

**Actively Caring Leadership Takes Courage:  
*Commitment and Competence are NOT Enough***

*Success is Not Final, and Failure is Not Fatal  
It is Courage that Makes the Difference*

- Winston Churchill

The theme of my ISHN article in April 2000 was empathic leadership. I used the two components of Ken Blanchard's Situational Leadership Model – competence and commitment – to define four different leadership styles. More specifically, four approaches to leadership – coaching, delegating, instructing, and supporting – are determined by a person's level of competence and commitment. One-to-one coaching is needed when a person's competence (or ability to perform the task at hand) is low and when this individual's commitment (or sense of purpose or obligation to perform the task) is also low.

Instructive leadership is needed when competence is low and commitment is high. In contrast, supportive leadership is desirable when the individual knows how to perform the task (high competence), but is bored or unmotivated (low commitment). When people know what to do and are self-accountable, they have high competence and high commitment and don't require direction or support. In this situation, an effective leader delegates.

While Dr. Blanchard uses competence and commitment to define four leadership styles, these words also define qualities of leaders. In other words, effective leaders are both competent and committed regarding the course of action they are leading. However, I believe a third C-word distinguishes exemplary leadership. As I'm sure you're already guessed from the opening quotation by Winston Churchill, I'm talking about *courage*.

**What is Courage?**

*The American Heritage Dictionary* (1991) defines courage as “the state or quality of mind or spirit that enables one to face danger with self-possession, confidence, and resolution”

(p. 333). This denotation is consistent with the two-page description of courage in Wikipedia (<http://en.wikipedia.org/wiki/courage>), except Wikipedia distinguishes between “physical courage” – when confronting physical pain, hardship, or threat of death, versus “moral courage” – in the face of possible shame, embarrassment, or discouragement.

Perhaps leaders with competence and commitment are more likely to show courage than those without these qualities. But a person could have both competence and commitment in a particular situation, but not be courageous. I’ll explain with two authentic safety-related incidents – one dramatic and rare and the other temperate and common.

### **Responding to an Emergency**

In the midst of a safety meeting, Joanne Dean – the safety director of a large construction firm in New Jersey, was notified of a horrendous incident. The operator of an industrial equipment truck with an attached auger was pulled into the auger by the weed mesh under the mulch on which he was standing. The worker had not been standing on the safety platform provided for this task. Without hesitation, Joanne ran to help the bloody victim whose body was severed in half. She assisted the on-site nurse with the AED (Automated External Defibrillator), covered the body parts with a blanket, and stayed at the scene until the local EMS (Emergency Medical Service) and coroner arrived.

It certainly took courage to step up and intervene in this horrible situation. It is likely Joanne’s competence as an emergency-response instructor and her commitment to safety contributed to her propensity to be courageous, but I’m convinced her bravery took more than these two leadership qualities. Indeed, the three safety professionals for the company that hired the construction firm did not intervene. They merely stood at a distance and watched Joanne and

the other responders. I assume these experienced safety professionals have both competence and commitment for their job, but that day they lacked courage.

### **Responding to a Risky Condition**

While waiting in the lobby of a Fortune-500 company, Bob Veazie – safety consultant and former culture-change agent for a Fortune-100 Company – noticed a bothersome at-risk behavior. A maintenance worker had climbed to the top of an 8-foot step-ladder to change a light bulb. Because the ladder was not tall enough for this job, the individual was standing with one foot on the top step of the ladder. A coworker was looking up and talking to the man on the ladder, but was not holding the ladder steady.

Imagining a serious injury from a fall to the hard marble floor of the lobby, Bob walked to the ladder and called to the at-risk individual. Holding the bottom of the ladder, he requested the man to come down because “It doesn’t seem safe to stand on the top of that ladder.” Then he asked whether a taller ladder was available.

Bob showed *moral courage* by interacting with this at-risk stranger in the face of potential embarrassment, public humiliation, or an unpleasant confrontation. Bob’s competence and commitment as a safety trainer and scholar certainly contributed to his inclination to speak up in this situation, but it is clear competence and commitment were not sufficient for the courage he showed. In fact, Bob’s training partner saw the same at-risk behavior, but did not say or do anything about it. And this individual has extensive competence and intense commitment for safety (as a dedicated safety consultant for many years).

### **How Can Courage Be Encouraged?**

While courage reflects a human characteristic distinct from competence and commitment, these qualities of leadership are interdependent in some respects. Specifically, individuals with

greater competence and commitment in a given situation are more likely to demonstrate courage. Thus, one's propensity to show courage under certain circumstances is increased whenever relevant competence or commitment is augmented.

### **Developing Competence**

Behavior-based training increases one's competence at a particular task. This involves: a) describing and demonstrating a desirable behavior or skill set, b) giving specific behavior-based feedback during a participant's role-playing of target behavior(s), c) practicing the desirable behavior(s) with both corrective and supportive feedback, and d) implementing the new competency in real-world situations. Subsequently, when learners have opportunities to teach the skill set to others their perception of competence increases further, along with their personal commitment.

### **Developing Commitment**

Simply put, commitment develops from recognizing the positive consequences gained and the negative consequences avoided when applying one's competence. As my *ISHN* article last month explained, motivation or commitment to do something is determined by the intrinsic and extrinsic consequences of a task, as well as one's personal interpretation of those consequences. While many tasks are performed for expected soon, certain, and significant consequences, we use self-talk to avoid impulsive at-risk behavior and work for long-term goals.

### **Developing Courage**

The moral courage of Joanne Dean and Bob Veazie was due to many factors, and suggests cultivating courage is more complex and less straightforward than developing competence and commitment. For example, Joanne Dean and Bob Veazie are extraverts. They

both gain energy from interacting with people, and are naturally outgoing and inclined to communicate with others.

Another of the Big Five personality traits (as detailed in my *ISHN* contribution for July 2004) that facilitated the courage of Bob and Joanne is conscientiousness. I know each of these individuals very well and it's obvious they each take their safety profession very seriously – on and off the job.

Beyond personality *traits*, certain person *states* increase one's propensity to show safety-relevant courage. In fact, I discussed these states in two of my early *ISHN* articles (January 1992 and January 1993) as evidenced-based precursors to “actively caring.” More specifically, individuals with high self-esteem (“I am valuable”), personal control (“I am in control”), optimism (“I expect the best”), and belongingness (“I am an interdependent team member”) are more likely to go beyond the call of duty and actively care for another person's safety. I have entertained ways to increase these person states in prior *ISHN* articles (see for example, January 1993; April 1995; July 2003; and March 2002). Here it's important to understand that we are predisposed to be courageous in safety-relevant situations by particular person states modifiable by outside forces.

The factors that influence one's propensity to demonstrate actively-caring courage can be subsumed under the general label – culture. My *ISHN* contribution next month will explore cultural factors related to the development and cultivation of courage. At this point, I hope I've made a reasonable case for adding courage to the competence and commitment qualities of effective leaders.

However, this courage component may reflect more than leadership. Perhaps the terms “hero” and “heroine” are more appropriate. In fact, the dictionary definitions for these labels

denote the hero and heroine as individuals “noted for feats of courage or nobility of purpose” (p. 608). Perhaps we should be calling for more heroism than leadership in industrial safety and health.

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