

THE POSSIBILITY OF HEALTHY ORGANIZATIONS: TOWARD A NEW FRAMEWORK FOR ORGANIZATIONAL THEORY AND PRACTICE

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ABSTRACT

The fields of organizational sociology and organizational development contain considerable literature dealing with organizational effectiveness, but little that focuses explicitly on organizational health. This paper clarifies the notion of “healthy organizations” and describes how it needs to be fed by practice, so that social scientists do not build theories that are unrelated to the reality that people experience in organizations today. This delineation of “organizational health” as an arena of inquiry is built on the definition of health developed by the World Health Organization, and on the writing of behavioral scientists (Argyris, Bruhn, Cooley, Etzioni, Kilburg, Levinson, Sorokin, and Whyte) and non-traditional thinkers and practitioners (G.I. Gurdjieff, Oscar Ichazo, Charles G. Krone, Moshe Feldenkrais, and Tenzin Gyatso, the 14th Dalai Lama). Sociological practice can contribute significantly to the creation of “organizations of the future” (Argyris, 1973) in which a state of reciprocal maintenance (Bennett, 1976) exists between individuals and organizations. “Reciprocal maintenance” means that neither partner seeks to take advantage of the other: the organizations are designed to enable the growth and development of their members or workers (in the broadest sense, including managers) and the individuals do their best to enhance the organization’s long-term viability. I define as “healthy” those organizations that foster such reciprocal maintenance while creating an organizational culture in which people have more influence and control over the decisions that affect their lives.

MY RESEARCH AND PRACTICE

For me, the uniqueness of sociology lies in the fact that it both studies society and endeavors to improve it. This is what attracted me to the discipline thirty years ago, and it continues to challenge me today. From this standpoint, sociology is inherently an applied science whose leading figures have always been interested in both of these elements.

Journal of Applied Sociology/Sociological Practice, Vol. 21 No. 2/ Vol. 6 No. 2, Fall 2004: 57-79. © Society for Applied Sociology and the Sociological Practice Association

I chose to focus on organizations because people spend most of their lives in them. Since the 1970s I have suspected that fostering the development of healthier organizations could have a huge impact on people's lives. Many of us work in them (occupying a period of time equivalent to one-third of our lives), and everyone interacts with large organizations in significant ways: as customers in the health care system, students and parents of children in schools, and as citizens impacted by city, county, state, and federal governments. I continue to believe that were our experience in these portions of our lives conducive to positive human relations, to a sense of self-worth, and to mutual respect, it would be a powerful force for positive change in the world.

Most people learn about organizations as they do about families: from their real-life experience of them, not from what is written or known in the scholarly world. This means that the organizations that affect large portions of the population have a tremendous impact on people's ideas about what an organization is, what it can or cannot be, and the extent to which they constitute a force for good or ill. Unfortunately, many organizational leaders do not grasp the impact of their organization on the state of mind of those working within it or doing business with it, nor have they been taught about how much their own state of mind influences the resilience and performance of the organization. Often those who care more about such "soft issues" are not viewed as "tough enough" to be selected to be CEO, although there are scattered anecdotal stories of people who are able both to grow a business successfully and to nourish people (Roach, 2000; Abrashoff, 2002).

I have been exploring the interaction of culture, personal development, and organizational change in my practice and research since my doctoral dissertation in the late 1970s. My focus has been consistent over time. I have studied and consulted in the context of seeing whether sociological practice can contribute significantly to the creation of "organizations of the future" (Argyris, 1973) in which there is a state of reciprocal maintenance (Bennett, 1987) between individuals and organizations. I prefer the phrase "reciprocal nourishment," which is the terminology I will use here. It means that neither partner seeks to take advantage of the other: organizations are designed to enable the growth and development of their members or workers (in the broadest sense, including managers), and individuals do their best to enhance the organization's long-term viability.

I see this approach as being substantively different from the direction that our society has taken over the past few decades. Increasingly, the current popular perception is one of mistrust: there is a widespread sense that one can't trust people, corporations, or the government. It is argued that one should take all one

can and give back as little as possible (Bruhn, 2001). This trend erodes the social capital of a society (Fukuyama, 1999); and it is a particularly intriguing phenomenon in a context in which both sides of the political spectrum emphasize the importance of so-called "family values." The increasingly explicit focus on such "values" seems to correlate negatively with their presence in the organizational world -- a presence that would be an important foundation for learning and action within any society. If one considers Argyris' (1958, 1994, 1998) work on explicit and implicit values in the context of organizational health, combined with Etzioni's (1968) model for movement toward an "active society," such a growing rift would be a distinctively unhealthy trend at the macrosocietal level.

