happen[s]. It's just like our economy out there. (Tristan, Senior Executive, ICT Infrastructure)*

Tristan's pragmatic assessment may provide some insight into why it can be difficult for leaders who choose to stay in their executive roles to enact any enduring change behaviours. As he suggests, life goes on whether an 'executive comes back or doesn't come back'. His comparison with the economy appears to reinforce the blunt reality of the need for productive bodies in workplace, not sick ones. Executives then, like all other employees, are expendable resources and are certainly not beyond replacement, a fact of which NetCom leaders were very aware.

7.2.1 Case Study V: Cynthia – 'I'm active and open about it, not everybody is'

At the time of interviewing, Cynthia was a mid-level executive who had been with NetCom for over five years in a national-focused operations role. She was diagnosed with breast cancer and, following a successful period of treatment, was now in remission. Cynthia had an extended period of absence from work and felt extremely well supported by NetCom during her illness, particularly by her supervisor. Cynthia's comments indicated that NetCom was tremendously compassionate toward her and she felt no obligation to get back to work prematurely:

> *There was no pressure from the organisation at all to get back to work. It was really when I felt I needed to and they actually paid me that whole time as well which was phenomenal. (Cynthia, Mid-level Executive, Operations)*

Despite the level of support she received, Cynthia still expressed some trepidation about returning to the workplace after such a long absence:

> *I have been having conversations about changing roles… but we decided that I would come back into the role I left… That was a really good thing because… I was a bit nervous coming back. Being out of business for six months… your confidence goes a bit.*

Cynthia expressed relief at being able to return to the same role because her extended absence from the business left her 'nervous' about returning to work, and she was not confident in her ability take on a new role. Her candid remarks offer an insight into the feelings of vulnerability that can be experienced by senior leaders who have had to manage a major life event. In recognising and communicating her fears, Cynthia seemed to be demonstrating how her illness had become part of a lived experience that in some way reframed her relationship

with work. As she commented later in interview, ‘cancer doesn't go away’, rather it is something she now has to live with despite being in remission. The deeply entangled relationship between her body and her identity as a leader, was also apparent in the way Cynthia explained her indecisiveness regarding her surgery. Having already undergone a mastectomy in order to ensure the removal of cancerous tissue from one of her breasts, she was struggling with the decision to go ahead with a preventative mastectomy in her remaining breast:

> *I'm normally really very decisive and can make decisions and that's why I guess I'm in these roles, but I was really struggling with this decision.*

Cynthia’s indecision seems to have presented a kind of internal conflict with the way she otherwise viewed herself (a ‘very decisive’ person). Her decisiveness was a characteristic she equated with her identity as a senior leader, that is, her ability to make decisions was part of the reason why she was ‘in these roles’ in the first place. The lack of decisiveness, which she attributed to her illness experience, appeared to represent a dissonance with a previously held sense of herself as a leader. Cynthia went on to discuss how she viewed her attempt to return to work before having had the second surgery as a decision-avoiding behaviour:

> *I was talking to my boss six weeks after the surgery, the first surgery, and I'm saying I'm going to come back work and she's saying no, Cynthia I think you need to - and I was doing it because it was avoiding having to make the decision.*

Cynthia seemed to acknowledge that her primary motivation for returning to work early was to avoid having to decide whether to have further surgery. She attributed her boss as being instrumental to her decision to remain on leave and taking the time to properly think through her decision. Cynthia’s reflections seem to also illustrate the dependence a leader may have on others, particularly their supervisor, for support during periods of illness. She recognised her boss’s role ensuring she returned to work gradually to ensure that she did not ‘go back into your old habits again’ and repeat the work practices of her pre-illness self:

> *So, I was quite determined that when I came back and my boss at the time, she was quite adamant that we put a plan in place to enable me to have a better work life balance… I start early and I leave about five o'clock to make sure I go to the gym as well. So, it's trying to put a bit of rigour around that otherwise you end up working very long hours and don't actually have time to put those practices into place.*

Cynthia appears to recognise that it is very easy to fall back into habitual behaviours that will not enable her to have a 'better work life balance', so putting practices of self-care in place is part of the 'rigour' of ensuring she did not compromise her fragile wellbeing. Her experience of a life-threatening condition appeared to demonstrate how illness can have profound ramifications for executives as they re-enter the workplace. This is likely to be particularly true in instances when, even once recovered, the shadow of illness continues to be experienced as a potentially dormant threat, and a reminder of a leader's corporeal fragility. The rawness of Cynthia's vulnerability was apparent during the interview when, in an emotional exchange, she became visibly upset as she recounted a deeply personal event that occurred once she was back at work:

Cynthia: *Yeah, there was another example of when I came back after one of my operations, I had a problem with - because I had a bilateral mastectomy and - God, sorry.*
Researcher: *Are you alright? You okay?*
Cynthia: *It kind of - yeah it's…*
Researcher: *You can stop at any point okay.*
Cynthia: *Yeah, okay.*
Researcher: *I'll back right off.*
Cynthia: *Yeah, no it's alright. Yeah, so I had reconstruction as well. It just reminds me of when of - this - and the surgery leaked - oh you know, they - at work. So, my PA had to go out and get me some stuff, soak it up and get home and what have you. Yeah, that was a time I felt really kind of - it brings it back to how real it is.*

Perhaps unlike experiences of illness recounted by other NetCom executives, Cynthia's story captures the complexity of the lived experience of returning to work following a serious illness event. This confronting incident, taking place as it did within the impersonal confines of the workplace, rendered Cynthia's post-surgical body visible to her work colleagues in a very confronting way. In so doing, it publicly exposed the fragility of her 'reconstructed' corporeality, and flooded her with memories of her illness and 'how real it is'. This narrative presents a poignant counterpoint to other executives' acts of 'concealment', and a reminder that for some individuals there may be no time or capacity to enact impression management techniques to disguise a sick body in the workplace. Like George, who was rushed into

emergency heart surgery following a routine health check, these crises act as a reminder of a leader's own mortality and ultimate lack of control over their bodies.

Unlike other executives, however, Cynthia chose to be very open about her experience of illness, and in the passage below she describes the way her illness has become public knowledge within NetCom:

> *I also am quite open about it. So, I've actually spoken here at one of my friend's team meetings around my experience. I also speak for the… Cancer Foundation as well. So, I think it's part of my obligation to give back to the community for the support I got as well. So, I'm active and open about it, not everybody is. But you do find when people know that you've had an illness like that, other people in the organisation come and talk to you. There was a chap the other day that I only just recently met, and he said oh, I heard about you. He said I've had leukaemia or whatever and - so I think that's a good thing.*

Whilst Cynthia chose to be 'quite open about' her illness in the workplace she acknowledged that not all individuals would be comfortable having such a public profile. For Cynthia, however, speaking publicly and being visible as a senior leader who has survived cancer was all part of 'giving back', and rationalised as a way recognising the support she had received. Her level of publicness suggested a degree of comfort with taking up a potentially 'spoiled' identity and perhaps a desire, partly through the education of others, to attribute some meaning to her own difficult experiences. Cynthia's status as an executive did not appear to have been an impediment in her decision to 'go public' but rather it seemed to have provided a platform for advocacy within the organisation and outside it. In noting how her visible profile has touched others at NetCom, for instance the 'chap' who had leukaemia, she seemed to be articulating the potential power of a senior leader's decision to speak publicly about their illness and the reverberating affect this can have throughout an organisation.

