





Tight, Loose, or Denied Holding: How Interpersonal Holding Shapes Innovators' Responses to Innovation Obstacles

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Abstract. Innovating at work often requires persistence through distressing obstacles and failures. When innovators experience such distress, they may engage colleagues for interpersonal holding—a process in which the colleague (i.e., “holder”) helps contain the innovator’s distress and provides new ways of understanding the obstacle that incited that distress. Prior research has made great strides in explaining what holding processes share in common across different individuals and in different contexts. However, through an inductive study based on 91 semistructured interviews with 74 innovators in a large hospital system, we find significant variation in the dynamics of interpersonal holding. Our analysis uncovered three distinct “interpersonal holding trajectories”—tight holding, loose holding, and denied holding trajectories. At the heart of these trajectories are distinct interpersonal holding episodes. Each episode varies by how holders engage with the innovators’ distress and the obstacles that caused the distress. These distinct episodes uniquely reinforced (or not) our informants’ innovator identities, ultimately influencing divergent responses to the obstacles that they faced. By building theory from the perspective of those who seek holding, our findings highlight important divergences in how interpersonal holding may unfold and identify important implications for innovators and their organizations.

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Innovating at work is both increasingly needed and uniquely difficult (Garud et al. 2013). Economic uncertainty and unprecedented technological advances are pushing many employees to implement new technologies and processes (e.g., Lifshitz-Assaf et al. 2021, Beane and Anthony 2024). Yet, organizations are characterized by inertia (Dean and Snell 1991, Gilbert 2005), and their members are often resistant to change (Van de Ven 1986, Ford et al. 2008, Shimoni 2017). This means that innovators who disrupt the status quo may face significant obstacles that derail their innovative work, such as being doubted, delayed, or rejected (e.g., Yang and DiBenigno 2025). Such innovation obstacles are often experienced as profoundly distressing (Lifshitz-Assaf 2018, Crosina et al. 2024) and potentially as threats to innovators’ identities (Petriglieri 2011). Given that the success of most innovation rests on innovators’ ability to manage or overcome obstacles, better understanding how they do so is a critical next step for management theory. Although

research has suggested a variety of individual factors that may help innovators overcome innovation obstacles, such as maintaining positive expectations (Yuan and Woodman 2010) or having “grit” (Duckworth et al. 2007), it has increasingly recognized the importance of receiving help or support from others (Madjar et al. 2002, Perry-Smith 2006, Madjar 2008, Baer et al. 2015).

More specifically, innovators may seek interpersonal holding—a specific type of support by which holders can guide others (often called receivers) through deeply distressing situations at work, such as innovation obstacles. In interpersonal holding, a holder provides a distressed colleague with “a social context that reduces disturbing affect and facilitates sensemaking” (Petriglieri and Petriglieri 2010, p. 50). The close attunement to and containment of individuals’ distress that are characteristic of interpersonal holding (i.e., when one individual “holds” another) (Kahn 2025) extend beyond general social support (Bavik et al. 2020). Holding behaviors include

“exploration” (i.e., helping others examine their diminished or threatened identities) and “propulsion” (i.e., providing others with the impetus to grow and develop) (Kahn 2025, p. 347). Prior research has significantly advanced what we know about holding. For example, Kahn (2001, 2025) highlighted the conditions that facilitate holding, including the process by which holders come alongside, link up with, and guide individuals in distress. Petriglieri and Petriglieri (2010) further theorized that business schools can serve as holding environments that provide containment and interpretation by offering social defenses, sentient communities, and rites of passage.

As valuable as the existing research on holding has been, it has largely focused on describing the average holding experience—what holding experiences have in common across individuals and contexts. This research has shown holders employing largely the same behaviors (e.g., Van Buskirk and McGrath 1999, Kahn 2001, Strunk and Strich 2023) and those who are held similarly experiencing and benefitting from those behaviors. For example, as a result of holding, patients and clients were portrayed as similarly overcoming distress (Kahn 2025), business school members were theorized to similarly shape their identities (Petriglieri and Petriglieri 2010), and organization members were seen as similarly becoming more confident and expressive (Van Buskirk and McGrath 1999). Thus, although the existing literature offers valuable insights, it tends to focus on what instances of successful holding have in *common* rather than considering potential differences in interpersonal holding processes.

