## Shrink Rap Radio #121, December 1, 2007. Psychopathology in the Workplace

Dr. David Van Nuys, aka "Dr. Dave" interviews Dr. Laurence Miller (transcribed from www.ShrinkRapRadio.com by Jo Kelly)

Excerpt: "We know from our everyday experience that people are not the same; people have differences in personalities. Some of these are simply harmless colourful quirks that people have; others are much more serious, but everybody is different in some way. I like to think of personality and psychopathology as kind of the new diversity that workplaces have to account for. We've become good at getting sensitive to cultural diversity, to ethnic diversity but what we've missed is the fact that people within any given cultural, ethnic, religious or socioeconomic group are going to have wide variations; and unless you know how to recognise what makes these people tick and know how to deal with it, then you are going to have difficulty with the people you work with."

**Introduction**: **Laurence Miller, Ph.D.** is a clinical and forensic psychologist, educator, author, speaker, and management consultant. He is author of six books, the most recent being *From Difficult to Disturbed*: *Understanding and Managing Dysfunctional Employees*. He maintains a private practice in psychology and also works extensively with law enforcement, the judicial system, social service agencies, and private corporations. Dr. Miller lives and works in Boca Raton, Florida. Long-time listeners may recall Shrink Rap Radio #40 in which I interviewed Dr. Miller on Practical Police Psychology.

**Dr. Dave:** Dr. Laurence Miller, welcome back to Shrink Rap Radio.

**Miller:** Thank you it's great to be back on the show.

**Dr. Dave:** Well it's been about a year since I interviewed you on your book on Practical Police Psychology, and now you've got another one out already.

**Miller:** I'm usually always working on something, so I've either got something in the oven or coming out.

**Dr. Dave:** Well good for you: and this time you've written a book about psychopathology in the workplace, which is a subject that I think everybody can probably relate to. What were the challenges of writing this book?

Miller: It actually wasn't much of a challenge, because I was really kind of systematically addressing something that's obvious to most people who work in any kind of environment: whether it's a shopfloor or an office setting. In fact, unlike the police psychology book that was kind of a specialised audience, the reaction I've got to this book from the people who read it, is "how did you know this is the guy I work with?" or "this is the girl I supervise". Because what I'm really doing is kind of explaining the everyday different varieties of human nature that people encounter in the workplace and people relate to this very strongly because it affects their lives on a day to day basis.

We spend a third of our adult existence at work, and a workplace really is kind of a second family; it's almost a tribal culture that we have away from our family and home life. The kinds of dynamics and rivalries and allegiances and politics that go on at work are just as strong as those that go on within one's family oftentimes, and it's important to learn how to deal with people there as well as at home.

**Dr. Dave:** Yes, well you know I think over the years people have asked me for a resource for dealing with difficult people at work. Now as you sat down to write this book, who in fact was your intended audience? Who did you have in mind?

**Miller:** Well this book, again unlike the previous book which was more of a specialised text book, *From Difficult to Disturbed* is really a manual for the online manager who has to hit the ground running with dealing with a variety of different types of workers.

But I was also very careful to include a section in each chapter for employees who have to deal with managers; because sometimes the only way to really get along at work is to know how to manage those who manage you. And that's why each chapter has a section how to deal with an employee who reports to you if you're a manager; but also every manager has to report to somebody: so there are sections in there on how to deal with your boss as well.

Finally there's a section in the back of each chapter that helps the reader get a bit of self insight; because a lot of times it's very easy to see the foibles and the problems of other people, but what's much more difficult is to see them when they occur in ourselves. And so what I try to do is give readers who are having difficulty at work some tips that will help them stop tripping over their own feet and standing in their own way; recognise the patterns they may be having at work, and some tips for overcoming those patterns for being maximally successful.

**Dr. Dave:** Well those all seem like really important bases to have covered. And you're right, it may not be the employee who is disturbed, but sometimes it's the manager; and then that can really be a challenge to deal with

Now you said this book wasn't too challenging for you to write; but it seems to me that you had an interesting task, inasmuch as I think you wanted to be faithful and accurate to the demands of clinical psychology on the one hand, but also to make the diagnostic concepts accessible to non-psychologist managers and readers.