A key question with regard to organizational health is whether it makes a difference to create organizational cultures in which people have more influence and even control over the decisions that affect their lives. This concept has been important throughout the evolution of the profession of Organizational Development. Argyris' pioneering work (1964) pointed to research indicating that levels of apathy, noninvolvement, gold-bricking, illness, and accidents changed as workers were given more opportunity to control their daily activities. Most of the research and practice in the arena of socio-technical systems redesign is grounded in this assumption (Emery, 1969; Hackman and Oldham, 1980; Zell, 1997). And I have conducted research and have established a consulting practice to address this question.

My doctoral research (1979) explored whether students' sense of control over their lives would be impacted by studying in a relatively responsive college environment, as contrasted with studying in one that was relatively unresponsive. The results indicated that students tend to become more autonomous in a college that provides a responsive, relatively open-system environment than in one that is substantially more closed. My interests then moved on to specific areas of practice, including team and executive development and system-wide change. I have worked as an internal consultant for a very large international company and as an external consultant to over 200 executives in both corporations and non-profits. In this work, I have always sought to further the development of healthy organizations -- of which organizational culture is a key element. It has long seemed to me that there is a complex interaction among the quality of personal development of the leaders, the culture within which they attempt to act, and the short and long-term health of the organization. Recently I have been exploring this through consulting projects in which I partnered with executives to shift small organizations toward a healthier culture through interventions with the

leadership teams. I have also created and am leading a graduate research seminar on organizational health and leadership development.

My focus here is on the question of what is meant by “healthy organizations” and how such theoretical developments need to be fed by practice. Lacking the practice component, social scientists are likely to build theories that are unrelated to the reality that people experience in organizations today. I have not attempted to delve into the physiological processes by which organizational environments may be related to specific etiologies and patterns of illness, as Moss did (1973). Although this is an intriguing arena for study, it would take me out the realm of my expertise and practice.

DEFINING ORGANIZATIONAL HEALTH – CORE ELEMENTS

A considerable body of literature exists on organizational effectiveness; but there are relatively few articles or books that focus explicitly on organizational health.¹ Scholars in the new field of “positive organizational studies” are now addressing “the dynamics leading to exceptional individual and organizational performance” and “the ways in which organizations and their members flourish and prosper in especially favorable ways” (Cameron and Caza, 2004: 731). However, they have not cited the literature on organizational health, nor have they discussed this construct. These researchers are investigating exceptional organizational performance, but they have not done so in relation to the underlying notion of creating healthy organizations. I believe this to be an unfortunate gap in this new field, as it neglects important existing scholarship.

I find Bruhn’s (2001) approach the most relevant to my practice. He based an extensive exploration of the topic on the definition developed by the World Health Organization (WHO). That is, health is a state of physical, mental, and social well-being and not merely the absence of disease (Bruhn, 2001). As Bruhn applies this to the health of an organization:

- *body* refers to the structure, organizational design, uses of power, communication processes, and distribution of work;
- *Mind* refers to how underlying beliefs, goals, policies, and procedures are implemented, “how conflict is handled, how change is managed, how members are treated, and how the organization learns”;
- *Spirit* “is the core or heart of an organization ...what makes it vibrant, and gives it vigor. It is measurable by observation” (Bruhn, 2001: 147).

Improvement or decline in health is something that can be monitored via the behavior of the people within the organization: it resides primarily in the state of relationships among them. Thus, in addition to health being physical, mental, and social, I propose that we place it in a framework of social connectivity and

mutuality. Recent doctoral research (Geller, 2004) has explored this arena and has proposed a model for developing ethical leaders for multinational corporations. In the context of today's highly matrixed organizations and complex world, these leaders require "agile and integrated responses to rapidly changing economic, social and political situations" (Geller, 2004: 11). Geller describes the "leader acting from an ethic of care" as one who learns from personal reflection to "foster a communal spirit and focus on the collaborative nature of experience." The leader "works through others to identify the complexity of situations" in "light of longer term implications for the shared and greater good." As valuable as are the leaders who can transform organizations for short-term success, those who truly work for the good of all in a long-term context are even more rare.

In my experience, an organizational culture cannot be healthy when each person and group is "out for itself" (see also Bruhn, 2001). I am familiar with three well-developed frameworks that offer viable ways to address this underlying issue at both conceptual and pragmatic levels:

- Bennett's (1987) concept of reciprocal maintenance, which I call "reciprocal nourishment,"
- The Tibetan Buddhist concept of universal responsibility (*chi sem*), as described by Tenzin Gyatso, the 14th Dalai Lama (1999), within the context of dependent origination (*ten del*);
- Sorokin's studies of altruism and his impact on the field of sociology (Weinstein, 2000).