Related research, however, hints that interpersonal holding may not always unfold in such a uniform way. For instance, scholars who study helping behaviors at work recognize that help seekers and help givers jointly engage with each other to shape different helping experiences and outcomes (e.g., Golan and Bamberger 2015, Grodal et al. 2015). Further, relationships scholars theorize that colleagues can initiate a lower- or higher-quality interaction based on, for example, whether they respectfully engage with the other person (Dutton 2003, Stephens et al. 2011). This suggests that an important next step for the interpersonal holding literature is to better understand variation in interpersonal holding processes and how those varied experiences may affect individuals’ responses to the situations that pushed them to seek holding in the first place. Understanding how and why interpersonal holding may differentially affect individuals’ responses to distressing situations is especially important in innovative work, where succumbing to such obstacles may spell the demise of important innovations that are critical to organizational success.

To better understand the dynamics of interpersonal holding and how it affects innovators’ responses to

innovation obstacles, we engaged in a qualitative, inductive study of interpersonal holding among innovators in a large hospital system in the Northeast United States (“MedCo”—a pseudonym). Obstacles to innovation in a hospital context can affect life-or-death outcomes, making such obstacles especially likely to be distressing for innovators (Hällgren et al. 2018). The MedCo context thus enabled us to readily observe the dynamics of interpersonal holding and its implications for innovators who experienced distressing obstacles to their innovative work. In contrast to the prevailing view that the experience and outcomes of holding are largely uniform, our analysis revealed three distinct *interpersonal holding trajectories*—paths with unique holding dynamics, identity implications, and innovation outcomes. We refer to these trajectories as *tight holding*, *loose holding*, and *denied holding*. At the heart of these trajectories were three different types of interpersonal holding *episodes*—dynamic interactions between a potential holder and a person who seeks holding. The three types of episodes varied by how holders engaged with the distressed innovators’ emotions and the obstacles that caused those emotions. They also provided distinct emotional and relational resources to the innovators. Importantly, each type of episode uniquely reinforced (or not) our informants’ innovator identities, ultimately influencing their responses to the obstacles that they faced and the fates of their innovations.

Our emergent theoretical model offers several important advances to the holding and innovation literatures. First, we redirect existing work on holding that has largely examined the commonalities of the holding process by showing important divergences in how interpersonal holding may unfold. We do so by specifically highlighting the unique characteristics of the three different interpersonal holding episodes that our analysis uncovered. Second, we explicate the distinct emotional and relational resources that those who seek holding gain in interpersonal holding episodes that reinforce (or not) their innovator identities—ultimately explaining why distinct interpersonal holding episodes foster different responses to distressing innovation obstacles. Third, we contribute to the theory on how employees respond to obstacles or failures in innovative work. Recognizing that innovative work requires persistence through often demoralizing and distressing failures and setbacks (Thompson and Purdy 2009, Baer 2012), we highlight the specific features of interpersonal holding episodes that cultivate persistence in different forms—or that lead innovators to succumb to their obstacles.

How Innovators Manage Obstacles That Derail Their Innovative Work

Whether technological failures (Rosso 2014), breakdowns in authorization processes (Huy et al. 2014), or

breakthroughs by a competitor that undermine one's efforts (Vuori and Huy 2016), obstacles are common in innovative work. For innovative work to benefit organizations, such obstacles must be deftly managed (Baer 2012). However, doing so is easier said than done (Pirola-Merlo et al. 2002, Lifshitz-Assaf 2018, Crosina et al. 2024). Indeed, compared with routine everyday setbacks (Chong et al. 2020), the obstacles that jeopardize innovative projects are particularly likely to be personally distressing and difficult to overcome (Dougherty and Hardy 1996, Rosso 2014).

There are several reasons why innovation obstacles can be so disruptive. To start, they may come from sources outside of innovators' control (e.g., Rosso 2014, Yang and DiBenigno 2025), making innovators feel powerless. Also, innovation is often a central part of an employee's role. Obstacles that derail such work may threaten their sense of stability or security in their job (Sverke et al. 2002). Finally, those who innovate often view their innovative work as not only deeply important but also, sometimes even self-defining (e.g., Lifshitz-Assaf 2018). Innovative projects may not just be tasks they do but important parts of who they are (e.g., Crosina et al. 2024). Innovation obstacles may, therefore, be experienced as threats to innovators' identities (Petriglieri 2011). Given their ability to disrupt innovators' sense of control, stability at work, and their identities as innovators, obstacles that jeopardize innovative work are often deeply distressing and threatening (Lattacher and Wdowiak 2020).