**Miller:** Well people who read business books know you can walk into the business section of any bookstore, and there are rows and rows of books creaking under the weight of every manner of management guide. And the problem is they each have their own idiosyncratic little approach and idiosyncratic little program. The problem is no matter what the variation of the program is, most of these books, most of these guides, most of the training courses that managers take, treat people as if they were all cookie cutter replicants of one another.

So there'll be a course on management that deals with managing young people, or managing diversity, or managing women, or managing a certain kind of industry. But they will assume that everybody in that category is the same. We know from our everyday experience that people are not the same; people have differences in personalities. Some of these are simply harmless colourful quirks that people have; others are much more serious, but everybody is different in some way.

I like to think of personality and psychopathology as kind of the new diversity that workplaces have to account for. We've become good at getting sensitive to cultural diversity, to ethnic diversity but what we've missed is the fact that people within any given cultural, ethnic, religious or socioeconomic group are going to have wide variations. Unless you know how to recognise what makes these people tick and know how to deal with it, then you are going to have difficulty with the people you work with.

The other challenge I guess you could call it, was to make it clear that this approach does not imply that people are nothing more than walking syndromes. Because what I found is the more you understand the dynamics

behind a person's personality, actually the more respect you have for them, not less, because it illustrates that people really are complex.

I use the standard mental health diagnostic categories: not so that managers can become diagnosticians; not so that managers think they have to become doctors or psychologists to manage well, but simply to provide some framework that's universally accepted by professionals in the field. I wanted a business manager to be able to pick this book up, ignore the diagnostic labels if they have to and hit the ground running with some of the management strategies that are on almost every page.

At the same time, I wanted a mental health professional to pick this book up and say, "this is something I can use in my consultation work; this is something I can use for teaching purposes". So I really tried, and hopefully successfully, to make a crossover book that's going to be useful both to professionals, because it does use their lingo so to speak, but also to everyday managers who don't have to be professional psychologists in order to manage well.

**Dr. Dave:** Well that's one of the things I really like about your book, is how effectively you straddle these two worlds of professional psychology on the one hand, and the lay person on the other.

The typical diagnostic categories of the DSM, the Diagnostic and Statistics Manual that people in mental health use, they tend to have a negative, disparaging quality to them and one of the things I appreciate about your book is that you talk about all of these people in a very respectful way. They may have certain limitations, or present certain challenges but you also emphasise their potential to be productive workers and colleagues.

**Miller:** You make a very interesting point that I often point out when I give seminars on this topic. If you look at the labels of the different diagnostic categories, there are labels that are historical labels: like major depressive disorder, or schizophrenia. But when you go into the section that deals with personality disorders, virtually every one of those disorders has some kind of disparaging name.

Bad enough if you go to a doctor and you have a diagnosis on your insurance form that says depression, or even psychosis, you wouldn't want that to be anybody's business. But OK, this is a syndrome that people recognise. But how many people want to be called a borderline personality disorder? How many people want to be called a narcissistic personality? How many people want to be called an anti-social personality; or an

avoidant personality; or a dependent personality; or a histrionic personality; or even everybody's favourite, the obsessive-compulsive personality? And on and on and on, and you wonder could psychiatrists not come up with a less disparaging way of referring to these people?

But this is the uniform we have to play with, and this is the lingo we have to use. And what I try to do is if I can't avoid using the labels, at least give three dimensional fleshed out descriptions of these individuals so they are not just seen as abstract syndromes that people have to use and manipulate.

And the other point is by using good management strategies you are not manipulating people. The strategies I present in the book, they're not tricks, they're not ways of fooling or manipulating your employees into doing what you want. They are ways of showing sincere understanding and then working with these people on an individual basis. So what's amazing is if you show you understand a person in a non-patronising, and a non-belittling kind of way, people will respond to you, and they will want to do a good job for you because they know that you respect them.

And if that's something that comes out of managers reading this book and employees reading this book then I will have done my job; because god knows there is little enough respect for people at work as it is.

**Dr. Dave:** Yes, well let's step through the diagnostic categories that you cover in your book. I love the way you both mention the traditional DSM category, but then you come up with a kind of non-jargon term for each. For example you start off with "avoidant and dependent employees" who you categorise as "shrinkers and clingers". Go ahead and describe those for us.

