
Cornered Office: Why Leadership Mental Health Can't Wait

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Announcer [00:02]

You're listening to the HR Mixtape, a podcast for leaders who want to understand people, strengthen culture, and navigate change with clarity. Today's conversation starts now.

Dr. Shari Simpson [00:16]

Joining me today is Mel Doman, organizational psychologist, author, and founder of the Workplace Mental Health Method. Mel is a former therapist who now equips leaders at companies like Google, Microsoft, and Salesforce to have constructive, skills-based conversations about mental health at work.

Dr. Shari Simpson [00:38]

Mel, thank you so much for jumping on the podcast with me. I've really been looking forward to this. I have had the opportunity to speak to a few people that have been in the clinical side of therapy and have made the transition to different types of work. You made the transition into organizational psychology, and I'd love to hear a little bit about what your perspective was, what gap you saw that really motivated you to make that transition.

Mel Doman [01:06]

You know, I can nail it down to the day. I was standing in my office in between clients and I thought to myself, this is not going to change the system. This is not going to change the narrative around this. I feel like I'm treating clients in a broken system and a broken narrative, because really most, if not all, of my clients felt that they couldn't talk about mental health outside of therapy or outside of with their friends. And most of my clients felt like their workplaces were torturing them. So I was like, talking to one person at a time, small group at a time, is not going to move the needle. I need to do something on a larger scale. And so I made a very difficult decision in 2013 to leave clinical work. Back then, clinicians didn't really leave clinical and go into non-clinical disciplines. I remember transitioning into very traditional IO psych work, doing people and leadership development, working on emotional intelligence, constructive conflict, intentional communication, helping people share their toys a bit better in the playground of work. But I noticed that whenever I talked about mental health, people would, like, proverbially hiss at me. And I was like, well, it's not a dirty word, so that's weird. But it wasn't until 2018, when I was living in London with my husband, doing a people and leadership development contract, and they asked me to do a mental health awareness campaign. I was like, oh, my God, yes. And then from there it just kind of took off because the market was saying it needed it and it was ready. It has been an amazing journey just equipping people with the skills and most importantly the conversational literacy they need to talk about mental health, communication, and team dynamics in the workplace. It's a language we all need to know how to speak, and saying it's important is just not enough. So that's the gap I saw. A lot of people were saying mental health matters, and I go, great, what are people supposed to do with that? You've got to give them the education, got to give them the skills if you actually want to make change. And so I have been on an eight-year harangue doing that.

Dr. Shari Simpson [03:38]

The fact that you anchored in language is fascinating to me because I find that so valuable. When you have the shared language, the right words to use, you really can communicate better and differently. I know that those who

are listening can't see this, but I keep an emotion wheel on my desk. I use it very regularly, both personally and professionally, because telling somebody that you're happy isn't necessarily the word you're feeling in the moment. Having the word to look at and go, 'I actually feel really inquisitive right now, or I feel really playful right now,' has helped me in my own way of communicating. I love that you anchored in that. And it's one of the reasons I'm such an avid reader, because diving into books and the language can really help propel you forward. Which leads me to my next question: your new book is called *Cornered Office*. I'd love for you to describe the premise, and why did you write the book?

Mel Doman [04:48]

So I named it that because we love a good pun. My husband actually helped me come up with the title, and I give credit where credit's due. The book, *Cornered Office: Why We Need to Talk About Leadership Mental Health*, basically uses irrefutable logic and data about how we've historically dehumanized leaders and still do, and how they cannot do what we demand of them without humanizing them and giving them the support they need to do the job. It really is that simple, where irrefutable logic has to cut through big feelings and narrative. There are something like 140 valid, peer-reviewed sources and about 25 anonymous qualitative interviews. Because if you're going to challenge an idea, you've got to bring receipts. The reason I wrote the book is because I lost count of the number of leaders over the years who had panic attacks, who felt like nothing they could ever do was good enough, or who felt like they were always expected to show up for other people and couldn't say they needed help. And the social narrative around leadership did not allow for them to speak up without tremendous risk. And I was like, all right, I am going to be the vessel. I wanted to write a book with irrefutable logic that we create leaders into these things that they aren't actually, and then we don't give them the social permission or support to be that thing. And it's getting harder and harder to be a leader, let alone a good leader, especially in this climate. My husband and I were talking about it, and he just said 'cornered office,' and I was like, oh my God, that's it. Because it's such a good pun and it captures how so many leaders feel. They're on the chopping block in every way if they make a certain misstep or even talk about the fear of that. So I basically rage wrote 75,000 words being like, logic, data, logic, data, and we know better so we have to do better. It's a very spicy meatball, whereas the first book is much more informative and instructional, and the second book is more like, hey, you know this long-term held idea? Well, here's why it's nonsense, and why we need to do better if we want our leaders to do better.

Dr. Shari Simpson [08:20]

We so forget the humanity at the highest levels. A few months ago, our CEO had to give a difficult message. Whether I agreed with the message or not was not the point of what I did next. This person delivered it so eloquently and actually brought a lot of humanity into sharing what they had to share. And I sent them a note afterwards. This is somebody levels above me. I just said, 'Hey, I really appreciated the way you showed up today. As an employee, I felt seen and valued. You did a great job. I know that couldn't have been the easiest conversation to prepare for.' And it was probably the second time ever in my career I've sent a note like that to somebody at that level. And it gave me the moment to reflect and say, but why? I want that too. I want people to send me notes like that. Why wouldn't this person deserve the same just because they have a title? It's close to your no-brainer concept, but it is not a no-brainer. People don't think that way.