All of these are systemic frameworks that come from widely different bodies of thought, yet seem to be similar in their insights into the sources and implications of human behavior.

Reciprocal nourishment is a systems concept that states that a system is only healthy if the parts are nourishing one another: that the system as a whole thrives when its components seek to benefit one another and the whole. Tibetan Buddhist literature has similar concepts, developed over many centuries, which offer a thoroughly-developed theoretical body of work in which Western notions of individualism, competition, and even "self" are profoundly challenged. The extensive literature that is only recently becoming widely available in translation provides a well-developed conceptual system for re-framing human motivation and behavior. Notions like dependent origination, *bodhicitta*, and emptiness offer a complex theoretical basis for an entirely different perspective on healthy human behavior – one that encourages interdependence and "universal responsibility" (Goldman Schuyler, 2004b). *Chi sem* is translated by the Dalai Lama as

... universal responsibility. This may not be an exact translation of the Tibetan term I have in mind, *chi sem*, which means, literally, universal (chi) consciousness (sem). ... To develop a sense of universal responsibility – of the universal dimension of our every act and of the equal right of all others to happiness and not to suffer – is to develop an attitude of mind whereby, when we see an opportunity to benefit others, we will take it in preference to merely looking after our own narrow interests. ... An important part of developing such a sense of universal responsibility is that it helps us become sensitive to all others – not just those closest to us. We come to see the need to care for those members of the human family who suffer most. We recognize the need to avoid causing divisiveness among our fellow human beings (1999: 161-163).

Within Buddhism, such universal responsibility is grounded in the development of a mental state and orientation of altruism, whereby compassionate thought and action is the source of all happiness. This has to be viewed within the context of “dependent origination” (*ten del*), which has been articulated over a number of centuries in the Madhyamika (Middle Way) school of Buddhist philosophy. It is a Buddhist statement of the systemic nature of all life and concepts, implying that nothing has just one cause, that all things are systems composed of other systems, and that all of these parts and wholes exist in interdependence with one another.

The Dalai Lama has personally moved from the isolated Tibetan world into the post-modern world as a political and spiritual leader with a deep interest in science. He has convened numerous dialogues with scientists to help forge bridges between what were previously two very distinct frames of reference: Western science and Tibetan Buddhism. This has been done extensively with reference to physics, neuroscience, and psychology. However, such dialogues have not yet taken place in sociology, nor have they influenced the discipline. I see great potential for building on the Tibetan insights as a way of questioning the assumptions that have long been considered to be “facts of life” with regard to organizational effectiveness and change. I refer here to such assumptions as change is difficult, resistance is natural, and change occurs via a process of unfreezing and refreezing of organizational forms and procedures.

Sociologists have pursued research on altruism since P. A. Sorokin established the Harvard University Research Center in Altruistic Integration and Creativity in 1949 (Weinstein, 2000). But this has not been a central trend within the field. Students of human behavior would do well to revisit both Sorokin’s research and more recent research on altruism in order to re-frame basic notions

of what is core in human motivation and functioning. This may provide a way to counter the view that “science shows us” that human nature is fundamentally egotistical. From Sorokin’s perspective (quoted in Weinstein, 2000: 87), “The natural man as a purely egoistic person is a fiction invented by modern pseudo science. It confuses egoism due to the specific traits of sensate culture with man’s inherent nature....” Sorokin created his Center to foster scientific studies of “positive types of social phenomena” as an antidote to the negative phenomena dominating late sensate cultures (Weinstein, 2000:88).

A review of this research might well be done in relation to Tibetan Buddhist philosophy. It might help us to extrapolate a new model for organizational health, grounded in altruism (bodhicitta) and adaptive living systems theory (dependent origination). It might also encourage exploration of the value of the notion of emptiness for our approach to change (in contrast to the unquestioning belief in the omnipresence of resistance).

Interestingly, there seems to be a contrast between one of the most important facets of the way Tibetan Buddhism views altruism and the Western perception of it. Consider Kristen R. Monroe’s (1996: 6) definition: “Altruism [is] behavior intended to benefit another, even when this risks possible sacrifice to the welfare of the actor” (cited in Weinstein, 2000: 90). Although this may be accurate in any frame of reference -- that is, the actor may be “objectively” harmed, it is not an especially core statement in the Tibetan Buddhist frame of reference. From this perspective, most thoroughly outlined by Shantideva (1997) in the eighth century, what is important is that acting for others’ benefit is the only way to generate one’s own sense of inner peace.