**Miller:** Well I'll do the syndrome first. Basically the avoidant personality is the person most people would describe as being overly shy. They really fear people; people are intimidating to them. They just get uncomfortable among other people: they don't know what to say, they don't know what to do, they don't know where to put their hands. They are just very skittish, shy types of people, so they tend to avoid social situations and they indeed shrink from situations that may be threatening and challenging.

The dependent personality also in a way is intimidated by people but in a slightly different way. This is a person who overly depends on the validation and approval and opinion and guidance of other people. Managers will say this is the person, who no matter how many times I tell him or her to do a task will ask for more and more guidance: can't they ever

do anything on their own? Do I always have to spoon feed this information to this employee? And the reason they keep needing the spoon feeding is because they are insecure; they are never quite sure if they have gotten it right. So these are the people who cling; and they can be just as annoying as the people who avoid. Probably the only good thing about these two personalities is that they don't necessarily cause trouble in the workplace, unlike some of the other personality types in the book.

But what you can do is provide a reassuring presence and a reassuring environment. If you can give gentle direction and build that direction up cumulatively so that either the shrinker or the clinger develops a sense of mastery and competence at the job they are doing, what happens is eventually they find their niche and they are able to do a good job that's going to be acceptable for their work role.

If they can't do it, if it's something that's just impossible for them to do they are probably not going to go into that kind of job in the first place. They are not going to become sales people where they have to interact with people on a daily basis. They are not going to become public speakers, or motivational seminar leaders. But if all they really have to do is sit in a cubicle and enter data into a computer and occasionally answer a phone call, that's something they can learn to do well if you provide them with a certain amount of stability and maintenance.

**Dr. Dave:** OK. Now somehow, "avoidant" and "dependent" almost sound like opposites. Are they grouped together in the DSM?

Miller: Well they are actually opposite. And the difference is the avoidant personality just wants people to stay away from them. The dependent person wants the approval, they crave the strokes; they are needy people, they need people to approve of them. The avoidant person can basically just spend the whole day alone and it wouldn't bother them. The dependent person, although they are still intimidated by people, it's that element of neediness that distinguishes from the avoidant.

**Dr. Dave:** OK. Well let's move on to another category that you discuss which the DSM would characterise as "histrionic and borderline" personalities, and you refer to them in a much kinder way as "emotors and reactors" which is much more understandable and down to earth.

**Miller:** Well I don't know if it's kinder (laughter) but I try at least to be somewhat more colloquial and clear. Because you know if you look at the term histrionic personality: histrionic really means theatrical; it means the

person who is basically always on, they are putting on a show. And everybody listening to this program knows at least one person like that. This is the person that doesn't just walk into a room, they burst into a room. They command a room; they're happy, they're laughing, they are social butterflies: they flit over to one person, to the next person. They always seem to be having a good time and the people around them tend to have a good time.

But the problem is, when you work in a workplace, sometimes you have to cut the comedy and get down to business, and you really have to get serious and focus on a task from beginning to end. And what these individuals have a hard time doing, is maintaining that sense of stick-to-it-iveness on a task that isn't intrinsically exciting and stimulating. And so what happens is, they'll make a brilliant sales presentation, they'll charm the room, but when they have to go and write up the paperwork they'll fall to pieces. It'll be late, it'll be done sloppily, it'll be done forgetfully and they really need someone to help them in the follow through.

The borderline personality is a reactive because they react extremely strongly: there's no shades of grey, it's black and white. They either love you or they hate you. Sometimes they'll love you one moment and they'll hate you the next moment. They also tend to have very, let's say, interesting lives: they are always in some kind of crisis. This is the person that people say "my god, there always seems to be something going on in this person's life." Some kind of romantic entanglement, or financial struggle, or legal hassle; and this is because they are extremely emotionally reactive, and they tend to over react, and life is just a series of vicious cycles for these individuals.

The interesting thing is, sometimes if they are good at what they do at work and if their work is appreciated the workplace can often be an island of stability for these individuals. It's one of these "thank god it's Monday" phenomenon, where they'll get in more trouble and have more chaos over the week-end and they are only too glad to go back to the office on Monday, because there there's a sense of predictability and stability and confidence and mastery that they can adhere to and do well at.

