

COMMENTARY

COVID-19 is a moderating variable with its own moderating factors

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The full scope of COVID-19's effects on workplaces all over the world is equivalent to the scope of many textbooks in industrial and organizational psychology. As co-organizers of a parallel team of researchers (Kniffin et al., 2021) who recently pursued a similar focus—to apply the frontiers of work and organizational psychology to making sense of the pandemic and charting a roadmap for future research and action—we certainly agree with the urgency and priority attention that Rudolph et al. (2021) have applied to COVID-19. Our own review aligns in certain crucial ways with Rudolph et al., but it also differs in meaningful ways. As elaborated in the five points that we raise below, it is clear that COVID-19 is a disruptive moderator of workplace dynamics with its own set of important moderating factors.

The massive and abrupt requirement for millions of people to work from home (WFH) during various phases of the pandemic seems likely to moderate a very wide array of relationships between employees and employers across the world. The authors' review of literature relevant to working from home provides a service to readers who are interested to learn more; however, one point that merits closer attention is that working from home when one's workplace is shut down due to quarantine is likely to be different—and have different effects—than WFH before COVID-19. Prior to the pandemic, WFH reflected a mix of employee and employer preferences as well as a degree of trust between the relevant parties. Consequently, it is difficult to confidently extrapolate scientific knowledge about pre-COVID-19 WFH to the current experience in which massive numbers of people have been forced to work from home. In our own review, we suggest that “mandatory work from home” warrants its own acronym, MWFH, given that it is a different and (for almost everyone) novel kind of WFH. This necessitates the development of new research and intervention programs.

Rudolph et al. (2021) plead for analysts to avoid using COVID-19 as grounds for the proliferation of theories of even more leadership types and—in light of Glynn and Raffaelli's (2010) assessment that leadership research has a history of being “incommensurate” or disjointed—we are happy to endorse this plea. There is already too much focus on differentiation of new “theories” in the organizational sciences (Antonakis, 2017), and we share Rudolph et al.'s concerns that COVID-19 will be used as a basis for a new layer of theories. Nevertheless, as the pandemic is first and foremost a public health crisis, it differs in crucial ways from other types of crises such as the September 11, 2001, attacks in the United States or the financial crisis of 2008. Therefore, we expect more theorizing on the concept of health-oriented leadership that emphasizes the role of leaders in taking responsibility for the health status of workplaces and their workers. These aspects are especially important as various organizations are asking their employees to return to the workplace and presenteeism may be a challenge. At the same time, organizations should focus their

attention on understanding the implications of prolonged WFH (and MWFH) for the mental and physical health of their employees.

Regarding the Rudolph *et al.*'s (2021, p. X) recommendation that “organizations should select leaders who possess the relevant knowledge, skills, and personality characteristics to successfully navigate the unique demands of a crisis” and their further acknowledgment that “many leaders do not” have such skills, we share the authors’ concerns that the leadership of many organizations—including nation-states—were not fit to deal with the challenges of this crisis because they lacked the necessary attributes and skills. A relevant example of such mismatching between skills and situations is found in recent research showing that many people prefer prototypical leaders who are excellent at “inspiring” and “motivating” people even for situations that call for prototypical managers—with excellence in “budgeting” and “supervising”—to be in charge (Kniffin *et al.*, 2020). Similarly, although prior research shows that people tend to prefer to be led by more dominant, masculine leaders in situations of war and economic threat (Van Vugt & Grabo, 2015), it appears that a more risk-averse, communally oriented, feminine leader prototype may be more effective in a health crisis like that posed by COVID-19 (Coscieme *et al.*, 2020).

In their review of occupational health and safety, the authors point to the increase in strain experienced by frontline and essential workers. Research in industrial and organizational psychology has examined the positive and salubrious effects of mindfulness to mitigate against work-related stressors (see Sutcliffe *et al.*, 2016 for a review). A recent study that one of the authors of this commentary conducted in Wuhan, China during the early phase of the pandemic showed the positive benefits of mindfulness as a buffer against stress (Zheng *et al.*, 2020). Given the many factors that are outside of organizational control, such as workload, we think that a systematic examination of how mindfulness may benefit health care workers may indeed be timely.

Finally, we appreciate the authors’ identification of demographic factors like age and gender as central to the various key topics, but we contend these moderating factors deserve greater attention. In our own coverage of COVID-19 and the workplace, we devote one third of our review to focusing on various “moderating factors” such as age, personality, gender, race and ethnicity, family status, and culture because there are evidence-based reasons to expect disparate effects of the pandemic across such dimensions (Kniffin *et al.*, 2021). For instance, the experience of WFH may be quite different for workers who live alone or for those who have a young family, for employees with extraverted or introverted personalities, for managers who are more or less empathic, and for work organizations that are culturally looser or tighter. Appreciating the wide diversity of experiences with COVID-19 will be critical for developing successful interventions. Indeed, given the massive scope but varied effects of the pandemic, we expect that researchers will find multidirectional interaction effects related to COVID-19 because many of the moderating factors will compound on each other, whereas, more positively, some will compensate. In a recent study of academic researchers that appears to offer a model for the study of other professional workers, Myers *et al.* (2020) examined the varied and often-interacting roles of a person’s field of research (e.g., whether the person is a “bench” scientist or can work remotely), gender, and parental status (e.g., whether the person has one or more children who are 5 years old or under) and report results that are appropriately complex given that the pandemic’s effects are complex. We look forward to more research that appreciates the divergent experiences being caused by COVID-19 partly because of the potential damage that such moderated experiences might generate for organizational goals related to productivity, collaboration, diversity, and inclusion.

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