This phenomenon has been further described by many other Tibetan and Western authors who were deeply trained in the Tibetan traditions on altruism. It is also consistent with medical research on stress, as reported by Frost and Robinson (1999: 102). They described research, documented in the *Journal of Advancement in Medicine*, which showed that levels of Immunoglobulin A (IgA) were sharply impacted by remembering feelings of either anger or compassion. Experimental results indicated that subjects who remembered anger for a 5-minute period had lowered IgA levels for five hours, whereas those who remembered compassion had raised levels for six hours.

The Dalai Lama has said repeatedly that compassion actually helps the compassionate person as much or more than those s/he might be helping: the Frost and Robinson study demonstrates how this might be verified at a physiological level. Similarly, EEG measures of brain changes in an experienced practitioner of specific types of Tibetan Buddhist meditation showed that “the very act of concern for others’ well-being... creates a state of well-being within

oneself" (Goleman, 2003: 12). Although research studies of this phenomenon are relatively rare, there is increasing evidence that one feels well and peaceful only when one's focus is sufficiently wide to include others (Goleman, 2003).

As the Dalai Lama described this phenomenon in relation to the objective hardships he and all Tibetans had to endure after the takeover of the country by the Chinese in the 1950s:

During the course of my life, I have had to handle enormous difficulties and responsibilities. At sixteen, I lost my freedom when Tibet was occupied. At twenty-four, I lost my country itself when I came into exile. For forty years now I have lived as a refugee in a foreign country.... Meanwhile, our homeland has known immeasurable destruction and suffering, and of course, I have lost not only my mother and other close family members, but also dear friends. Yet for all this, although I certainly feel sad when I think about these losses, still so far as my basic serenity is concerned, on most days I am calm and contented. ... I have no difficulty in saying that I am happy. ... I attribute my sense of peace to the effort to develop concern for others. (Gyatso, 1999: 53-55)

He described how this has been also true for the approximately 80,000 Tibetans who went into exile at the same time. Other teachers who remained in Tibet through the period of the Cultural Revolution and who endured years of physical torture have made similar comments (Ribur Rinpoche, 1999).

One might look to George Vaillant's (2000) work at Harvard on developing metrics for positive mental health, including altruism, in order to develop a complete perspective on these questions. The recent interest in the behavioral sciences in "positive organizational scholarship" also attests to the increasing awareness among organizational scholars and leaders of the importance of altruism and reciprocal nourishment. Nevertheless, research in this new field does not address these concepts or the authors whose work I regard as seminal in the area of organizational health (Cameron, Dutton, and Quinn, 2003; Cameron and Caza, 2004).

Finally, at a simple level that is unfortunately easy to ignore, it is important to notice that what makes an organization healthy from the perspective of its participants may be entirely unintended by its leadership and often unrecognized. There is often a person who has no formal power within the organization who takes on an informal role of making it seem welcoming and sustaining that "feel." In my personal experience, I have seen this take place spontaneously in two organizations, in which one person's role went totally unrecognized by the leadership, yet for a significant time period that person made a substantial difference in the experience of many participants. Did their warmth and inclusion

of others “actually” make the organization healthier? Not in terms of the health of its processes and structures, but it clearly made a difference in people’s experience of what it felt like to participate in it.

To make this concrete: At my university, a woman named Doris started a delicatessen many years ago, and gave it the “California” name of the “Psychedeli.” She passed away recently, after years of struggling with cancer, and a memorial ceremony was held in the deli. I learned that for great many members of staff and faculty, as well as students, Doris alone, on her own, had been the force for friendliness and warmth at the school. All of her customers reported that she had offered to hold their favorite sandwich for them, so one would be there when they wanted it, or had set a few cookies aside for the same reason. She seemed to know the likes and wishes of a large number of people and to grant them. This made the school a warmer, more supportive place than it would otherwise have been. This was not her “role,” certainly not part of any job description, and not even acknowledged to be needed in any formal way by anyone or any formal body; yet it clearly impacted how people felt working and studying there. I am convinced that this type of phenomenon is important within many organizations, yet is not acknowledged as such, either practically by the leadership or by scholars of this field.

ORGANIZATIONAL HEALTH IN THE BEHAVIORAL SCIENCES

From his early writing in the late 1950s to the present day, Chris Argyris has explored the relationship between individual thinking, learning, and organizational effectiveness. His (1958) study of a purportedly “healthy” plant is the earliest discussion I have discovered of “organizational health.” Published in the *Harvard Business Review*, it showed that the presence of traditional indicators of organizational health (“low turnover, low absenteeism, adequate production, high loyalty, positive feelings about management by the employees and vice versa” Argyris, 1958: 109) might not provide an adequate basis for diagnosing it as a healthy system. In his articles and books (Argyris, 1962; 1964), he proceeded to develop a theoretical basis for understanding psychologically healthy individuals and carried out research to show that such persons would be more, not less, likely to demonstrate behavior such as absenteeism and leaving jobs.