**Dr. Dave:** So is your recommendation then to give them lots of positive reinforcement, recognition, support?

**Miller:** And direction. And also particularly with a borderline personality: a manager, or even a co-worker for that matter, has to be very careful about something called boundaries. That is, if you work with somebody for a long

period of time and you get kind of friendly, you start telling little jokes with each other, you share little intimacies; these are the kind of things that a close friendship is made of. The problem with the borderline is they're going to over interpret this as a level of closeness and intimacy that may not even exist. And I'm not even talking about romantic intimacy; I'm just saying in terms of regarding their employer as the one person they can trust, the one person they can depend on.

The problem is, sooner or later, that employer, or that co-worker is going to do something to disappoint the borderline personality and then what you are going to see is 180 degree switch. Now you're worse than dirt, now they hate you, now you can do no right. And what happens is these individuals go from relationship to relationship: whether it's personal relationships or work relationships, with a huge Santa Claus like bag of injustices. These are classic injustice collectors; always sensitive to people betraying them or letting them down, and they tend to end up being very cynical and untrusting people.

**Dr. Dave:** Boy; that description fits so well with somebody that I knew in my past, who would get a job and immediately put their boss on a pedestal. This was the most wonderful person, and how fortunate they were to work for such a wonderful and inspiring person. And then at some point, something would happen that would cause that to flip and suddenly this person who had been an angel is now a devil.

**Miller:** And I bet if you looked at the past history you would find there had been a long string of these same kind of flip flop types of relationships.

**Dr. Dave:** Exactly, exactly; this person moved from job to job during the period that I knew him. And it was frightening to see these changes, and I felt that in our own relationship, which started off very positive, it made me apprehensive that at some point it was going to flip; which in fact it did.

**Miller:** You know it's interesting because you see this in clinical treatment too. When I have a patient who comes in, and usually in the first or second session I hear them say something like "oh, Dr. Miller you're the only person who understands me. I don't know why all the other 256 therapists that I've been to didn't have the same insight that you did" – the little hairs on the back of my neck go up.

I know it's just a matter of time until the other shoe is going to drop. And not always, but very frequently that typically happens; and maybe in the

very next session and maybe several months down the road. But I'll do something or say something, or not answer a phone call fast enough, or not answer a letter that they wanted for some legal purpose, or somehow I'll refuse to gratify some particular wish and then that's it. I'm just like all the others; why did they ever trust me; you can't trust these mental health people; and you're all a bunch of crocks, and it'll be on to the next therapist who will pretty much be in line for the same treatment.

So if they're treating their doctors that way, you can be pretty sure they are treating other people in their lives the same way; whether it's relationships or workmates

**Dr. Dave:** Well the borderline is such a challenging personality, what if your boss happens to be of that type?

**Miller:** The only thing you can really do with a borderline boss is to set boundaries and limits very firmly. When you are given a direction, make sure you clearly understand what that boss wants you to do. Because this is the boss who will invoke the frustrating situation of you being told what to do; and you go out there and you do it, and it may take a whole day to do, it may take a year to do. And then you'll come back and they'll say "I didn't tell you to do that".

And what happened in the meantime is that they kind of changed their notion of what the project is. But to their mind what they think right now is the absolute truth, and what they thought yesterday or the day before has no meaning. And if you remind them, if you show them documentation, if you show them a signed statement where they told you exactly what to do in black and white; they'll say "well that's not what I meant". And that's the most maddening circumstance. So when you get a task, make sure that you document it, and make sure you know exactly what you are supposed to do; and even then you're not immune from the blowback.

And the other thing is, and this is very hard to do: but try, strange as it sounds, not to take it personally. You're going to get screamed at, yelled at, mad at, whatever it is by this individual when they're in a bad mood and what's the most maddening thing is you're going to go home saying "I'm going to quit this job; this is it, this is the last straw, I'm coming in tomorrow to give my notice and clean out my desk." And you come in the next morning and it's all smiles, and when you have the sour look on your face, he or she will look at you and say "what's your problem?"

**Dr. Dave:** (laughing) Do you watch Entourage on HBO by any chance?

**Miller:** No, I haven't seen that show; in fact I just started watching The Office, because I get calls and emails telling me did I base my book on that show?