Beyond her advocacy work, Cynthia observed that her illness experience also affected her management behaviours in the workplace. Prior to her cancer diagnosis, Cynthia commented that she was 'working extremely long hours', but reflecting on her return to work she said; 'I think when you have something like that, it makes you realise that there's more to life than work.' This reprioritising of what is important in life is hardly surprising given her cancer scare; what is perhaps more interesting from a leadership perspective is the way it appears to have changed the way she managed her subordinates. This ranged from the more prosaic - 'I know when I first came back, I was definitely delegating more' - to those that reflect

a deeper empathic interaction with her direct reports. In discussing the flexible working arrangements at NetCom, Cynthia noted her newfound leniency toward her staff wanting to work from home:

> *... when I came back it made me think a bit differently about people working from home and I wasn't quite so harsh as perhaps I would have been before.*

In addition to reorienting her view about flexible working, Cynthia also attributed her illness experience as being central in altering her perspective on her team working long hours:

> *I'd come in early and I would stay late. We have expectations about your staff doing that as well… you expect your team to be like that. Certainly, post coming back, I'm more relaxed about that. Oh sometimes [I'm] a bit cynical… but the majority of the time you know, if guys need to go off to doctors or what have you then I'm accepting of that.*

In both the examples above, it is noticeable that Cynthia's newfound leniency towards her team appears to be directly related to matters concerning their health and wellbeing: firstly, in allowing greater work/life balance by enabling them to work from home (something that she herself did as she was returning to the workforce); and secondly, for them to take time out to 'go off to the doctors or what have you' rather than stay back and work late. It is perhaps not surprising that given her own health scare that Cynthia, upon her return to work, became more attuned to the health and wellbeing of her staff. Having to address her own habitual ways of working due to a temporarily reduced physical capacity, appeared to have catalysed a heightened awareness of the embodied nature of work and the toll it could exact on others.

Cynthia's story, and those of others noted previously, suggests that for some executives, their experience of a serious illness can have implications well beyond their individual selves, and extend to a leader's management practices. More importantly perhaps, in these instances the affects appear to have been positive in nature, both for the individual concerned and NetCom. As a final footnote to Cynthia's case, however, it was noteworthy that despite having adapted her working practices somewhat after re-entering the workplace, and despite the organisation's support, she revealed that she had ultimately made the decision to leave NetCom. This was a decision which she acknowledged was taken, at least in part, to seek out a less stressful work environment, which was perhaps indicative of how difficult it can be for senior leaders to negotiate the demands of corporate life on their ailing bodies:

So I'm going to move to a growing organisation where I think [there is] a little less pressure - because there is a lot of pressure on the numbers here and it's pretty stressful.

7.2.2 Discussion

Michel (2011) has argued that knowledge workers who embrace a 'body as subject' position, that is, who 'listen to their bodies' following a health crisis, tend to work differently (and more creatively) in order to accommodate their altered corporeality. Rather than symbolising the death knell for leaders, then, these claims suggest that reckoning with illness may encourage individuals to change habitual behaviours in ways that offer new possibilities for rethinking the way work is able to be embodied (Charmaz, 2010). I have explored this idea further by looking beyond the lens of knowledge workers and the mechanisms of organisational control, to more broadly understand leaders' experiences of illness. In particular, I have sought to understand what these experiences might reveal about the reality of inhabiting bodies that may not reflect the norms of leader embodiment.

My research suggests that for some NetCom executives, inhabiting a sick body can indeed precipitate a renegotiation with the way leadership is itself reconciled and enacted. Charmaz (2010) notes that it is those with chronic illness conditions, who receive constant reminders of their body's limitations, for whom change becomes a necessity. This was perhaps most clearly evident in the case of Cynthia whose identification as a hard-working and decisive leader was severely disrupted by the experience of contending with a life-threatening illness. Frank (1991/2002, p. 1) argues that one of the realities of living with an illness is that individuals are both 'forced and allowed' to think about the ways in which they value their (working) lives. Like Prothero (2017) who had to reconcile the inability of her post-surgical body to work 'ridiculously long hours', Cynthia too was ultimately 'forced' to acknowledge her own physical limitations and instil some 'rigorous' practices to ensure a better work/life balance.

Once Cynthia appeared to accept the limitations of her sick body, she seemed to experiment with different ways of embodying leadership. Michel (2011, p. 351) suggests that 'ethical sensitivity', reflected by acts of empathy, can emerge as a result of developing a 'body as subject' positioning. For Cynthia, the experience of having to more deeply attune herself to her own body's needs appeared to contribute to her enacting a more compassionately grounded leadership, particularly where the health of her subordinates and colleagues was concerned.

This was evidenced by the increased leniency she demonstrated toward her direct reports in terms of allowing greater workplace flexibility, but also in the way her advocacy work as a 'cancer survivor' made her widely available as a powerful symbol of embodied vulnerability within and beyond NetCom.

Cynthia's decision to be open about her experiences of illness was rationalised as a way of 'giving back' for all the support she herself had received. However, I suggest that Cynthia's transparency can be interpreted as a much more transgressive act than simply 'giving back'. Because the social meanings attributed to leaders' bodies are still so rigidly embedded in masculine images of heroic individualism (Fletcher, 2002), organisational leaders who expose their sick bodies to public view threaten to destabilise the myths embedded in the construct of leadership (Ghin, "in press"). I suggest that Cynthia became a very public symbol of the ordinariness of leader corporeality, and the lack of control those in positions of power are able to exert over their human flesh. Because of the position of organisational influence that leaders occupy, such displays have potential ramifications beyond the individual leader. I argue those who are able to transform a 'spoiled' identity into a positive embodiment of leadership offer up a potential novel version of leader embodiment.

Whilst Cynthia's decision to be open about her illness may itself be interpreted as a 'heroic act', thereby confirming the status of leader as hero, I argue that this reading misrepresents the reality of what has occurred in this case. Cynthia is not a historical figure whose 'battle' with illness is being immortalised in literature as a conquest over the weakness of the flesh and of moral superiority (e.g. Gavin et al., 2003). Rather, she is but one leader within a large corporation, seeking to make meaning from the lived experience of dealing with a serious illness - an illness that as she suggested, 'is always with you'. Far from seeking safety in heroic self-assertion, she is outing herself as the author of experiences she cannot control (Ackerman & Maslin-Ostrowski, 2004, p. 317). Through sharing stories of her own embodied vulnerability with colleagues, I argue that she is both reclaiming an identification with the concept of 'leader' for herself, but also helping to redefine the acceptable boundaries of a leader embodiment in a manner that reveals, rather than disguises, the vulnerability of human existence. Transcending a potentially 'spoiled' identity is a risky proposition for leaders, because whilst revealing an illness may engender some relational gains, they are also exposing the limits of their corporeal control and therefore their *ordinariness.* This is a vexed position for any leader to take up given the mythology that surrounds leadership, perhaps even more so

for female leaders, for whom such revelations risk compounding entrenched gendered prejudices (Fotaki, 2013; Gatrell, 2013; Gatrell et al., 2017).

Carel et al. (2016, p. 1152) state that the experience of having to deal with illness can be 'epistemologically transformative' for individuals insofar as it 'gives us experiences that we would not otherwise have had and… knowledge that cannot otherwise be acquired'. For those that experience a serious health event, this may result in a period of post-traumatic growth[5] in which priorities are reassessed and a new awareness of the body (and its limitations) are revealed (Hefferon et al., 2009). I suggest that it is this new bodily identification that can act as the potential catalyst for some leaders to reassess their habitual modes of behaviour (Shilling, 2008), and to question and experiment with how they may enact leadership differently. For example, one of the assumptions that commonly underpins the existing model of leadership is the single-minded focus on careerism. Collinson (1994, p. 15) define careerism as being deeply embedded in middle-class masculinities in which 'competition is often expressed in the widespread preoccupation with hierarchical advance'. A leader must be consistently seeking career progression in order to demonstrate ambition, commitment and competence required to lead organisations (Kärreman & Alvesson, 2009; Moen & Roehling, 2005).

My research suggests that leaders who occupy a sick body may need to rethink the presumption of continual ascendency as a marker of leadership. This was particularly evident in the case of Warren who acknowledged that his chronic illness had made him less likely to seek out internal promotion opportunities, as he had to consider his health and wellbeing before naked ambition. Having to come to terms with the limitations of his sick body, Warren needed to re-evaluate his understanding of how to take up his identity as a leader no longer on the prescribed path of continuous career ascendency. However, far from reflecting a static process of decision making, this is a potentially 'spoiled' identity requiring constant negotiation, in which leaders must attempt to find a balance between the truth of their own health circumstances and the pressure to live up to a heroic leadership mythology (Ackerman & Maslin-Ostrowski, 2004).