Some research has suggested *individual* responses to these kinds of obstacles—particularly those that threaten workers' identities—that range from defensiveness to exiting the identity altogether (Branscombe et al. 1999, Scheepers and Ellemers 2005). Building on this work, Petriglieri (2011) noted that support from *others* may help. Indeed, there is increasing acknowledgment of the importance of social support for innovators (Madjar et al. 2002, Perry-Smith 2006, Madjar 2008, Baer et al. 2015). However, this research has tended to measure perceptions of being supported more broadly but has rarely explicated the specific characteristics of interactions that may help distressed innovators feel supported (Bavik et al. 2020, Jolly et al. 2021). So, what kind of support might help innovators manage or overcome such deeply distressing experiences at work?

The Importance of Interpersonal Holding for Distressed Innovators

A rapidly emerging literature suggests that interpersonal holding may be particularly consequential for frustrated innovators (e.g., Petriglieri et al. 2019, Kahn 2025, Schinoff et al. 2025). This research shows that when individuals face situations that disrupt their sense of control, stability or security in their jobs, and their work-related identities, they may need assistance

beyond “routine social support” (Kahn 2001, p. 266). Whereas social support refers broadly to perceptions of being cared for by others (see Bavik et al. 2020 for a review), interpersonal holding specifically involves helping individuals “who are disabled in moments of uncertainty, confusion, or distress” at work (Kahn 2001, p. 261). In his foundational research on holding, Winnicott (1960) developed the notion of a holding environment to describe the attuned and protective nature of a mother who holds a developing child both physically and psychologically (Winnicott 1975). Kahn (2001) illustrated the significance of holding in organizations, theorizing that individuals often need holding at work given the disruptive, turbulent, and unpredictable nature of organizational life. Holding allows individuals to productively engage in rehabilitative identity work (Caza et al. 2018) in ways that social support or other forms of helping may not (Petriglieri and Petriglieri 2010, Petriglieri et al. 2018).

Scholars have explored in depth how holding environments emerge. Common to all perspectives is that a holder (a) absorbs or manages negative emotions for a receiver, referred to as “containment,” and (b) provides ideas to the receiver about the meaning of the distressing situation, referred to as “interpretation” (Shapiro and Carr 1993, Kahn 2001, Petriglieri and Petriglieri 2010). In his theorization of interpersonal holding, Kahn (2025) categorized containment and interpretation as exploration behaviors—which help receivers examine themselves and reflect on their situation—and found that holders also engage in propulsion behaviors—which challenge receivers to improve and grow. Interestingly, research on holding tends to look at the process from the perspective of holders, such as clinicians or addiction recovery workers whose jobs allow them to devote significant time to providing interpersonal holding (Kahn 2025), or the environments that such holders can create (Petriglieri and Petriglieri 2010).

As a result, research on holding has come a long way in describing the common characteristics of holding processes. For instance, “receivers” are theorized to similarly feel “less bound up, emotionally” (Kahn 2001, p. 269) and engage in productive identity work (Kahn 2001, Petriglieri et al. 2019). These same general effects are illustrated in research on individuals who receive holding from therapists, clergy, or physicians (Kahn 2025); professional networks (Strunk and Strich 2023); community organizations (Van Buskirk and McGrath 1999); or virtual exercise groups (Schinoff et al. 2025). Yet, in the daily experience of seeking a listening ear to process a distressing obstacle or failure at work, interpersonal holding is “likely to be more emergent, less protected, and more chaotic” (Kahn 2025, p. 343) than these general characterizations have accounted for. Thus, although the literature has made great strides in explaining commonalities across

experiences of holding, it now seems important to understand not only what instances of holding share in common but also, how they might vary and with what effects for those who are held and their organizations.

Taken together, allowing for the possibility of variation in experiences of holding and studying these processes from the perspective of distressed innovators (i.e., those who are held) may help us build more robust theory on how holding unfolds and by extension, its implications for how and why distressed individuals respond to situations that prompted holding in the first place. This is important because obstacles that derail innovative work could make or break innovation in organizations. Further, moving forward after experiencing a distressing obstacle may take *many* different forms, including productive persistence (De Dreu et al. 2008) as well as those that look more akin to deviant behavior (Warren 2003), counterproductive work behaviors (Spector and Fox 2002), or even disengagement or burnout (Maslach et al. 2001). The present study, therefore, addresses the following research question. How, if at all, can interpersonal holding processes vary and with what effects on innovators' responses to obstacles that derail their innovative work?