Mel Doman [09:30]

They don't think that way. I actually cited a monologue from the movie *Air* in the book. It's Ben Affleck and Matt Damon in the early days of Nike, trying to land Michael Jordan. And there's this monologue from Sonny Vaccaro to the then-pre-famous Michael Jordan: 'People are going to build you up into something that you're not even that thing, and they will expect you to be that thing. And then when you're not, they will tear you down, because that is the most predictable pattern in human history.' And I was like, and that's leadership. Just because we build people into things we expect them to be doesn't mean they are those things. I write about how we create mental representations of leaders based on long-term archetypes and what we need from a biological anthropology perspective. We want them to protect us and to be better and to stop bad things in our environment. I get that. But with how much our prefrontal cortex has developed as human beings, it is not impossible to recognize that these are other people of the same species who are supposed to do these things. It either doesn't occur to us, or we don't want it to. Because they're in positions of power. They have more visibility, more influence, more money in a lot of cases. And a lot of leaders have done a lot of bad things, so we're not incentivized to extend that

compassion. But that doesn't make it less valid or less important. I feel like I'm screaming in a crowded room because to me it's painfully logical.

Dr. Shari Simpson [12:00]

It's beyond logical. And yet it's still really difficult. Leaders often don't know how to appropriately balance vulnerability and authority. They feel like they have to show up, especially younger leaders. I feel like we have not done a good job of teaching younger leaders what true leadership looks like. They kind of grow up thinking it's about authority, and the authority is given by the title. We've started to talk about this differently, but there still sits that place of vulnerability and authority. And because we are two women having this conversation, let's layer on the female perspective as well, because we are not always allowed to be vulnerable as leaders. I'll pause there and just get your reaction.

Mel Doman [13:03]

I have big feelings and we're on the same page. There are two things I want to focus on. The first is that I really want people, especially in positions of leadership, to visualize that we're not trying to create an open playing field. We're not trying to have them make an ironclad door. They need to build a fence. They need to decide what they let through and what they keep out. And it's about normalizing why talking about the emotional struggles of leadership is a sign of healthy leadership, and that success and struggle exist in the same body. Not just talking about their struggles, but talking about why that's healthy and what they're doing to manage it. Not just to humanize themselves, but to show that they also have capacity limits. It's about making that irrefutable case without apology. The social norms will need to catch up. I'm not blind to that. But it doesn't make it less true. Now, when we sprinkle gender on top, there is a concept I came up with in my first book that I ended up citing in the second: gender-based emotion shaming. What that means is, regardless of the gender you identify as, everybody is affected because we have these arbitrary social norms connected to gender and emotional expression, especially at work. Having someone's gender held against them for emotional expression in leadership is toxic. Male-associated emotional expressions are more socially acceptable than female-associated ones at work. For example, raising your voice and being angry is more socially acceptable than crying. However, if those are switched, women showing anger or men showing tears, they are both judged in ridiculous, unfair, different ways. So in those moments, it comes down to: my comfort with my emotional expression seems like it's creating discomfort in you, but I'm not going to carry that.

Dr. Shari Simpson [16:26]

And I would add to that: when you're dealing with employees who come into your office with a heightened emotion, I align with you that any of those emotions get distorted. It's not just one gender. Both genders are experiencing it in different ways. I've shared with people: emotions are emotions. The female employee crying in your office isn't different from the male employee who's screaming in your office.

Mel Doman [16:59]

Yes.

Dr. Shari Simpson [17:04]

They're both hiding their emotions. That's just life, you know?

Mel Doman [17:09]

Absolutely. And with your emotion wheel, by the way, my husband has a pillow version of that in his office. Why would we come pre-packaged with the ability to feel these emotions unless we were supposed to use them? Regardless of gender, emotions are data to us about how we feel, what's going on in our environment, and whether we need support. There are certain environments where having these conversations are psychologically safe. There are some where people just don't know how, but they're open to it. And there are other environments where it will never be okay. But the goal for the eight billion people on this planet is to try to get these conversations so common and normalized that the ones who don't are like the weird ones in the corner.

Dr. Shari Simpson [18:20]

I love that. I'm curious, as you've worked with giant companies, and different countries like South Korea, England, and Australia, what can we in the U.S. maybe learn about something that another country is actually getting better than us? How can we bring that into our organizations in the space around mental health?

Mel Doman [18:54]

You might actually be the first podcast host who's ever asked me that, and I love that question. Living abroad and working with international clients is what helps me keep a well-rounded perspective. In the U.S., we are famously known for living to work as opposed to working to live, and working at speeds where the cost of innovation is our sanity. And it's really difficult because a lot of companies in the U.S. innovate in incredible ways and influence the global market in some really positive ways, and some very negative ways. What I notice in other countries, even those that don't have a lot of open mental health conversations, is a level of just decency and care that companies abroad show through duty of care to their staff that you just don't see in the U.S. In the U.K., Canada, and mainland Europe, duty of care is a legal mandate. It covers making sure you're not just physically taking care of the welfare of your staff, but also their mental well-being. I think that duty of care piece and the decency and consideration for the daily challenges of being alive, as the cost of doing business, is just a common practice that through our individualistic society in the U.S. is just not a thing when it should be.

Dr. Shari Simpson [21:15]

Yeah, the duty of care language. That's going to be my takeaway and my challenge to my audience: have you had the conversation in your HR department and your leadership teams around duty of care? I love that language. Very helpful. Mel, we could talk forever. I will wrap us up here. If you haven't checked out Mel's books, I'll make sure to link them in the show notes. They sound fascinating, and I love that you were able to reference yourself as somebody who has done some research. That's always a plus. Mel, thanks for jumping on the podcast today.

Mel Doman [21:57]

Thank you so much. It was a blast.

Announcer [22:06]

Thanks for tuning in to the HR Mixtape. Like, share, review, and subscribe to support the show and help more people discover these conversations. Until next time, keep the conversation going.