Although some participants recalibrated their working lives to accommodate their reduced capacities, NetCom executives were often less optimistic about the possibility of illness invoke lasting change to individual behaviour. Whilst Michel (2011) embraces the 'body as subject' positioning as a holy grail that can emancipate workers from the jaws of organisational

[5] Post-traumatic growth (PTG) is the psychological term which denotes the phenomenon of positive change resulting from the experience of trauma or adversity.

control, my research does not suggest that an unbridled acceptance of the sick body is either possible, or indeed likely, for many people who remain in senior leadership positions. Even in instances where illness threatened an executive's mortality, the epiphanic realisation that 'life is too short' appeared to erode over time, as was the case with George who even after his brush with death, suggested that he was 'working harder than ever'.

Kerfoot (2000, p. 243) states that the masculinity underpinning managerialism dictates that leaders need to constantly 'display the body as 'in touch' with the demands of the modern corporation'. Manifesting a sick body can impede a leader's ability to endure such demands. Therefore, while an individual executive may be 'epistemologically transformed' (Carel et al., 2016) by their experiences (and may even affect transformation in others), unless their illness persistently threatens their capacities, the degree to which such experiences may result in an alternative leader embodiment is dubious. As a number of participants noted, there is a general presumption that executives will either leave their positions or return to 'business as usual' once their sick body is sufficiently recovered.

As members of the organisational elite, executives are high status professionals occupying positions 'characterized by cultures of commitment and organized according to hierarchical career trajectories. Career advancement is predicated on years of continuous, uninterrupted service in addition to demonstrations of merit and accomplishment' (Stone & Hernandez, 2013, pp. 235-236). In order for sick-bodied leaders to abide by the expectations of leadership, it may be in their best interest to effectively 'lose touch' with their bodies. In this context, it is perhaps not difficult to understand how an executive like Alyssa can choose to ignore what 'felt like an orange' crunching in her side 'because there was no good time to go and see someone' about it. Single-minded dedication, which is what senior leadership generally demands, is likely to become an impediment to listening to the body, making it easy for a leader's health priorities to recede into the background and for the sick body to disappear from view until a new crisis emerges.

7.3 Conclusion

In this section I have discussed the experiences and perceptions of NetCom executives about the sick body, and have addressed my research question as it pertains to a 'less than ideal' embodiment of leadership. Firstly, I have shown how illness was commonly viewed as an expression of weakness, calling into question the competency of leaders to manage themselves and their organisations. Building on the work of Goffman (1963/1991), I have argued that

executives can become targets of a 'spoiled' leader identity because the sick body (like its fat-bodied counterpart) threatens the accepted norms of leader embodiment.

Further, I have illustrated how executives can engage in (sometimes unconscious) 'passing' behaviours, designed to disguise their bodily impairments. I have argued that because illness can undermine perceptions of a leader's embodied agency and control, this not only challenges the heroic myths of leadership but also belies the illusion of corporeal control which has been emboldened by contemporary health discourses. I have suggested that where the athletic body can fortify perceptions of a leader's super-humanity, the sick body dares to expose a leader's ordinariness.

In the final section, I have discussed the ways that NetCom executives renegotiated their sick bodies in the workplace, noting the perceived opportunities and constraints to embodying alternative modes of corporeality. My research suggested that for the exceptional NetCom executive who openly engaged with the challenges presented by their illness, the sick body did indeed present an opportunity for 'epistemological transformation' that altered the habitual modes of being in leadership. I have argued that illness, especially illnesses that significantly impact a leader's capacity to ignore their corporeality, can undermine existing masculine models of leadership which are preoccupied with a linear, hierarchical advance. Ultimately, however, my research suggests that NetCom executives were sceptical about the possibility of staying 'in touch' with the needs of an ailing body and still meet the demands of the modern corporation. The more common perception was that it was that executives were inclined to 'lose touch' with the body soon after the threat of illness has passed as they quickly returned to 'business as usual'.

Chapter 8: Conclusion

In this study I have used the lens of embodiment to critically explore the relationship between leadership and health. My decision to focus on the bodies of leaders reflects the relatively recent turn towards the body by organisation studies scholars (e.g. Acker, 1990; Harding, 2003; Ropo & Parviainen, 2001; Sinclair, 2005a, 2005b) who have shed new light on leadership studies research by looking beyond dominant cognitive-centric and functionalist paradigms (Mabey, 2013). I have undertaken an in-depth, single case study of a large ICT organisation, NetCom, and have explored the following research question:

> *How do leaders make sense of the relationship between leadership and health, and what do the shared meanings made of the 'ideal' and 'less than ideal' body reveal about the norms governing leader embodiment?*

My research findings have explored how an idealised, self-managed body exists at the intersection of contemporary health and leadership discourses which celebrate personal agency whilst often shunning the signifiers of embodied vulnerability. In this chapter, I bring the findings of my research together into an overarching discussion, before considering the contributions and limitations of my study, and then finalising this thesis with a broad reflection about the research process.

8.1 Summary Discussion

The self-managed body: An ideal embodiment of leadership

Perhaps one of the least surprising - and yet most instructive - findings of my study is reflected in the deeply-held beliefs espoused by NetCom executives regarding the relationship between personal responsibility and organisational seniority. Specifically, I refer to the perception that with greater organisational status comes the expectation of increased personal responsibility for one's health and wellbeing. I have suggested that this finding is not particularly unexpected in that it aligns with the emphasis which both contemporary health and wellbeing *and* leadership discourses place on the importance of individual agency (Bligh et al., 2011; Dale & Burrell, 2014). A researcher would generally expect those in senior leadership positions to reiterate discourses that project the extent of their personal agency, a leader *stands*

for agency after all (Alvesson & Kärreman, 2016). And in this case, it is achieved by reinforcing the doctrine of personal responsibility and downplaying the contingent factors impacting individual health, such as the stressful nature of leadership work or the genetic susceptibilities of a leader's body. Despite its obviousness, then, this finding is edifying insofar as it clarifies the significance of the self-managed body to the construction of an 'ideal' leader identity.

In a time when 'we are increasingly coming to relate to ourselves as 'somatic' individuals' (Rose, 2007a, p. 13), I have argued that the fit body signifies a self-managed idealism which can lend legitimacy to leaders by reinforcing what have traditionally been viewed as masculine leadership characteristics such as strength, control and self-discipline (Collinson, 2011). In contrast, bodies that are perceived as unhealthy, sick, or lacking in vitality, imply an embodied vulnerability associated with weakness, a lack of discipline and incompetence - characteristics that continue to be fundamentally dissonant with the social identity ascribed to leadership (Harding, 2014). Therefore, whilst the fit body can fortify a leader's embodiment against perceptions of fragility, the fat and/or sick body dares to expose a leader's *ordinariness*, posing a conflict with the shared fantasies that underpin leadership (Gabriel, 2015; Meindl et al., 1985).

I have argued that the elucidation of ordinariness which can emerge through the revelation of an embodied vulnerability, represents a severing of the distinction between leader and follower. Or as one NetCom executive surmised*, 'if you show signs of weakness as a leader then why are you a leader?'*. In other words, what makes you different from anyone else in the organisation? A proportion of the high pay and privileges executives receive may be implicitly understood as compensation for bearing risks that others may not wish to take (Wiesenfeld et al., 2008, p. 247), including risks to one's health, and the failure to manage these risks successfully can diminish a leader's organisational standing. Calás and Smircich (1991) observe that there is a very seductive allure embedded into the construct of leadership which is beneficial to both leader and follower. The dissolution of this distinction can have profound implications because the ability to control the distance between leader and led is critical to maintaining the mystique of leadership (Grint, 2010, p. 101).

I have argued that part of what NetCom leaders believed distinguished them from their lower level colleagues was the control they exercised of their embodied domain; it was the adherence to disciplined practices that enabled them to manage their work/non-work boundaries and withstand the rigours of executive life. As White (2012, p. 268) argues, 'the well shaped and maintained body is used to show to others that we discipline and control ourselves, and that

we are worthy, indeed, superior members of society.' In this, I have argued that leaders are tasked with performing the definitive embodiment of the 'ideal worker' (Dumas & Sanchez-Burks, 2015); they act as the ultimate testament to the importance of the self-managed body in successful leadership. One way this became visible was through the discourses of 'energy management' adopted by NetCom leaders, which were employed to both validate the disciplining practices with which they engaged, and to demonstrate the control they exhorted over their own corporeality. The ability to signal self-management through embodied practices therefore became an important signifier of leader identity, differentiating leaders from followers, and granting them the moral authority to control the bodies of others (Ehrenreich, 2018).