Method

Overview of Context

We addressed our research question through an inductive, qualitative study of innovators at MedCo, a large hospital system in the Northeastern United States. At the time of data collection,¹ the organization operated four hospitals, 80 medical practices, and 25 laboratories, and it employed approximately 12,000 people. As with many qualitative studies that begin with broader research foci and narrow to more specific theoretical insights through the processes of collecting data, analyzing data, and reading relevant literature (Locke 2001), we initially oriented our study on how individuals innovate at work broadly (Grosser et al. 2018, Berg and Yu 2021). MedCo provided ample opportunities to study such innovators. The hospital system readily advertised its innovations in medical care and academic training, and it had recently established a separately funded organization to accelerate employees' innovation efforts.

Studying innovators in healthcare ultimately proved to be an ideal case for better understanding the dynamics and outcomes of interpersonal holding. As we explain in greater depth below, we quickly discovered that our informants' innovation efforts were fraught with distressing obstacles. These dynamics were especially evident in MedCo given the large, bureaucratic hospital system and the fact that many of our

informants' innovations directly impacted life-or-death situations (Hällgren et al. 2018). We thus had ample opportunities to closely examine how innovators managed the distress caused by innovation obstacles or failures, the interpersonal holding processes that they engaged in, and the outcomes of those processes.

Data Collection

Sampling Strategy. Our data collection consisted primarily of 91 semistructured interviews supplemented by field observations. Consistent with recommendations for rigorous inductive field research (Locke 2001, Charmaz 2014), we began with purposeful sampling. Theory suggested that the experience of obstacles in innovative work might feel different for those in medical versus administrative positions as the former positions are closer to the life-and-death outcomes of patients than the latter (Grant and Wade-Benzoni 2009). We thus conducted early interviews with informants in both medical and administrative positions with varying degrees of tenure and formal authority (Marshall and Rossman 2014). Initial interviews explored the obstacles that individuals encountered in attempting to innovate, how those obstacles affected them, how they managed those obstacles, and how they ultimately responded to them. Initial interviews also addressed the outcomes of the innovation attempts.

As we narrowed our focus to how and why interpersonal holding affects innovators' responses to innovation obstacles, we began engaging in theoretical sampling (Charmaz 2014). Realizing that some employees (in both medical and administrative positions) viewed innovation as deeply important and even self-defining, we asked our contacts at MedCo to suggest informants who they saw as especially prominent innovators. We surmised that those who engaged in innovative work would be more likely to encounter distressing obstacles. These middle- and late-stage interviews explored similar questions as our initial protocol but also, delved deeply into the experience of engaging others after innovators' work was derailed by obstacles (see the [appendix](#) for our final interview protocol). To gain additional depth regarding our emerging model and attain theoretical saturation, we conducted a second round of interviews. We invited all 74 interviewees who had initially participated and reinterviewed 17 informants for a total of 91 interviews. All informants were given a \$20 gift card after their initial interview.

Interviews ranged from 16 to 55 minutes and averaged 40 minutes. The first 23 were conducted jointly by the first and second authors to help ensure consistency of interviewing practices. The remaining interviews were conducted individually by either the first or second author. Interviews were professionally transcribed, and all identifying information was redacted. For initial interviews, informants were given the option

to interview in person in a private conference room at one of several MedCo locations or over the phone on a secure conference line. Twenty-two informants chose to interview in person; the remaining 52 were via phone. All follow-up interviews took place via video meeting. Table 1 provides an overview of our sample, including tenure, gender, and the mix between staff and medical personnel.²

In addition to interviews, the first and second authors observed six MedCo management meetings for a total of approximately 10 hours. These meetings provided opportunities to learn about issues confronting MedCo employees and occasions for informal conversations about innovating at MedCo and the challenges associated with doing so. They also yielded a small number of interview informants whose innovative work was highlighted in these meetings. During and after each observation episode, both authors took copious field notes (Emerson et al. 2011).

Data Analysis

We analyzed our data using a grounded theory approach, iterating between the data, the existing literature, and our emerging theory (Glaser and Strauss 1967, Charmaz 2014). Throughout the analysis, both the first and second authors wrote research memos. These memos contained “interpretations and incipient patterns” in our data (Lempert 2007, p. 247), which proved useful in linking our data and theorizing with the relevant literature on interpersonal holding throughout the analysis process.