**Dr. Dave:** Aha, that's great.

**Miller:** And so now I'm watching the show. And the thing about that particular kind of TV show is the people on that show in a way are caricatures, they are not real people. I mean to keep people entertained in a comedy you have to have a certain amount of exaggeration.

But the people I describe in the book are real people. I mean the case histories I give, I've changed enough to preserve the confidentiality of the people involved so nobody could recognise them. But the actual situations I have dealt with, or that close colleagues have dealt with and told me about, these are real cases. These are not things that I just made up as examples, although again I had to change some of the details to protect privacy. And that's why I think people who have read the book have said "I can't believe it; that's my boss!" "I can't believe it, that's the person who works for me, how did you know?"

And the reason is because people are very variable between each other. I'm a different personality than you; you're a different personality than somebody else. But within our own selves, it's remarkable how consistent people are from moment to moment, from year to year, from decade to decade. In my business, one of the things I learned it's very difficult for people to make significant changes in themselves even when they really, really want to.

But most of the people you are going to meet in this world are perfectly happy with the way things are, with themselves. They may think the problem revolves around other people and that it's all everybody else's fault, and if everybody just kind of did what they want things would be better. But most people don't want to change themselves; most people want to change people around them or try to find some justification for why things aren't going their way.

**Dr. Dave:** Well that's a perfect lead in to your next category, which is the "narcissistic and antisocial" employees, which you characterise as "preeners and predators".

**Miller:** Up until now the personalities we've been discussing, although they can cause problems, they can cause tensions, in a way there is almost a pathetic aspect to them. The shrinkers and the clingers are kind of shy, and dependent, needy people. The histrionic and borderline are people who are just sort of prey to their emotions and have a hard time just establishing any kind of stability.

When you talk about somebody like the antisocial personality, this is someone who really is a predator. This is someone who for all intents and purposes does not have a conscience, and everything that they do is strictly for their own purposes. They will use people and spit them out without a second thought. Any kind of real loyalty, any kind of real allegiance is ephemeral, is non existent.

Probably the only thing you can do as an employer is do due diligence, and not hire these people in the first place. If you get stuck with someone with an antisocial personality disorder try to monitor their behaviour as closely as possible, and just wait for sooner or later something to happen that is going to be grounds for dismissal. Just make sure you document everything accordingly.

The narcissistic personality disorder in some ways is a little more benign. This is the person who, as long as you agree with their over inflated view of themselves, they'll be your best friend. Some of them will be very loyal and faithful and friendly, and very good bosses and very good employees as long as you feed their egos in the way that they feel that should be fed.

The problem is if you fail to do that, if you fail to regard them as special, if you fail to recognise their unique capabilities - which of course will absolve them from the ordinary scut work that every other worker has to do, (laughter) then things tend to turn. Then they start to get nasty. But again, even the most narcissistic personalities are not going to be ruthlessly predatory. If they are not getting the strokes they need, they will just move on.

Somebody once put it this way: they said that the antisocial personality believes that there should be no rules: rules are for suckers, it's a dog eat dog world; only the strong survive; they will come out on the top of the pack because they're the meanest sons of you know whats in the valley.

The narcissistic personality says of course there should be rules: you can't run a society without rules; people should obey the rules; except for me!

**Dr. Dave:** Right (laughing). You know sometime back I had the privilege of interviewing Robert Hare who has done a lot of research on ...

**Miller:** Yes he is the premiere researcher on psychopathy which is a variant on antisocial personality disorder.

**Dr. Dave:** Right; and he wrote a book called something like "Snakes in White Collars" - I'm probably mixing it up ...

Miller: "Snakes in Suits".

**Dr. Dave:** OK, I'm mixing it up with Snakes on A Plane. But "Snakes in Suits". He seems to suggest that there is a likelihood that your boss might be this antisocial type. What do you do if your boss is of the predatory type?

**Miller:** Keep your arms and legs inside the vehicle at all times, and hang on for a wild ride. (laughter) Because you are going to be asked to bend the rules; you are going to be asked to cut corners. In a mild case you are not going to necessarily be asked to do anything frankly illegal or unethical, but you will be told to do some project, and then after you get it done the antisocial personality boss will simply steal all the credit for it.