His theoretical models postulated that psychologically mature individuals “in our culture, tend to need to be relatively independent, to be responsible about and involved in their activities, to seek challenging creative work, to aspire to higher positions, and to be active and utilize many of their abilities” (Argyris, 1958: 111). From his perspective, rather than being healthy, the plant in question

demonstrated that the typical factory management system of the day fostered alienation or else demanded psychological immaturity in its employees. As he wrote: "It is as if the employee says to himself: 'I want to be a healthy, creative human being. I cannot be and still produce what I am required to produce. Therefore, I will say to hell with my total personality and place the major emphasis on money'" (Argyris, 1958: 116). He anticipated harmful effects on both organizations and society from such trends.

Amitai Etzioni's work on the *Active Society* (1968) is valuable for our thinking about organizational health, although he does not speak of it explicitly. As he characterized his notion of an "active society," it was to be one that effectively used the technology at hand in service of its fundamental values. This refers especially to the technologies of communication that create such an interconnected planet. When he described what would be involved in building a theory of macro-action, he also turned to the metaphor of the human body, as did WHO and Bruhn in defining health. He described the foundations of a theory of macro-action as:

1. cybernetics, the study of steering – "social mind and nerves"
2. a study of collectivities, societies, and their bonds – the forces that limit societal steering and provide the materials it guides – "social bone structure"
3. power – "social muscles" (Etzioni, 1986:viii).

In this context, an active society would be an extension of organizational health to the societal level. A healthy society would be one in which the community (a) is capable of transforming itself, (b) has the values, processes, and structures in place for ongoing self-monitoring and self-renewal, and (c) possesses what Etzioni (1968: 7) called an effective "controlling overlayer." It would also be one that is open to the rest of the world, rather than being closed off. "No society is further from active than one whose structure is imposed on its members and that must build a wall or a war between itself and the outside world to maintain its stronghold" (13). Although it does not seem as though our society has taken significant steps in this direction, I believe it is an important model for us to consider in developing a practical and scholarly approach to organizational health.

Levinson (1972) and Kilburg (2000) developed models for identifying stages in the decline of organizational health, patterning these after their understanding of psychological health in individuals. Kilburg was most explicit in describing a positive state of health. He called it "super resiliency." This

. . . represents a theoretical ideal to which it is hoped that all organizations aspire. These organizations function extremely well, managing

growth and both the tasks of internal organization and external adaptation superbly. ... They are developmentally oriented for both individuals and the entire organization. Performance is terrific on a sustained basis... (Kilburg, 2000: 124).

These organizations use the most advanced methods available from the theory and practice of organizational development. They are “like radiant stars, providing steady nurturance and growth to their members and beacons of excellence to the human community” (Kilburg, 2000: 125). Unfortunately, Kilburg provided no examples; but this concept is very helpful for spelling out a positive vision of organizational health.

Other scholars have chosen to describe health not as a goal, but rather as an ongoing process of metabolizing frustration and difficulty within organizations and individuals (Maslow, 1971; Schein, 2000; Frost and Robinson, 1999). These authors do not consider health or higher levels of development as something that will eliminate problems. Rather, they view health as a state in which, as Schein (2000:36) wrote, “some level of toxicity is normal. That really has to be hammered home rather than thinking of toxicity as abnormal. The body is producing toxins all the time.” If we consider organizational health in this context, developing processes for attention to the balance of toxicity in an organization would be important. Organizations may need ways to rid themselves of toxins without harming those who work within them,

We were taught in high school physics that light is both a wave and a particle. By analogy, organizational health can be both a desired end-state and a more “normal” way of being in which toxicity exists but is processed. Organizational leaders and consultants need to learn how not to serve as the “liver” of the organizations. It cannot be their role to purge the system of its excess toxins – and I think many have taken on such a role unintentionally.

There are not many strong examples of healthy organizations. Much of the writing on positive examples is colored by the desire of leaders to appear more effective than they may have been in fact, and by their economically-driven need to make their companies look well in the popular press. Books on “excellence” (e.g., Peters and Waterman, 1982) use as examples companies that did not continue to thrive. Attempts to reward overall organizational excellence, as with the Baldrige Awards, stimulate a focus on improving quality. Research on winners several years after receiving the Award might be an intriguing way to learn if such projects contribute to long-term health and economic viability.

EXAMPLES OF HEALTHY ORGANIZATIONS

The following two brief case studies exemplify healthy organizations (at least to a limited extent): The cooperatives at Mondragon and the USS Benfold. The research carried out by James C. Collins on visionary companies (Collins, 1994; Collins and Porras, 2001) also provides a possibly fruitful source of companies that might be studied with reference to organizational health.