The fit body and leadership: Resisting a totalising account

Despite the importance NetCom leaders placed on personal responsibility for health and wellbeing, my research findings suggested a more nuanced account of the fit body in leadership. I have discussed how proponents of athletic discourses in management have fostered beliefs about the essential nature of fitness to leadership, positioning the exceptional bodies of 'corporate athletes' as the ideal embodiment of leadership (Loehr & Schwartz, 2001; Neck & Cooper, 2000; Neck et al., 2000). These are bodies that can function at the peak of their productive capacities in service of corporate goals, regardless of the demands made upon them (Michel, 2011). Perhaps unsurprisingly, such characterisations of leader embodiment have been pilloried by critical leadership scholars who have tended to associate a leader's fit body with problematic normalising standards of athleticism that have come to define leader identity (Coupland, 2015; Meriläinen et al., 2015). My findings suggest there may be some middle-ground between these seemingly opposing views, and that the meaning made of the fit body in leadership is variable and open to contestation by those in senior leadership positions and in organisational life more broadly.

Johansson et al. (2017, p. 22) rightly note that resistance to managerial athleticism can be 'a complex subject of inquiry'. This is because while fitness practices themselves may be regarded as a 'conscious counterbalance to stressful professional and managerial work and a way to retain a sense of control over one's life', what is labelled as resistance 'in one societal context may be considered a form of compliance in another.' Many NetCom leaders appeared to make sense of the fit body at a pragmatic level, for example, in the way that they considered maintaining a reasonable level of fitness a 'conscious counterbalance to stressful professional

and managerial work and a way to retain a sense of control over one's life' (Johansson et al., 2017, p. 22). Additionally, the fit body was also romanticised by executives as if it were a genuine marker of a bona fide leader identity; for example, in executives' positioning of athletic activity as the by-product of the 'innate' energetic dispositions of leaders. However, at the organisational level, my findings suggest that although senior leaders did indeed have the power to influence NetCom's health and fitness culture, the extreme behaviours associated with athleticism were still able to be questioned and resisted when they were deemed as being out of step with the organisation's cultural norms.

NetCom executives appeared to be patently aware of the problematic nature of idealising a culture of athleticism in organisations, as was evidenced by the response to the feelings of exclusivity created by the 'gym buddy' group and the cycling 'clique'. Many executives appeared to echo Thanem's (2013, p. 398) observations that the 'embodied passions' of leaders could be detrimental to organisational cultures, in this case, through the creation of perceived cultures of exclusion. I have argued that NetCom's (sub)cultures of athleticism were illustrative of the tensions and contradictions inherent in idealising leader embodiment, that is, in reinforcing the specialness of leaders - and therefore the 'leadership mystique' (Kets de Vries, 1994) - they also ran the risk of creating too great a relational distance between the bodies of the leader and those of the led. This was particularly problematic for NetCom because of the leadership's proud espousal of egalitarian values which they believed differentiated them from their more hierarchically-oriented, offshore business owners.

I have also positioned NetCom's egalitarian values within a broader Australian cultural dynamic, one which abhors blatant displays of grandiosity in leadership (Ashkanasy, 2008) and is particularly sensitive to perceived threats to the value of fairness (Shields & Harvey, 2010). I have argued that this specific cultural context provides an insight into a dialectic that may emerge in athletic cultures of the organisational elite and the potential for resistance that exists within then. I have therefore suggested that although the discourses and practices of athleticism were certainly enacted by senior leaders, the NetCom experience indicates that such cultures are far from being a stable construct beyond the resistance of those in senior leadership positions.

Finally, I have proposed that analysing NetCom's (sub)cultures of athleticism solely through the lens of their exclusory impact may overlook one of the important purposes they fulfilled, i.e., as a repository for a contested workplace masculinity. I have argued that it is within the context of an increasingly feminised workplace (Knoppers, 2011) and the broader

awareness of cultures of toxic masculinity (Banet-Weiser & Miltner, 2016) that such athletic endeavours may also be understood. I suggest that NetCom's (sub)cultures of athleticism provided a sanctuary for a male bonding and brute masculinity that may be otherwise be experienced as increasingly marginalised, and argue that it is a useful lens through which to frame the relationship between masculinity and leader embodiment in organisations.

The fat and sick body: A 'less than ideal' embodiment of leadership

Whilst the fit body is often viewed as representing the ideal aspirations of leader self-management, I have argued that the fat and sick body may be considered evidence of its absence, and therefore a 'less than ideal' embodiment of leadership. With regards to the fat body, I have found that while NetCom executives expressed a wide array of perspectives regarding bodyweight, a significant proportion of views support the findings of earlier quantitative research and illustrate the potentially stigmatising effects of being an overweight or obese leader (Ashkanasy, 2008; E. B. King et al., 2016; P. V. Roehling et al., 2014; P. V. Roehling et al., 2009). Drawing from Goffman's (1963/1991) work on 'spoiled' identities, I have argued that fatness may become problematic because it threatens the normative expectations associated with the self-managed body of leaders. Instead, it connotes an uncontrolled and undisciplined corporeality, one that is not necessarily deemed to be fit for the purpose of leadership (Bresnahan et al., 2016).

In exploring the biases propagated by some NetCom executives as well as first-hand accounts of weight issues, I showed how leaders may be both victims and perpetrators of weight-based stigma. However, NetCom leaders were generally unable to view their personal weight struggles as anything other than a failure of self-management. I have argued that this is, at least in part, because there is little scope for those in privileged societal positions, including high status leaders, to lay blame for their problematic waistline on structural factors. To do so undermines the self-managed idealism associated with leader embodiment (Lovelace et al., 2007) and the doctrine of personal responsibility that undergirds contemporary health and wellbeing discourses (Lupton, 2012, 2013b, 2014). Far from having exclusive protective effects, therefore, a leader's high status and visibility may contribute to their sense of becoming the target of stigmatisation.

Like fatness, I have found that the manifestation of illness could also be experienced as stigmatising, and may result in the emergence of what I have termed a 'spoiled' leader identity Goffman (1963/1991). I have noted numerous similarities in the discourses of NetCom

executives regarding fat and sick bodies; for instance, both were associated with threats to perceptions of leader competence, failures of self-management, and has having potential career ramifications. However, one significant difference appeared to be that, in the minds of many NetCom executives, illness was closely coupled with the quality of weakness and it appeared that the manifestation of a sick body was a more indelible threat to the masculine ideals of invulnerability in leadership (Ghin, "in press"). I have argued that this may be because while a fat-bodied identity is ultimately able to be reconciled as redeemable (i.e. fatness may be overcome by demonstrating the discipline associated with leadership), the sick body exposes the more brutal possibility that illness may be beyond the control of even the most disciplined leader. I suggest that this represents a far greater existential threat, not only to individual but organisational survival, because notions of individualism continue to dominate the leadership landscape (Collinson & Tourish, 2015; Grint, 2010).

In this context, it is perhaps not surprising to find that leaders were generally reluctant to disclose their illnesses, and engaged in 'passing' strategies (Goffman, 1963/1991; Joachim & Acorn, 2000) designed to dilute the discrediting impact of their sick body. Although one may have anticipated this finding in organisations where extreme competitiveness was the prevailing norm, executives had largely presented NetCom as having a caring culture (and the relatively long tenure of many executives seemed to support this claim). I have suggested that this apparent discord speaks strongly to the way personal responsibility for health and wellbeing was infused with the ideals of leadership, a factor that many NetCom executives believed distinguished them from their lower level counterparts who could seek out organisational support without the fear of being labelled 'weak'.

I have, however, illustrated the case of one NetCom executive who was open about her life-threatening illness, and used her experiences for a wider purpose than her own heroic self-assertion (Ackerman & Maslin-Ostrowski, 2004). Along with a small number of other executives, this was a demonstration of the epistemologically transformative potential of illness (Carel et al., 2016), which appeared to reimagine the way illness could be performed and embodied by organisational leaders. Yet my findings suggest that where illness experiences are concerned, there is still a pervasive expectation leaders will either exit the business or return to 'business as usual', restoring their bodies so that it is once again 'in touch' with the demands of the corporation (Kerfoot, 2000, p. 243).