Usually what happens is these individuals rise to middle or upper middle levels of management then something happens and the whole thing comes crashing down. It's like when you peel away a rotten tree limb, and you see this festering ant colony underneath you find that for years and years there's been this kind of dry rot that's been going on.

You see this a lot, interestingly enough in law enforcement agencies; as you know I work with law enforcement departments. News agencies love these stories about "rogue cop discovered". And what happens is you have somebody who was the police officer of the year: won awards for bravery; rescued children from burning buildings; you couldn't love this guy enough. Then you find out for the last 10 years he has been running this narcotics syndicate out of his police car, and he had every politician paid off, and knows every drug dealer, and so on.

What tends to happen is these individuals usually trip themselves up, because there are so many plots and so many intrigues that they can't keep them straight themselves. That's why Abraham Lincoln said "always tell the truth, that way you won't have so much to remember".

**Dr. Dave:** All of these suggest movies, and TV series. I've been watching The Shield lately and there are very complex characters in that series; I don't know if you've seen it.

**Miller:** Actually I'm a big fan of The Shield.

**Dr. Dave:** Yes me too.

Miller: And people have often asked me: is the lead actor, the Vick Mackie character, is he a typical antisocial personality? And interestingly enough the answer is probably "no". And again that brings up another interesting point. Although I present these personalities in the book, and although the DSM-IV presents them as distinct categories, everybody to some degree is a blend. It's just like there are African American people, there are Asian people and there are Caucasian people. But everybody is kind of a blend of tones and colours and characteristics; you have very few people who are just one kind of person or another.

The Vick Mackie character probably does have some antisocial characteristics in it, but the writers of the show are very careful to point out that every now and then there is a human side that comes up. But you do get the sense that this is someone who is basically out for themselves, and although he seems to sincerely care for his family and his kids basically is going to be out for himself. In the first season he probably would have been more of a classic antisocial personality, but I guess to keep the series going they had to add some dimensions to his character in order to flesh it out.

**Dr. Dave:** Yes, I find myself rooting for him, as mean a character as he is at times; they have done a good job of showing this other side to him. And in fact that's often how it is in real life, when we get to know people we discover that they're a complex mix.

**Miller:** Those people who study antisocial personalities, Robert Hare is one of them, and some other researchers, what they point out is that a lot of the qualities that go into making an antisocial personality - that sense of fearlessness, that sense of do or die, that sense of nothing will stand in my way - in some circumstances that's actually an admirable quality. We want these traits in moderation to exist in soldiers, police officers, fire fighters; those who have to really be brave and courageous, and basically say "screw it I'm going to go in there and take a chance and do something heroic", because these are the people we depend on.

The problem is if it goes too far in the other direction, so that these people are now preying on the people that now depend on them; that's when we call it antisocial, as opposed to simply courageous and brave and fearless.

**Dr. Dave:** Yes. You go on to talk about "obsessive-compulsive, and paranoid" employees, who you call the "detailers and the vigilantes". The vigilantes is such a kind way to describe the paranoids, I love it.

Miller: What I meant by vigilante really wasn't the sense of the guy who sort of stands at the border with a shotgun protecting his neighbourhood. What I meant was someone who is being extremely vigilant, because the thing about a paranoid personality is, they are "on" all the time. They go into a restaurant and they always sit with their back to the wall. Their radar is always working, they are always looking for the angle, they tend to be very untrusting and cynical people. They pretty much assume that everybody is out for themselves and will screw you every chance you get.

And the problem is they rely on a defence mechanism called projection, and the line I gave you is pretty much the way they feel about other people. So what happens is you have people who are sort of sceptical and mistrustful, and when you meet them you get a creepy feeling like you are being evaluated or they are running some kind of intelligence on you. So naturally you become a little standoffish, and the paranoid person picks this up, and says "see? That person doesn't really like me". And from experiences like this, we get the famous saying that "just because you're paranoid, it doesn't mean they're not out to get you"

**Dr. Dave:** So as a manager, how would you deal with someone like that?

**Miller:** Be straight up. Don't be overly friendly, which is going to be only interpreted as a sign that you are trying to ingratiate yourself with the person, but don't be overly harsh. Be businesslike, be authoritative.

One thing the paranoid personalities tend to respect is legitimate authority. So don't be afraid to pull rank but do so in a straightforward, consistent and honourable way. Make it clear that you expect the rules to be followed but as long as you are treated with respect, and the people around you are treated with respect, you will treat that individual with respect.