1. *The cooperatives at Mondragon* Located in the Basque region of Spain, these cooperatives have grown from a small producers' cooperative in 1954 into a financially strong complex that employed over 20,000 people by the early 1990s (Whyte, 1995). "By 1992, the complex had grown to 99 industrial or agro-industrial service cooperatives closely linked with a cooperative bank, a research and development cooperative, and educational cooperatives." (Whyte, 1995: 58) Their products range from stoves and refrigerators to machine tools, furniture, and financial and computer services.

In contrast to most "excellent companies" (Peters and Waterman, 1982), Mondragon has been studied extensively by social scientists, with over 70 books and 60 journal articles published about it. The reason for this interest is that they provide such a compelling example of how workers' cooperatives can be viable over an extended period of time (Whyte, 1999). Whyte believes that its success was largely due to "the quality of leadership the cooperatives have sustained over the years.... Mondragon's leaders are accustomed to working together as a team" (480). Whyte (1995) also described the unique features of the organization's structure and financing that enabled it to be successful. Whyte's work does not delve into the full range of characteristics that comprise organizational health, but Mondragon stands as a significant example of an effective way of organizing production outside of the capitalist model.

2. *The USS Benfold* An intriguing example of a leader who apparently was able to change his view of himself and his role comes from the United States military. Captain Michael D Abrashoff was made commander of a guided missile destroyer, the USS Benfold, in the late 1990s (Abrashoff, 2002). He was able to shift the retention rate from 28 per cent to 100 per cent for the two most critical categories of staff (Abrashoff, 2002: 29), improve the ship's "deployment readiness indicator" from 52 days to 19 days, and save 25 percent of its budget. According to his version of his story, the Captain accomplished this by dramatically re-thinking how he approached leadership. He believed that "most obstacles that limit people's potential are set in motion by the leader and are rooted in his or her own fears, ego needs, and unproductive habits" (4). Abrashoff believed that he transformed people into high-tech experts who were self-confident and able to take action on their own, despite the fact that they had

joined the Navy because they had been left out of the US economy's boom. He took risks and apparently accomplished far more than anyone in the Navy anticipated, with regard to measurable outcomes and to morale.

NON-TRADITIONAL RESOURCES FOR MODELING HEALTH²

In my practice, I have combined concepts from the applied behavioral sciences with those that come from selected visionaries of human development who have influenced my thinking over the years: G.I. Gurdjieff, Oscar Ichazo, Charles G. Krone, Moshe Feldenkrais, and Tenzin Gyatso, the 14th Dalai Lama. I rediscovered the relevance of the work of Levinson, Argyris, Kilburg, and Schein as I attempted to teach and write about organizational health. However, the models I have been using for decades come from my training as a sociologist overlaid by my personal search for practical methods for personal development in a context of societal evolution. I have been drawn toward authors and teachers who had a practical vision for furthering the growth of individuals; and who have done so in a way that enables human society to evolve toward sustainability while nurturing the planet that provides us life.

To most people, these teachers seem to represent quite diverse strains of thinking. Some of these visionaries would acknowledge a degree of interconnection across their ideas and concepts, but I suspect most of their students have not experienced such interconnections. I find that the highly systemic, groundbreaking nature of the thought and methodologies of each reinforce the ideas of the others. By studying and applying the ideas of a particular visionary in some depth, one can better appreciate the richness of the others. Often, we are taught not to pursue other approaches while attempting to immerse oneself in such transformational teachings, but I believe that it can be helpful, rather than harmful, to do so. The key question would be whether one studies them in a way that fosters the actual experience of what they have to offer, or whether one allows the learning to remain abstract and intellectual. Each of these approaches to human behavior and change demands both rigorous thinking and genuine experience in order to be useful.

Gurdjieff was a teacher of wisdom who lived in Europe during the first half of the nineteenth century. His work was connected with many different spiritual traditions, particularly the Sufis. Ichazo founded the Arica Institute in 1972. The Institute is grounded in the notion that the survival of the planet depended upon each person's making a huge jump in consciousness. A visionary, who worked outside of traditional scholarly and spiritual communities, his teaching appears to have been influenced by Sufism, Tibetan Buddhism, and Taoist yoga. It blends spiritual practice with guided self-reflection and dialogue.

Charles Krone is a former Procter and Gamble manager who became an organizational consultant. His thinking and practice were major influences in the development of Open Systems Thinking. He became controversial because of the ways his colleagues applied it in a particular effort at large system change. A consultant for years to major Fortune 500 companies, he incorporated Gurdjieff's thinking via the work of J.G. Bennett. Krone taught internal consultants from many companies in an ongoing series of "Resource Trainings" that met regularly for decades, and continue as of 2004. Moshe Feldenkrais was a physicist and engineer who developed a movement-based way of accelerating learning. He believed that it could impact psychological as well as physical states of being (1972; 1979).