In the case of both the fat and the sick body, I have argued that the pubic visibility of such embodied vulnerabilities relies upon a rendering of leader embodiment that is *prosaic*

rather than *heroic*. However, as the failure of post-heroic discourses has shown (Fletcher, 2002, 2004), reframing the construct of leadership from one wedded to heroic, masculine and individualistic ideals is no easy feat. Of course, the danger of the prosaic body is that whilst it may work toward a humanising of leadership by exposing the ordinariness of leader embodiment, in doing so the social distance between leader and follower collapses, taking with it the mystique upon which leadership relies (Grint, 2010).

8.2 Contributions

In considering the contributions of this research to the scholarship on embodiment and leadership studies, I have kept Ragins' (2012, p. 498) observation firmly at the forefront of my mind: 'Without this work, what can't we understand? Or, even more seriously: what do we get wrong?' What has driven this study is a desire to use the analytic lens of embodiment through which to gain new knowledge about the significance of the relationship between health and leadership. Underpinning my analysis has been the problematisation of leadership as an individualistic, masculine and heroic endeavour and the struggle of post-heroic discourses to overturn this dominant narrative (Fletcher, 2002; Grint, 2010; Pfeffer, 2015). I have also drawn from the work of numerous critical leadership scholars who have offered insights into the limitations of current leadership practice, research and pedagogy (Alvesson & Kärreman, 2016; Collinson, 2011, 2014; Collinson & Tourish, 2015; Ford & Harding, 2011).

Further, I have examined the diverse literatures in management and the health sciences which have explored the technological, sociocultural, and economic conditions that have influenced the changing perceptions of health and body management in society (Lupton, 2012, 2013b; Rose, 2007a, 2007b; Shilling, 1993/2012, 2008; White, 2012). I have reviewed literature that has explored the intersections between these three dimensions, i.e., the body, health and leadership (Johansson et al., 2017; Knoppers, 2011; Knoppers & Anthonissen, 2005; Meriläinen et al., 2015; Sinclair, 2011); and finally, I have drawn heavily from the sociological understanding of stigma in order to make sense of the 'less than ideal' body in leadership. It is through the lens of this scholarship that I now bring together the contributions of my research.

8.2.1 Theoretical Implications

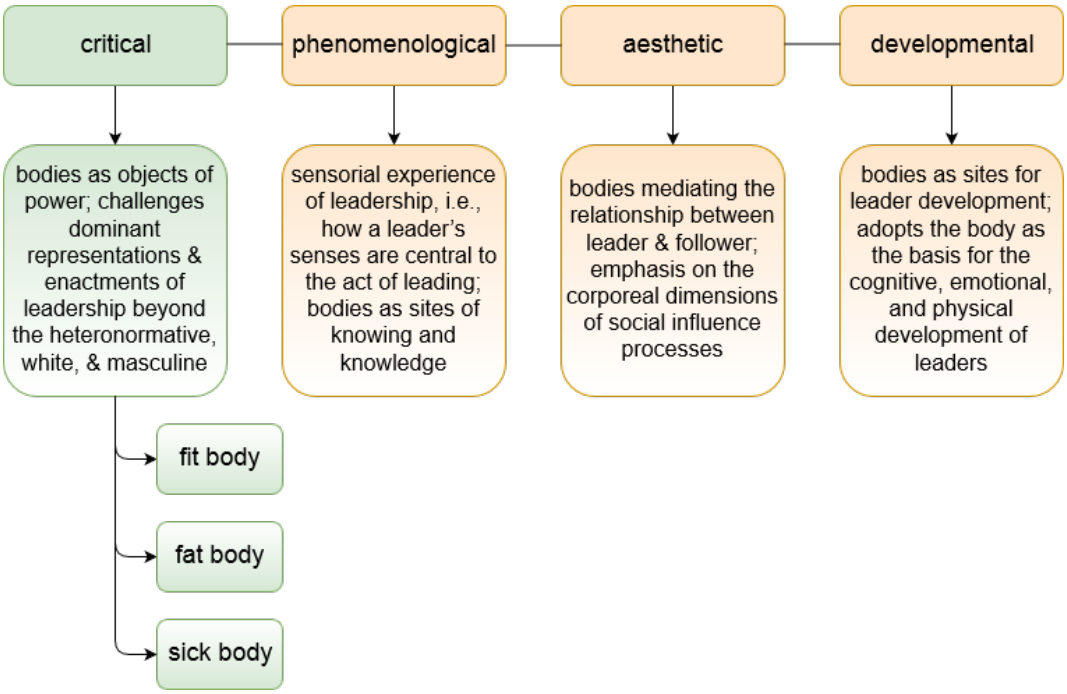
Conceptualising Embodied Leadership

There have been numerous noteworthy efforts to categorise the literature as it pertains to the body and organisation studies (Gärtner, 2013; Styhre, 2004); however, they have largely

neglected the scholarship that is specifically relevant to leadership. In this study I have classified the extant 'embodied leadership' literature into a typology consisting of four main categories: critical, phenomenological, aesthetic and developmental (see Chapter 2.2). I consider this new typology to be a novel contribution to the extant leadership studies scholarship concerned with embodiment, and a useful analytic lens for future academic research in this domain.

As my research has an underlying concern with the relationship between health and leaders' bodies as symbolic objects of power, this study sits within the 'critical' category of embodied leadership studies (see Figure 4). My research makes an important contribution to this domain by explicitly identifying differing dimensions of health and demonstrating how deeply entwined health and wellbeing is with leader identity. Most earlier critical scholarship - to the extent that it has been directly concerned with leader health - has been focussed on critiquing the masculinised discourses and practices associated with athleticism (A. D. Brown & Coupland, 2015; Coupland, 2015; Johansson et al., 2017; Knoppers & Anthonissen, 2005). Alternatively, it has explored the gendered aspects of health by investigating the perceptions surrounding the fleshy vicissitudes of women's bodies (i.e. menstruation, pregnancy, and menopause) and the disadvantages this places upon female leaders in the workplace (Blair-Loy, 2006; Fotaki, 2013; Gatrell, 2007, 2013; Gatrell et al., 2017). Whilst being strongly informed by this research, my study expands upon this work through three core conceptual categories of leader health – the fit, the fat, and the sick body. In articulating these dimensions, I am extending the remit of existing critical enquiry into the relationship between embodiment, leadership and health, providing a more refined conceptual basis for future research.

Figure 4: Expanding the critical landscape of embodied leadership



The 'ideal body' - Athleticism and leadership

Of the three dimensions noted above, the fit body has received the greatest attention from critical scholars who have been primarily concerned with the problematic nature of an idealised embodiment of leadership. The fit body, then, has become most commonly associated with extreme athleticism or a misplaced obsessional pursuit of embodied perfection (Cederström & Thanem, 2018; Johansson et al., 2017; Meriläinen et al., 2015; Thanem, 2013). The principal analytic critique of athleticism in leadership has focussed on its reification of masculine bodies and, therefore, the potential to exclude bodies that do not 'measure up'. My research contributes to this literature in numerous ways; firstly, by exploring the contested and temporal nature of athleticism in organisations; secondly, by identifying the role of energy as a marker of athletic identity, and thirdly, by examining the role cultures of athleticism play as potential sites of contested workplace masculinity.

This study helps to shift the theoretical framing of athleticism by redefining the leader's fit body in a way that does not necessarily make assumptions about athletic identity. The fit body, as I have defined it – i.e., a leaders' body that subscribes to the normative discourses of health and fitness in the service of personal and/or corporate ends – allows sufficient scope to recognise the threats of athletic idealism but also incorporates the breadth of meaning that may

be made of fitness in leadership. This is important because it expands the theoretical focus of the 'ideal body' from the extreme discourses of athleticism to enable a broader critique of the place of the fit-bodied identity in leadership.

My research findings also contribute to the literature on athleticism by suggesting that far from being a stable, idealised norm, it is a temporal phenomenon that can be a strongly contested component of modern leadership identity. The NetCom case study demonstrates that there is a possibility those in positions of power recognise the threat posed by such idealisation and actively resist its normalising effects. My research findings also emphasise the importance of both organisational and cultural identities in the emergence of such resistance. As such this research contributes to the discourses of the politics of organisational resistance (Collinson & Hearn, 1994), but more specifically responds to the call for a greater understanding of resistance as it relates to the incursion of neoliberal managerialism into the health agenda of the workplace (Johansson et al., 2017; Thanem, 2009).