Given our focus on innovating, we first coded our data by innovation attempt to allow us to examine these processes closely. Across the 91 interviews, informants described 102 attempts to innovate at MedCo. Early analysis of these attempts revealed starkly different outcomes ranging from arduous multiyear victories to overnight successes to complete failures. To uncover the variation that was driving these different outcomes, we coded for factors that the existing literature would predict as important in shaping them, such as innovation type (i.e., radical or incremental) (Dewar and Dutton 1986), the nature of innovation vis-à-vis

work (i.e., core to their work or peripheral), and the innovator’s authority at MedCo. This initial analysis revealed no conclusive patterns. We thus open coded each innovation attempt. We read transcripts line by line, coding all data that were relevant to our research focus (Strauss and Corbin 1998, Locke 2001). This process of “breaking data apart and delineating concepts” (Strauss and Corbin 1998, p. 195) involved capturing themes while preserving our informants’ language as much as possible. After independently coding five of the same transcripts, the first and second authors met to discuss the codes, resolve any discrepancies, and create a codebook to guide our ongoing analysis of what facilitated the different innovation outcomes (e.g., prolonged victories, rapid successes, or failures) that our initial analysis uncovered (Kreiner 2015). Although this in-depth open coding resulted in hundreds of codes, we focus on examples that were most revelatory in the emergent theory that we present in our findings.

To start, our analysis revealed that obstacles frequently thwarted innovators’ attempts to innovate. These obstacles were experienced as highly distressing, indicated by codes such as “started to break down,” “felt frustrated and overwhelmed,” and “crushed the innovative spirit.” We, therefore, turned our attention to how innovators managed this distress. Doing so revealed that informants managed their distress by seeking out others at MedCo. We captured these dynamics through open codes, such as “opened up to colleague,” “immediately went to her,” and “reached out to manager.” As we iterated between our analysis and theory on relevant socioemotional dynamics (Charmaz 2014), the concept of “interpersonal holding” emerged as an ideal sensitizing construct for our data (Kahn 2025).

We recognized that informants’ descriptions of some interactions with colleagues were largely consistent with the theory on holding, which describes the primary functions of holding as containment and interpretation—indicated by codes such as “allowed me to express my frustration” and “helped reset my perspective.” We demarcated those interactions that

Table 1. Interview Sample Demographic Information

Employee function and interview totals	Employee type	Gender	Average tenure at MedCo, years
Medical employees			
47 total informants	16 managers	37 females	12.5
60 total interviews	31 nonmanagers	10 males	
Administrative employees			
27 total informants	12 managers	20 females	8.5
31 total interviews	15 nonmanagers	7 males	
Totals			
74 total informants	28 managers	57 females	10.5
91 total interviews	46 nonmanagers	17 males	

were broadly consistent with the definition of interpersonal holding. We then closely coded other attempts to seek out holders, attending to descriptions of how the holder engaged with the distressed innovator, characteristics of the holder (i.e., their relationship with the innovator), and what the innovator gained in the episode. As we continued coding, we realized that these episodes varied in ways that the literature on interpersonal holding had not accounted for. For example, codes such as “validated my pain” and “came alongside me to help” contrasted with codes such as “told me to pull it together” and “shared fresh advice,” which seemed different still from codes such as “totally ignored my frustration” and “told me not to bother.” From here, the first and second authors undertook an additional three rounds of coding five interviews each to unpack the innovation attempts. The two authors met after each round to discuss new codes and insights. As coding progressed, meetings became an important time to discuss patterns in the data and crucial points of divergence in holding experiences (Miles and Huberman 1994).

To better understand the patterns emerging from our analysis, we next engaged in focused coding, which involved synthesizing open codes based on similarities to detect emerging patterns (Charmaz 2014). We analyzed innovation attempts closely to determine what varied across them. At this point, we realized that episodes in which informants described their holder as providing them with containment and interpretation took two different forms—one that involved the holder affirming their distress and assisting with their idea and a second that involved the holder redirecting their distress and recommending solutions for their idea. Drawing on our analysis and the existing literature on interpersonal holding, we labeled these “tight holding” and “loose holding,” respectively. We also saw patterns in attempts to seek holding that ultimately failed to provide containment and interpretation, which we labeled “denied holding”—a third distinct experience that involved disregarding distress and disparaging their idea.