If you have a paranoid employer it's kind of the reverse situation. And that is treat them with a certain amount of deference. If they ask for details, try to provide as many details as you can, but also set some boundaries. Make it clear that there are certain intrusions into your personal life, or certain lines

of questioning that you are just not prepared to answer. And sometimes your paranoid boss will respect that, other times if they get too intrusive you may just have to leave the company.

The obsessive-compulsive person is really a detail person: they are into details, they are into order, they are into control. And they actually make very good managers, or sidekicks, or secretaries, or partners to other kinds of personalities such as the narcissistic or histrionic personality who are usually the ones with the brilliant bright creative ideas, but have no clue how to put them into action. So they partner up with an obsessive-compulsive person, who can connect all the dots and actually get the project running.

But the problem is an obsessive-compulsive boss is probably going to be a very demanding boss. The only good thing about it is at least his employees know that this boss is giving as good as he gets, that is typically the obsessive-compulsive boss is not going to ask you to work any harder than he is willing to work himself. So if he tells you that instead of 9 to 5 you have to come in at 7.30 and leave at 6.30, he'll be in at 6 and he will leave at 9. But the problem is he'll expect everybody to keep that feverish type of pace.

Sometimes what you've got to do, is document to him that by doing things at a more moderate way you're section or your department will actually be more productive and not less productive.

**Dr. Dave:** OK. I was going to move onto the next one, which is, you talk about "schizoid and passive-aggressive" employees, who you dub as "oddballs and spoilers".

Miller: Well, we'll talk about the spoiler first. And it's interesting because passive-aggressive personality is kind of controversial. It's not an official personality diagnosis in the DSM-IV, however it seems to be such a commonly encountered phenomenon that it was almost ridiculous not to include it. And basically this is the person who seems to always get in their own way, and get in other people's way but not in ways that are obvious.

The term passive-aggressive means they are doing something aggressive or harmful or sabotaging, yet doing it in a way that on the face of it can't be interpreted as being overtly aggressive. So if you give them a project to do they will turn in a beautiful project; it's better than an A-plus. The problem is it's turned in a day late. Or if you give them the same project to do another time, they'll come up with 250 types of excuses: it just seems to be

that week that the car broke down, and their grandmother died, and the dog had to go to the vet.

Much like the borderline personality, who this may actually be a kind of a cousin to, the passive-aggressive person always has stories about how if not for this they would have been more successful, or if not for this person standing in their way they would have been able to accomplish this or that. But of course it's really their own selves that are causing the trouble.

**Dr. Dave:** And what about the schizoid, who you characterise as an oddball?

**Miller:** Well it's an oddball because the typical reaction to someone with a schizoid personality is, "what do you think of Joe?" And "well, I don't know that much about him, he seems ok but he doesn't really say much, I mean he answers your question when you talk to him".

And the interesting thing, as we said before, the avoidant personality fears people; the dependent personality desperately needs people; and the schizoid personality basically could take people or leave them. What they'll generally do is keep to themselves; they may have certain weird practices or weird ideas. I think what a lot of clinicians believe is that the schizoid and schizotypal personalities are really in a sense mild forms of schizophrenia, which don't reach the full delusional loss of contact with reality that you see in the full blown syndrome.

Generally, the schizoid personality if you give them a job to do, they will do it. They also tend to be very technically oriented, most of the time, so these are going to be your classic computer geeks who can basically work for a company for 5 years and nobody has ever seen them except to go in and out of their cubicle. They don't go to office parties, they don't really socialise, they speak when spoken to. Pretty much if you can get them into a niche that they do well at they will be a very productive employee. But the problem is if they suddenly wake up one day and decide they want to go climb Mount Everest; then they will just send you a notice that they quit, and disappear.

**Dr. Dave:** OK. Now sometimes people's problems, you note, have a neuropsychological or a mind-body basis. What can you tell us about handling those kinds of people?

**Miller:** Well I put that in only because I think a lot of employers, and maybe this is from years and years of working in a workers' compensation

clinic, where often we had to tease apart various types of disability syndromes, ranging from something as overt as a broken leg or a slipped disc, to something more serious such as a chronic pain syndrome, or a post concussion syndrome, or an anxiety or depression or a post traumatic stress disorder.