Tenzin Gyatso, the Fourteenth Dalai Lama, brings personal understanding of the wisdom teachings of Tibetan Buddhism to his writings on learning and happiness for the general population (1999). This tradition offers tools for the transformation of thinking, perception, and action that are increasingly acknowledged by science as having the potential to reduce the power of destructive emotions in the workplace (Goleman, 2003).

From these diverse sources, I developed a model for organizational diagnosis and health that I called the "Power Line" (Goldman Schuyler 1994; 2001; Goldman Schuyler and Branagan, 2003). I derived the notions of embedded systems from sociology and the applied behavioral sciences. From my studies of Gurdjieff and Bennett, and training with Krone and the Arica Institute, I gained an understanding of working at the levels of will, energy, and function. This enabled me to incorporate non-traditional concepts into my work with organizational change. At the same time, I retained great respect for the importance of issues impacting such change at the macro-level – often ignored by psychologists and personal change teachers. I developed a "map" of the organizational "field" in which we have to work as change consultants. Such a map should not be confused with the territory itself. But it can be used as a way of conceptualizing the richness of the whole system, while retaining sufficient simplicity to support focused action.

From my studies with Moshe Feldenkrais, I gained a way of working with individuals that provided principles and suggestions for practice in organizational change (Goldman Schuyler, 1998; 2002). Most of these guidelines are also grounded in dynamic systems theory, since Dr. Feldenkrais, who was a physicist and engineer, naturally thought within this context. Because few Feldenkrais teachers (practitioners) work at both the individual and organizational levels, generally the thinking is applied only at the individual level. I have been attempting to extrapolate its implications for broader systems' behavior for some

time, and I am continuing to do so in both my writing and practice with organizations. Some of these implications are:

- Small steps, within one's comfort zone, are the sole path toward transformational learning. This allows for sufficient assimilation and integration of the new learning so that it becomes a natural part of one's approach to life (Goldman, 1998).
- "No limits assumed" is the only viable way to work toward transformation.
- Go where the problem isn't, not where it is, for the greatest learning.
- Variety is a source of strength. Only when there is choice and a large range of possible ways to move or accomplish something can we avoid being stuck in dysfunctional patterns. Similarly, diversity of all types becomes a source of tremendous organizational strength and learning. Diversity in an organization is analogous to variability in human movements.
- Improvement and learning occur through successive approximations: One need not be perfect, nor is it necessary to comprehend entirely the first time. In fact, one cannot do so. This softening of our perfectionist nature enables learning.
- Health is the ability to live one's unavowed dreams (Feldenkrais, 1979). Always allow dreaming; we need new dreams to remain young and vital (Goldman, 1998).

The Dalai Lama presents a rich body of action and writing for our investigation. In leading his country, culture, and religion and having to shift into a position of exile, he has addressed issues that potentially have major implications for many other nationalities and cultures. This is especially important at this challenging time in the evolution of humanity as an interconnected group of cultures. Among the nationalities that have had to face invasion and the occupation of their territory, his (Tibetan) approach is the only one that has not seriously fed further ongoing violence and mass retaliation. Tragically, the Tibetans still do not have their country back after fifty years of suffering. However, the degree to which the culture has been preserved and shared with others across the world is substantial. Many writings that were secret for centuries are now in the public domain. There is a functioning government in exile. And the Dalai Lama, as an individual, has become so recognizable and admired that events at which he will speak are often sold out before the tickets are available to the public. I suspect that the model presented may offer much for

national leaders to consider in relation to similar issues in other parts of the globe, such as the Middle East.

In the meanwhile, his writing and life offer:

- a translation of Buddhism to ethics that is non-sectarian and relevant to all people, not just Buddhists,
- an experience of leadership grounded in compassion, gentleness, and large humor ,
- a way to perceive universal responsibility as a foundation for ethics – namely, that “we recognize the need to avoid causing divisiveness among our fellow human beings.” (Gyatso, 1999: 163).

His presence has inspired countless people to believe that a more meaningful kind of leadership is possible. His impact extends far beyond the Tibetan or Buddhist communities.

