Courage and Culture:
How Can We Cultivate Actively Caring?

On January 16, 2007, Dr. Kevin Brothers, Executive Director of the Somerset Hills Learning Institute, was wheeled into St. Barnabas’ Renal Surgery Center. He was in top physical and mental health, and had never before experienced surgery. He received a three-hour surgical procedure – not for himself but for someone else.

Dr. Brothers donated his kidney to his mentor and professional colleague – Dr. Patricia Krantz, Executive Director of the Princeton Child Development Institute. Seven months earlier Dr. Brothers had learned Dr. Krantz was in severe kidney failure, and without a transplant, would require dialysis within a few months.

Unbeknownst to Dr. Krantz, Dr. Brothers and several other colleagues agreed to donate one of their kidneys to Dr. Krantz. Among all of Dr. Krantz’s family, friends, and colleagues who received extensive blood work and tissue sampling, there was only one viable match – Dr. Kevin Brothers.

Physical Courage to Actively Care

My ISHN contribution last month distinguished between physical and moral courage, and gave two safety-related examples of moral courage. When we risk social embarrassment or interpersonal confrontation, we are showing moral courage. In contrast, when we risk physical harm to ourselves when looking out for another person’s health, safety, or welfare, we demonstrate physical courage. Dr. Brothers’ elective surgery exemplifies physical courage.

There is no doubt: The actively-caring courage of Dr. Brothers was extraordinary. Beyond a number of person factors, including Dr. Brothers’ self-esteem, and sense of empowerment and belongingness, a number of cultural factors facilitated this display of courage. Let’s explore these factors with regard to promoting actively-caring courage in the workplace.
A Group Commitment

Dr. Brothers’ first courageous act was to pledge to give one of his kidneys to Dr. Krantz. I talked with Dr. Brothers prior to his surgery, and he admitted it was relatively easy to muster the courage to sign the donor pledge, because the probability of being the best antigen match was seemingly low. Surely one of Dr. Krantz’s family members would be a better match than he.

Although surprised he was the best match, Dr. Brothers affirmed strong motivation to honor his commitment. We discussed the value of this two-part approach to motivate his actively-caring behavior – first the promise and then the action. This two-stage approach is applicable to the workplace.

Suppose each member of a work team signed a group declaration to give each other corrective feedback whenever they saw an at-risk behavior. You could call this commitment a “Declaration of Interdependence.” This group obligation would likely increase people’s acceptance of behavior-based feedback, as well as increase the probability a worker would deliver a coaching communication. Of course, a number of other safety-related behaviors could fit this two-phase process, beginning with a group commitment to actively care for each other’s safety.

Group Support

Both before and after his surgery, Dr. Brothers received substantial social support for his actively-caring courage. “What an outpouring of support our family received from our school’s parents and staff,” reports Dr. Brothers’ wife – Debbie. The parents and staff of the Princeton Child Development Institute were also extremely supportive, sending thank-you cards to Dr. Brothers for helping to prolong Dr. Krantz’s life and thereby enabling her to continue her important work worldwide.
Substantial research documents the beneficial impact of social support on recovery from physical illness and injury. This factor relates directly to the person state of belongingness, which increases one’s propensity to actively care for another individual’s health or safety. Thus, cultivating social support throughout a work culture is critical to increasing people’s actively caring for occupational safety.

Various interpersonal activities can enhance social support, including group celebrations, team goal setting, interpersonal coaching, and collaborative work projects. Relationship-building conversations are also critical, as I discussed in my June 2006 contribution to *ISHN*.

**A Trusting Culture**

When Dr. Brothers pledged to give Dr. Krantz one of his kidneys, he trusted all of the others in this special donor group would honor their commitment if they had the best antigen match. He also trusted the expert medical staff at St. Barnabas Medical Center would give Dr. Krantz and him the very best healthcare.

I’ve discussed interpersonal trust in prior *ISHN* articles, including the need to distinguish between trusting an individual’s ability vs. his/her intentions (March 1998). Subsequently, my April article entertained various ways to increase interpersonal trust in a work culture. Consider asking employees what specific events, policies, or communications impact their trust levels. Then, solicit ideas for decreasing mistrust and enhancing trust. You’ll likely receive a number of practical action plans, and the process of soliciting input on interpersonal trust will have a positive trust-building effect.

**A Common Worthwhile Purpose**
The group that pledged to donate a kidney for Dr. Krantz felt a common and commendable purpose. Likewise, advocates for occupational safety and health have a shared and worthwhile mission. In fact, I can think of no more esteemed purpose than actively caring for another person’s health or safety.

As my *ISHN* article last month illustrated, it takes more courage to actively care for a stranger than a colleague. Actually, attending to the safety and/or health of a family member is usually not considered courage but rather obligation. Plus, when members of a work team think of their coworkers as “family,” actively caring for the safety of these individuals becomes more an act of interpersonal commitment than courage. Thus, you increase the likelihood of interpersonal actively caring whenever interpersonal behavior supports a “family” mindset.

**The Moral Courage to Actively Care**

Would you undergo elective surgery to give a kidney to a coworker? Fortunately, actively caring for the safety and health of your coworkers does not require the “physical courage” shown by Dr. Brothers. Indeed, you don’t even need physical courage – only the “moral courage” to face possible embarrassment, rejection, or conflict when asking others to alter their behavior in order to prevent the possibility of personal injury. But a supportive “family” mindset among coworkers removes any fear of negative consequences from actively caring.

Many actively-caring actions for another person do not require courage, but only a little inconvenience. For example, identifying or removing an environmental hazard, completing a near-hit report, or making a safety suggestion involve no risk for personal injury or interpersonal confrontation, yet the benefits to people’s safety and health can be dramatic.

**In Conclusion**
If you saw a member of your immediate family get behind the wheel of a vehicle and neglect to buckle up, you would not hesitate to intervene. But what would you do if you got in a hotel shuttle van at the airport and noticed the driver and several passengers did not buckle up. Would you offer some behavioral feedback? In other words, would you have the moral courage to intervene on behalf of these at-risk strangers?

You have several excuses for not speaking up in the van, right? It’s only a short trip to the hotel and the probability of a crash is miniscule. Besides, these folks are adults, and if they want to travel at-risk, that’s their choice. Plus, if you say something about this, another occupant might be offended by your meddling and call you a “safety nerd.” So why actively care in this situation?

Here’s a thought: Consider your moral courage sets a memorable leadership example. You could start a constructive safety conversation and plant a safety seed for the occupant’s present and future safety-belt use. Imagine someone is moved by your actively caring today and later reminds another person to buckle-up prior to a vehicle crash.

Do these possibilities activate some disconcerting tension between what you think you would do in this and similar situations vs. what you know you should do? The more you hold safety as a personal value, the greater the tension. Your relevant moral courage eliminates such tension and exemplifies actively-caring leadership.

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