And what I wanted to emphasise in those chapters, is that although these are less common than the personality disorders in the first part of the book, occasionally you may see somebody who does have a psychosomatic disorder. Who seems to take more than the usual amount of sick days that another person takes, and has all kinds of vague, mysterious complaints that never seem to have a pin-downable or definable medical basis.

Or you may have somebody who has a brain behaviour disorder. There are certain types of epilepsy for example, whose manifestations aren't in the classical seizure sense, but may present with certain types of behaviour anomalies. Probably a very common brain behaviour disorder is something called attention deficit disorder, which has become the subject of a number of books dealing with ADD in the workplace. But here is a person who has difficulty focusing, concentrating, staying on task, is very distractible, and is often mistaken for being lazy or even being on drugs.

And again managers are not going to be clinicians. It is not a manager's job to diagnose and treat these syndromes, but simply to recognise that they exist, refer the employee for appropriate mental health follow up when necessary, and learn how to deal with them productively in the job site. Because a lot of times they are not serious enough to quit the job, or to be dismissed from the job; and in a few cases under the Americans With Disabilities Act certain of these disabilities actually have to be accommodated for at the workplace. The more the people who make the decisions in the workplace understand these syndromes, the better they are going to do in accommodating them, and making sure that the employee remains productive.

**Dr. Dave:** One of the contemporary problems to confront the workplace are people going so called "Postal". Violence in the workplace; which I think is maybe a sort of a new phenomenon. I don't know how new it is or if it is increasing; certainly I'm more aware of it than I used to be. I know you have done a lot of work with law enforcement: what's your advice for dealing with individuals who might present a physical threat?

**Miller:** In virtually no other area of catastrophe, let's say, is the situation preventable as in workplace violence. The first thing to realise is that most

violence at work is perpetrated by people who are not part of the workplace; things like robberies or other kinds of violent events.

But the things that tend to scare people, things that make the headline, typically the story: here's a guy who worked for the company for a long time; seemed a little strange, but nobody could put their finger on it. Something happened and the guy snapped; committed some kind of violent act, maybe shot a few people at work and so on.

Then when you go back in the history, you see there has been a long series of interlocking vicious cycle after vicious cycle. Squabbles between that employee and the management; management sometimes heavy handed or clumsy handling of the situation; things escalated to the point where the person got fired, or went home and brooded and decided to seek some kind of revenge. Some kind of "Ramboesque" type of escapade.

Now, granted there are thousands if not millions of people every day who are disgruntled at work. Very, very few of them become physically violent. So there has to be some element of severe personality disorder or psychopathology in the person who is committing the violence. But a lot of times this is not helped by the sort of clumsy and ham handed way that some managers will treat the dysfunctional employees.

Again, this is not to excuse the violent reaction, but to show managers that there are ways of handling things appropriately. And that's what I try to do in that chapter on workplace violence, which is actually preceded by another chapter on more common types of workplace dysfunctions, because the two kind of go together.

Now if you have a worker who is a chronic complainer, if you have a worker who is a chronic underperformer, what I do in the book is I present a step by step, point by point protocol for dealing with these problems. From coaching and counselling, to different types of disciplinary measures that you can use in a progressive way, to referring the employee for a fitness for duty evaluation; good ways of helping them access mental heath services when necessary.

Finally if you have to fire an employee, there are still humane and good ways to do it as opposed to bad ways to do it. All of which will minimise the chance of an employee who has some kind of serious disturbance coming back and trying to blow the place up.

**Dr. Dave:** Well I think that you have succeeded in writing a very practical book that deserves to be on every manager's bookshelf.

**Miller:** Well I hope so. Work is hard enough when you do it the right way. I think if people can learn to understand each other from the bottom up and from the top down then the process of work, and the interpersonal aspect of work hopefully will get a little easier. And the payoff for everyone is that people become more productive when it's more pleasant to go to work; you are bound to do a better job; and managers, and certainly executives should appreciate that.

**Dr. Dave:** Dr. Laurence Miller, thanks so much for being my guest again on Shrink Rap Radio.

**Miller:** It's been a pleasure again, and I hope to speak with you again in the future.