Beyond the teachings of the Dalai Lama and the demonstration of leadership that his life offers, there is increasing evidence that the beliefs and practices of Tibetan Buddhism may have relevance for transformational leadership (Goleman, 2003). In a process unrelated to the Dalai Lama’s work, organizational researchers have begun to explore the effect of “virtuousness” on amplifying positive emotions and behavior and buffering the organization from the negative impact of trauma or stress (Cameron, Bright, and Caza, 2004). Through the use of a survey analyzed by linear modeling, these researchers found that “organizational virtuousness is positively and significantly related to organizational performance” (780). These finding held up even under conditions of downsizing, when people typically become negative with a consequent worsening of organizational performance. The researchers found that organizational virtuousness was associated with increased innovation, higher customer retention, reduced voluntary turnover, improved quality, and higher profitability. Although this was an exploratory study, such suggestive data are intriguing.

Neuroscientists have recently undertaken studies that support such initiatives in this field of “positive organizational scholarship.” They have measured the brain function of highly trained Buddhist meditative practitioners using MRI, EEG and MEG neuroimaging techniques and other psychological, neurological, and immunological measures (Houshmand et al., 1999). The findings of this research suggest a phenomenon that some have long suspected: that these practitioners have a powerful positive effect on those around them. The typical pattern that we observe in organizations is that those who are anxious or upset in turn disturb many others. This research suggests that leaders who are more aware and awake may transform those close to them by the qualities of compassion and

awareness that they possess. Unfortunately, the only theoretical conceptualization of the effects of compassion in organizations with which I am familiar did not grasp the energizing aspects of compassion (as understood from the Tibetan Buddhist perspective). Instead, it viewed it as a “complex and potentially time- and energy-consuming process” (Kanov et al., 2004).

IMPLICATIONS FOR THE PROFESSION

What does this help us to understand about sociology as practice, about establishing a professional culture of applying sociology, and about organizational health?

1. By integrating the development of sociological theory and practice, and grounding them in broader arenas of thought, sociology as a field can contribute to important arenas of global social change.

When sociologists engage with major questions of human development, we follow in and build on the traditions of the founding leaders of our field. The founders sought out key questions of their time and place and used sociological thinking and imagination to address these. If we fail to follow this lead, we will remain a profession that many view as focusing on questions about which “everyone” knows already from everyday life. We will fail to bring particular wisdom or expertise to the questions that societies need to address at this time in history.

2. Organizational Health is a concept that could be central to our thinking. It could help us link the individual and systemic levels of functioning. It could provide a language for examining core issues of our society in a global context.

There is an important difference between focusing on “organizational effectiveness” and “organizational health.” “Effectiveness” is a utilitarian concept that addresses the functioning of organizations in relation to their ability to achieve their aims. In contrast, a focus on “health” would encourage scholars and leaders to consider the impacts of organizations on the individuals they affect and on the larger society. These more normative topics are ordinarily ignored, and they do not appear on anyone’s agenda. Recently, the emerging field of “positive organizational scholarship” has addressed parts of this agenda. In this context, I find their choice of the concept of “virtuousness” less useful than it would be if large numbers of scholars were to address questions of “health.” Health seems more fundamental and less a matter of personal definition than does “virtue.”

There are consequences for society when we do not raise these questions. Developing a significant dialogue on organizational health could have both theoretical and practical benefits. Assisting leaders to make their organizations healthier requires models like the Power Line (Goldman Schuyler, 1994; 2003). Such models depict the whole and its inter-relationships, at the micro, meso, and macro levels of functioning. They help leaders to become conscious of the complexity and importance of encouraging mature behavior at the individual level, as emphasized by Argyris in his earlier work.

3. Cognitive knowledge is necessary but not sufficient for effective practice, whether as a leader or as a scholar-practitioner.

By reflecting on the contributions of teachers and practitioners from outside of the traditional behavioral sciences, we see a view of knowledge that regards transformational learning as intrinsically requiring deep personal experience, as well as new information and/or skills. This suggests that those who wish to lead organizations toward health must know something personally about mastering levels of resilience that are higher than those of the general population— if they wish to have such a transformational influence.

Students of organizational development often wonder why successful organizational transformation and the creation of enduring healthy organizations are such rare phenomena. I suggest that “health,” as discussed here, is not easy to achieve, but it is certainly possible. Only if we extend both our conceptualizations and our practice can we foster the growth of healthy organizations and what they can bring to society.

NOTES

An earlier version of this paper was presented at the American Sociological Association Annual Meeting, Atlanta, Georgia, August 2003.

¹ In an earlier article, I described some of the approaches that are discussed in the literature (Goldman Schuyler and Branagan, 2003). This paper is not intended to offer an exhaustive review of others’ writing on this topic, but to delineate my strategy for organizational development, based on a broad range of relevant literature from across the social sciences. There may, in the future, be discussion of organizational health in the new field of “positive organizational studies” (Cameron, Dutton and Quinn, 2003; Cameron and Caza, 2004).

² An earlier version of this section appeared in the *Organization Management Journal* (2004a).

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