Additionally, my research contributes to an alternative reading of the masculinity that has been closely associated with feminist renderings of athleticism in leadership (e.g. Johansson et al., 2017; Knoppers, 2011; Knoppers & Anthonissen, 2005; Sinclair, 2005a, 2005b; Thanem, 2009). My study concurs with previous theoretical positions which have critiqued cultures of athleticism as reifying masculinity at the expense of 'non-conforming' leadership bodies. However, in addition, I have theorised that within the specific context of an increasingly feminised workplace (Knoppers, 2011) and the more common calling-out of privileged male behaviour (Banet-Weiser & Miltner, 2016), these cultures may also be interpreted as offering sanctuary to what may be experienced as contested masculinities. In this, I have been sensitive to the claim that there is a danger of men claiming an 'othered' body at the expense of those that may be more systemically marginalised (Ball, 2005). However, my findings suggest that (sub)cultures of athleticism may be a theoretically rich source for the exploration for a masculinity becoming more commonly contested in the modern workplace (Fondas, 1997).

Finally, this research expands on previous work that has alluded to the importance of 'energy' in the construction of a bone fide athletic identity for leaders (Johansson et al., 2017; Meriläinen et al., 2015). This study makes that relationship more explicit through an exploration of the theoretical connection between energy and trait-based theories of leadership (Bass & Bass, 2008), and the popularisation of theories of 'energy management' (Loehr & Schwartz, 2001) in leadership studies. My findings illustrate how athleticism may be viewed as both the by-product of the 'innate' energetic traits of leaders but also something that can be achieved

through the adoption of specific practices that assist in the mastery of one's 'energy management'. This is an important contribution because it provides a novel theoretical and empirical grounding for the critical interrogation of the way energy is entwined in constructions of embodied leader identity.

The 'less than ideal' body – Fatness and illness in leadership

With regards to the conceptualisation of the fat and sick body, these are novel contributions to the domain of embodied leadership. In defining the fat and sick body this research is contributing to a growing critical leadership studies that focuses on interrogating the nuances and limitations of leader power in organisations (Ekman, 2014; Spicer et al., 2016). The power of leaders is not denied but it also acknowledges that those in high status organisational roles are agents as well as *objects* of capitalism who are controlled in ways that are worthy of further exploration (Harding, 2014, p. 409). This critique is central in helping to understand the ways that people in leadership positions continue to 'entrap themselves' in structures of their own making (Michel, 2014) and to explain why the 'less than ideal' body is a fraught identity for leaders to take up. By this I refer specifically to the idea that fatness and sickness expose the limits of a leader's agency in ways that contradict the leader's symbolic status as the embodiment of organizational power and control (Ghin, "in press"). In documenting the ordinariness of the leader's body, this research makes a broader contribution to the more recent scholarly efforts to humanise leadership (Antonacopoulou & Bento, 2018; Byrne et al., 2018; Petriglieri & Petriglieri, 2015), reimagining its embodiment beyond the domain of the individualistic, masculinised and heroic.

With this in mind, this study also contributes to the research on the 'ideal worker' (Bloom, 2016; Dumas & Sanchez-Burks, 2015) by underscoring the importance of leader embodiment to this construct. Traditionally, the status of 'ideal worker' has been ascribed to lower status employees (E. L. Kelly et al., 2010) or associated with professional identity management (Reid, 2015), rather than with leadership discourses *per se*. Accordingly, limited attention has been given to the role of leader embodiment in the construction of the 'ideal worker' image. My contribution to this literature has been to demonstrate the way in which the leader's self-managed body (as enacted through adherence to fitness regimes) is used to reinforce the credibility of the 'ideal worker' thesis and the threats posed to this by the emergence of the 'less than ideal body'.

Stigma theory and leadership

This study makes a significant contribution to the application of stigma theory in leadership studies, and more specifically to the intersection of stigma theory, health, and embodied leadership literatures. There is currently a dearth of literature in leadership studies that has directly explored the relationship between stigma and leadership. Therefore, my research has largely been informed by stigma research in sociology, the political sciences and psychology (Bresnahan et al., 2016; E. B. King et al., 2016; P. V. Roehling et al., 2014; P. V. Roehling et al., 2009), which has investigated issues such as bodyweight and its impact on the perceptions of leaders. However, my research does extend the work of management scholars who have previously applied stigma theory to elite organisational members, though these have tended to explore issues of bankruptcy (Sutton & Callahan, 1987) or reputation (Wiesenfeld et al., 2008), rather than health-related stigma.

Part of the reason for the lack of research into the stigma of the elite in organisations can be explained by the tendency of researchers to 'study down' rather than 'study up', that is, to focus on those employees with the least power organisational power (Ashforth & Kreiner, 1999; Grandy, 2008). However, whilst acknowledging 'that stigmatization is entirely contingent on access to social, economic, and political power' (Link & Phelan, 2001, p. 367), my research findings suggest that it is important to recognise that even those in positions of power may experience the negative effects of deviating from the normative expectations associated with their social identity. In this way, my research contributes to a much more complex and contestable understanding of the relationship between power and stigma in leadership studies, one that insists on examining the possibility that the expression of embodied vulnerabilities may cause leaders to become both *stigmatiser* and *stigmatised.* As Wiesenfeld et al. (2008, p. 246, emphasis in original) suggest, 'little research has addressed the process by which executives go from 'hero' to 'goat'', so this study makes an important contribution to the potential impact of stigma on leader power.

Building on Goffman's (1991/1963) seminal work on 'spoiled identities', my research also contributes to stigma theory by broadening this concept to incorporate the notion of a 'spoiled' leader identity, which I have defined as the potential devaluation of a leader's social identity due to their experience of occupying a 'less than ideal body'. Wiesenfeld et al. (2008, p. 242) have previously mused on the potential of the identities of organisational elites to become spoiled, as has Warren (2007), however, these studies refer to the experience of

corporate failure rather than more intimate 'failures' of one's body. My research builds on this theory of spoiled identities, and through an empirical exploration of health-related stigmas, demonstrates how organisational status does not necessarily protect a leader's identity from being 'spoiled'. Furthermore, I identify how, in the case of the sick body, leaders may enact passing behaviours (Clair et al., 2005) to avoid becoming stigmatised, thus avoiding the likelihood of having to disclose their illness. This is a significant contribution to the literature on stigma and leadership because it challenges earlier assumptions regarding the relationship between hierarchical levels and illness disclosure in the workplace (Jones & King, 2014), revealing the vulnerability that leaders may experience regarding the revelation of their 'less than ideal' bodies.

8.2.2 Practical Implications

This study has a number of implications for the executive health and wellbeing policies of organisations. The support of senior leadership is generally viewed as critical to the success of health and wellbeing initiatives (Dellve et al., 2007), however, my research suggests that executives do not necessarily view themselves as the targets of such initiatives. My findings suggest that higher organisational status was associated with a belief in the need for leaders take greater personal responsibility for health, and rely less on organisational support mechanisms. As Byrne et al. (2014, p. 353) note, leaders 'may not always consider their own resources or state of psychological health, perhaps for fear of appearing weak or ill-equipped to perform their role.' Executives were also often cynical about wellness objectives such as 'work/life balance' and tended to believe that a blurring of the personal/professional boundary and increased stress was part of the territory of leadership. In fact, being able to demonstrate one's ability to cope with these factors is arguably part of what defines a 'leader' (Quick et al., 2000), regardless of the impact this might have on one's health.

Therefore, organisations that are genuinely seeking to engage with executives about their health and wellbeing need to consider the reluctance of those in positions of power to engage with generalist health and wellbeing services, or enact help-seeking behaviours because of the sensitivities of being perceived as 'weak' for doing so. In practice, this could mean that organisations need to develop targeted executive health programs that reduce the stigmas associated with help-seeking, and address issues specifically related to illness management and disclosure in the workplace. Given the associations commonly made between illness and weakness, it may be advisable to move beyond traditional resiliency-focussed programs which do not commonly address the masculinised assumptions that are embedded into leadership

(McClellan et al., 2008). This could be particularly beneficial in sectors where the stigma of illness is perceived to have greater professional ramifications, such as the medical and legal profession, the military, police and emergency services.

The findings of my research also suggest that executives may often be unaware of their own biases regarding illness and bodyweight in the workplace and, in particular, how such biases can influence judgments made about competency and inform recruitment decisions. There seemed to be both an obliviousness to how such biases could not only negatively influence an organisation's culture but also hold them to standards that they themselves felt entrapped by, particularly in their own time of need. My findings suggest that leaders are often modelling a version of health and wellbeing that amplifies health-positive narratives (e.g. feats of endurance, strength and achievement) at the expense of those that may exhibit vulnerability or a degree of organisational dependency. For individual leaders, then, there seems to be an important reflection here about how they engage with health narratives in the workplace, and the impact these may have not only on their direct reports but also on the establishment of cultural norms that then also regulate them.

For organisations, this speaks to the importance of creating workplace cultures that enable leaders to feel supported enough to be open about their vulnerabilities in ways that reduce the stigmas associated with their health challenges. A greater degree of openness may be beneficial for individuals because the effort of concealing a stigma can lead 'to an inner turmoil that is remarkable for its intensity and its capacity for absorbing an individual's mental life' (Smart & Wegner, 2000, p. 221). This is likely to have positive effects for organisations too, because a greater transparency of leader impairment allows for better interim planning arrangements to be made (including succession planning where an illness is serious) prior to a crisis emerging. Further, because of the influential role senior leaders have in organisations, encouraging a more supportive culture is critical to reducing stigmas surrounding health-challenges for all organisational members.

8.2.3 Limitations and Future Research

As a single case study, this research offers an in-depth exploration of health, embodiment and leadership within a specific organisational context. However, while a single case study is very useful to explicate relatively new phenomenon in hard to reach groups such as elites (Baker et al., 2012), it also has its limitations in terms of comparison and generalisability. Future qualitative research may therefore explore cohorts of executives from different organisations and countries, in order to better understand the significance of factors

such as organisational or national cultures on the perceptions and experiences of this embodied dimension of executive health.

This research was further constrained by the disproportionate representation of men in the study (69 per cent), which reflects the much broader issue of inequality in leadership across the corporate world (McKinsey & Company, 2018). Although efforts were made to compensate for this differential at the time of recruitment by including a greater number of lower level executives, future research may benefit from a more targeted strategy to increase female participation. That being said, the study did not identify substantive gendered differences in male and female discourses when it came to issues such as illness disclosure, help-seeking, or perceptions of weight stigma. This may in part be explained by the highly masculinised style of leadership that corporate culture demands (Appelbaum et al., 2003), and/or the reluctance of women to avoid the stigma of the double bind in which the expression of traditional feminine traits is interpreted as women lacking the requisite credentials for leadership (Eagly, 2007). Future research may explore the gendered distinctions, or reasons for their absence, in a more fine-grained analysis of the discourses associated with stigma as it pertains to embodied leadership.

The focus of this research has been on particular embodied dimensions of leader health, i.e., fitness, fatness, and sickness, but there are a number of other dimensions that could make interesting avenues for future research. For instance, this study has explored sickness in the context of serious illnesses that have imposed some degree of impairment to the usual productive capacities of leaders. However, the issue of disability has largely been ignored in leadership studies (Roulstone & Williams, 2014), and research in this area has the potential to make a powerful contribution to this domain, particularly in understanding the stigma experience of disabled leaders. One foreseeable issue that may be problematic is the identification of a sizeable population of senior disabled leaders, however, this may be overcome by a methodological approach that preferences in-depth case studies of individuals over larger sample sizes.

Additionally, as chronic illness becomes a more pervasive issue in society and therefore a more common concern with which organisations must contend (The Australian Institute of Health and Welfare, 2009), future research could specifically explore the experiences of chronic conditions by leaders. This has been explored to some degree by scholars examining subjects such as illness disclosure in the workplace, although it has been predominantly focussed on lower level employees (Beatty & Joffe, 2006; Beatty & Kirby, 2006; Charmaz, 2010).

Exploring this issue within the ranks of senior leadership, is likely to bring the ubiquitousness of illness stigma into sharper relief, and provide a more profound insight into how leaders are managing their conditions in the workplace.

Finally, and although it has been touched on briefly in this study, there is further scope to understand the impact of ageing on the embodied dimensions of leadership and health. There is a sizeable critical literature on the discourses of ageing which has been concerned with critiquing assumptions about older workers, in particular, their failure to live up to the idealised embodiment of the continuously productive employee (Ainsworth & Hardy, 2009; Moulaert & Biggs, 2013; Rudman & Molke, 2009; Scheuer & Mills, 2017). Given the reality that most senior leaders are commonly middle-aged or older, exploring research at the intersection of 'successful ageing' (Hales & Riach, 2017; Katz & Calasanti, 2014; Zacher, 2015), and the discrimination of the ageing body in the workplace (Biggs & Kimberley, 2013; Spedale et al., 2014), this would have the potential to make an important contribution to the study of leader embodiment and health.

8.2.4 Personal Reflection

Academia is a strange place in which to pursue a PhD about the body, or perhaps this is a more accurate reflection of being housed in a faculty of business and economics. A lot of academics appear to have forgotten that they actually *have* a body; there are a lot of oversized, pulsating heads wandering down corridors with long-forsaken bodies wildly scrambling to keep up. Of course, this is a well-worn stereotype (however apt it may be) and there are indeed some academics who seem a little more at ease with the physical mass that exists below their neck. There are even some who have kept up with the modern times and enthusiastically attire themselves in all the fitness measuring accoutrements of the worried well (after all, if you can't measure it, it ain't real).

When I began this PhD back in 2014, I unashamedly admit to being an accidental tourist stumbling my way through a midlife (crisis) tour of academia. My original research proposal was born from a chance encounter with a PhD scholarship advertisement and a vague idea that I thought might guide me towards a career transition – or at least fill in some time as I frittered away some of my working years. All I knew was that I had some questions about the way people occupied their bodies: why some people worshipped them, why others ignored them, and why for some – like myself – their body never 'shut the hell up', and was always a constant reminder of one's limitations of being in the world.

The focus on leaders' bodies was a no brainer for me, not least because I found myself working in a centre for leadership studies. But also because I have never understood peoples' deference to those in positions of power, as if leadership status itself confers some kind of superiority. I cannot claim the convict origins of many of my fellow Australians, but I do share their scepticism and ambivalence to those in positions of authority. I have studied organisational dynamics, worked for leaders, and I have been in leadership positions myself, so I am well aware of the hallowed status that leadership can engender in organisations and individuals. But I was curious to come to a more informed understanding of the body's role in setting leaders apart from the rest of us, and, moreover, the ways it can bridge that gap when its fragility is revealed.

Staking a claim at the intersection of leadership, embodiment and health reflected a merging of many previous worlds I had occupied, so it was fortunate for me that this was terrain in which few other management academics seemed terribly interested. Previous studies of athletic bodies in leadership attuned my eye to the way critical scholars were engaging with discourses of masculinity, power, and bodily mastery, and opened up the possibility to explore the nuances that might live in these spaces. Sitting at the opposite pole, the experience of illness did not seem to be something that had been commonly associated with leaders, as if it conjured imagery too destabilising for one to contemplate. So, this seemed like a potentially rich vein to tap and I spent many months trying to navigate how best to do this in ways that would not close doors before they were even slightly ajar.

It took over twelve months to gain access to an organisation with a large enough pool of executives with which I could explore this subject matter. Once the door had finally opened, I was astounded by the openness of my participants to reveal their innermost workings. Apart from one participant who only turned up because he thought the interview was 'compulsory', most executives seemed relieved to have an opportunity for reflection. I discovered that the good thing about interviewing people in positions of power is that they generally like to talk about themselves because they have an unfailing certainty that their views are worthy of an audience. All one needs to do as the researcher is hold the space. Naturally, there is the usual amount of performance, bravado, posturing, manipulation, and diversion to navigate, but it's not so hard to work with this if you armed with the following: 1) a reasonable bullshit detector, and most importantly 2) an absence of any desire to judge the person in front of you.

I owe these individuals a great debt and I hope what I have created with their thoughts, and with my own observation of their worlds, does their contributions some justice. Moreover,

I would like to think that despite my irreverence for leadership as a construct worthy of its own industry, I have managed to find a way to make a contribution to this field. I hope this work at least becomes part of a conversation that moves us somewhere beyond the extremes of glorification and cynicism about leaders and about leadership. Because if there is a time when the world needs its leaders to step up and reveal themselves, surely that time is now.

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Appendices

Appendix 1: Executive Health & Wellbeing Survey

Are you planning to participate in the 2016 annual health screening for executives?

#	Answer	Bar	Response	%
1	Yes		25	78.13%
2	No		2	6.25%
3	Unsure		5	15.63%
	Total		32	100.00%

Which of the following reason(s) best describes your decision to participate in Optus' executive health and wellbeing annual health check? (you may select more that one option, if required)

#	Answer	Bar	Response	%
1	My health and wellbeing is very important to me		24	96.00%
2	It's important that my peers/staff see that I take my health seriously		3	12.00%
3	I have specific health concerns I would like to address		1	4.00%
4	My boss does it so I do too		0	0.00%
5	I haven't participated before so I thought I would give it a go		5	20.00%
6	I'm curious about the services offerred by the new provider		3	12.00%
7	Other		2	8.00%
	Total		38	100.00%

Other
Not a specific healh concern (yet) but recognise issues in family history with heart etc
It appears I've been opted in

Appendix 1: cont'd

Which of the following reason(s) best describes your decision to not participate OR be uncertain about participating in Optus' executive health and wellbeing annual health check? (you may select more that one option, if required)

#	Answer	Bar	Response	%
1	My health is a personal matter		2	33.33%
2	I have my own health providers and prefer to use their services		0	0.00%
3	I'd prefer not to know if there is anything wrong with me		0	0.00%
4	I don't have time, I'm too busy		1	16.67%
5	I don't like the provider and/or the services on offer		0	0.00%
6	I'm concerned about how my personal health information may be used		2	33.33%
7	I don't think that my physical health and wellbeing has any bearing on my work		0	0.00%
8	I feel fit and healthy and don't need this service		0	0.00%
9	Other (please specify)		4	66.67%
	Total		9	100.00%

Other (please specify)
Had an Optus health check late last year
Not sure if this is the same as the Exec Health Management check I get done annually. If it's different, then why do I need to do both?
I know what the outcomes will be
Not clear what specific tests are involved or information collected

Appendix 1: cont'd

Which of the following, if any, might encourage you to participate in the annual health check for executives? (you may select more than one option, if required)

#	Answer	Bar	Response	%
1	Changing to a new provider		0	0.00%
2	Making the location of the health check more convenient		1	16.67%
3	Offering different diagnostic services and referral options (please specify)		1	16.67%
4	Shortening the annual health check from 3 hours to 2 hours		1	16.67%
5	Being encouraged to participate by my manager		0	0.00%
6	Making a small donation to a charity of my choosing		0	0.00%
7	None of the above, I am unlikely to participate in the annual health check		0	0.00%
8	Other (please specify)		5	83.33%
	Total		8	100.00%

Offering different diagnostic services and referral options (please specify)	Other (please specify)
	I will participate next year - it is only 6 months since my last heath check
	Greater clarity on what is the difference between what I've had in the past and what is being offered going
	losing weight
	Knowing in advance what specific tests and/or info is collected

Appendix 2: Plain Language Statement

THE UNIVERSITY OF MELBOURNE

Plain Language Statement – For Executive Leaders

When bodies fail -
A study of physical illness in executive leadership

Dear Sir or Madam,

We invite you to take part in a PhD study being conducted by The University of Melbourne, Faculty of Business and Economics. This study explores health and wellbeing in organisations with an emphasis on understanding executive leader experiences of physical illness. The primary aim of the research is to explore how the experience of physical illness affects the way executives view themselves as leaders, and how illness impacts their practice of leadership.

You are invited to participate in up to 2 interviews of 60-90 minutes duration, which will explore your perspectives on how the experience of physical illness has influenced your role as an organisational leader. These interviews will be audio-recorded, and the interviewer will take written notes during the interview. Participation in this interview is voluntary, and you may withdraw at any time without explanation or prejudice, and you can withdraw any unprocessed responses. As part of the study, some general observation will also be undertaken to provide an understanding of the broader organisational context. It is anticipated that participation in the study will involve up to 3 hours of your time.

ALL INFORMATION WILL BE TREATED IN THE STRICTEST CONFIDENCE

We ask you to please confirm your agreement to participate in this study by signing and returning the attached consent form in person or via email to: peter.ghin@unimelb.edu.au. Please be assured that all information you may provide will be strictly confidential, subject to legal restrictions. Any personal information collected will be used for coding purposes only, but as the sample size is small, there may be a risk of some responses being identifiable. The researchers will ensure that this risk is minimised by separating any information identifying you or your organization, and storing these items separately, and by using pseudonyms to disguise participant details. Only the researchers involved in the project will have access to the interview transcripts, and all information will be stored in compliance with The University of Melbourne guidelines for a minimum period of FIVE years after publication, before being destroyed. The results of this study will be examined and presented at an aggregate level only. We will present the results of this study in academic journals and reports.

For more information, you may contact the PhD researcher at The University of Melbourne, Peter Ghin (03) 8344 1219. This project has received clearance from the Human Research Ethics Committee HREC no. 1544651.1. If you have any concerns about the conduct of this project, please contact the Executive Officer, Human Research Ethics, The University of Melbourne, ph: (03) 8344 2073, fax: (03) 9347 6739.

Appendix 3: Consent Form

DEPARTMENT OF MANAGEMENT AND MARKETING

Consent form for participating in the following project:

PROJECT TITLE: **A STUDY OF EXECUTIVE HEALTH AND WELLBEING: AN EMBODIED PERSPECTIVE**
PROJECT No: **1544651.1**

Name of participant: _____

Name of investigator(s): _____

1. **I consent to participate in this project, the details of which have been explained to me, and I have been provided with a written plain language statement to keep.**

2. **I understand that after I sign and return this consent form it will be retained by the researcher.**

3. **I understand that my participation will involve an *interview and observation* and I agree that the researcher may use the results as described in the plain language statement.**

4. **I acknowledge that:**

   (a) the possible effects of participating in the *interview and observation* have been explained to my satisfaction;

   (b) I have been informed that I am free to withdraw from the project at any time without explanation or prejudice and to withdraw any unprocessed data I have provided;

   (c) the project is for the purpose of research;

   (d) I have been informed that the confidentiality of the information I provide will be safeguarded subject to any legal requirements;

   (e) I have been informed that with my consent the *interview will be audio-recorded and I understand that audio-recordings* will be stored at University of Melbourne and will be destroyed five years after publication;

   (f) my name will be referred to by a pseudonym in any publications arising from the research;

   (g) I have been informed that a copy of the research findings will be forwarded to me, should I agree to this.

I consent to this *interview* being audio-recorded ☐ yes ☐ no (please tick)

I wish to receive a copy of the summary project report on research findings ☐ yes ☐ no (please tick)

Participant signature: _____ Date: _____

Appendix 4: Interview Guide

ETHICS ID #: 1544651.1
PROJECT TITLE: A study of executive health: An embodied perspective

Initial Open-ended Questions

1. Could you tell me a little bit about your role in the organisation and how long you have worked here?
2. Could you describe a typical day in your position as -------- ?
3. How would you describe the way you approach your work and meeting the responsibilities of your role?
4. What are the qualities that you view as essential for someone who occupies a leadership role such as your own?
5. How do you think others perceive you as a leader?

Intermediate Questions

6. Could you talk about the strategies you employ to manage the stresses associated managing your workload?
7. Have you taken part in any of the health and wellbeing activities offered by your organisation? If yes, could you talk a little about your experience of this and what prompted you to take part? If no, why do you think this is?
8. Can you tell me about your impression of your organisation's health and wellbeing policies?
9. How do you view a leaders' role with respect to health and wellbeing in an organisation?

Closing Questions

10. In your time as an executive, have you experienced changes in your physical ability that required specific management? (e.g. illness, injury etc.) If yes, could you talk a little more about how you managed this experience/experiences?
11. In your opinion, how does you physical health and wellbeing affect the way you lead?
12. Is there anything you might not have thought about before that has occurred to you during this interview?
13. Is there anything you would like to ask me about the research?