Our analysis revealed unique and consistent patterns in the dynamic engagement between holders and those who sought holding. For example, we grouped codes such as “helped me to chill out” and “de-escalated the situation” into the focused code labeled “distress reduction.” We grouped open codes such as “encouraged me” and “gave me new positive energy” into a focused code labeled “distress transformation.” Finally, we grouped open codes such as “had a dampening effect” and “left me even more frustrated” into a focused code labeled “distress amplification.” Realizing that different interpersonal holding episodes provided our informants with different emotional resources, we synthesized these codes into a theoretical category called “emotional resources.” We took similar steps that illuminated categories that described “relational resources” gained in these episodes, implications for innovators’ identities, and innovators’ responses to innovation obstacles. Consistent patterns in our data and a close eye to counterfactuals gave us confidence that innovators’ responses to innovation obstacles were fostered by the unique resources gained in interpersonal holding episodes and the way that they bolstered—or not—innovators’ identities. Examining all instances of these responses helped us focus on the most important characteristics and eschew those that were not consistently patterned in explaining such responses.

In iterating between extant literature and our analysis, we frequently returned to our data to ensure saturated theoretical categories and clear relationships between them (Charmaz 2014) so that we could “weave the fractured story back together” (Glaser 1978, p. 72). In short, our final stages of “theoretical coding” (Charmaz 2014, p. 150) revealed how the codes fit together into a story that explained the divergent idea implementation outcomes that we previously induced. We terminated data collection and analysis when no novel insights emerged from our analysis (Glaser and Strauss 1967). Table 2 provides additional illustrative data that support the theoretical categories in our model.

Table 2. Additional Supporting Data for the Theoretical Model

Theme	Illustrative data
Holder behaviors	
Tight holding: Affirmation and assistance	<p>“And then walking away, you know, and him saying ... ‘no ... I think your plan is a good one. Let’s see what we can do.’” —Kayla (Med)</p> <p>“If you bring an issue to her, she gets on it right away. That doesn’t just get, you know, pushed under the rug ... She, she is very receptive and very responsive.” —Natalie (Med)</p>
Loose holding: Redirection and recommendations	<p>“And so I have to rely on [them] ... I’ll sort of be emotional in front of them and be like, ‘This is fucking bullshit. These stupid people ...’ that kind of thing. And then they’re like, ‘Pull it together’” —Owen (Admin)</p> <p>“They’ll say, ‘Whoa, hold a minute,’ or ‘Say it this way,’ or ‘Do it this way so that it doesn’t startle everyone.’” —Bianca (Med)</p>
Denied holding: Disregard and disparagement	<p>“They’re not asking why and trying to understand it and understand the root issue, and they’re not trying to provide other solutions.” —Janet (Med)</p> <p>“She’s unable to dedicate time to me ... I think it’s a huge barrier [to innovation].” —Martha (Med)</p>

Table 2. (Continued)

Theme	Illustrative data
Emotional resources gained from holding	
Tight holding: Distress reduction	<p>“She manages to be a mom when she needs to be, and a friend when she needs to be. And [I can go] into her office in tears about something.” —Nadia (Med)</p> <p>“Yeah. [When I get] frustrated, I go sit with [holder] for an hour and you know, we have a mutual bitch session and [the outcome] may not completely change coming out, but you know, [I feel] like I’ve been heard ... there’s certainly quite a few times that his hands have been tied too, but at least you feel like, ‘okay, there’s somebody else who understands what I’m feeling and why I’m frustrated and they are too.’ You know, it just it lessens it somehow.” —Susan (Med)</p> <p>“She really just had an incredible way of breaking things down. I would say I definitely look to her ... you could just sit in her office and if you needed to decompress for 20 minutes.” —Andrea (Admin)</p>
Loose holding: Distress transformation	<p>“I garner a lot of energy from that [interaction with holder].” —Levi (Admin)</p> <p>“That gives me great innovation and excitement and fuel to come back and say, ‘Hey, let’s consider something different for internally what we’re currently doing.’ ... [It] helps motivate my particular innovation.” —Hannah (Admin)</p>
Denied holding: Distress amplification	<p>“It had a further negative effect [on me] and it didn’t show any creativity in thinking. It just seemed like a very punitive approach to things.” —Joshua (Admin)</p> <p>“[Being rejected was] like nails on a chalkboard to me.” —Katherine (Med)</p>
Relational resources gained from holding	
Tight holding: Relational anchoring	<p>“It definitely makes me feel like I’m not alone in the process.” —Bella (Med)</p> <p>“And it’s just an incredibly supportive relationship. ... And I think having that kind of a relationship ... makes you want to be more innovative.” —Susan (Med)</p>
Loose holding: Relational endorsement	<p>“[Holder] was really good. She backed me up quite a bit.” —Ophelia (Med)</p> <p>“He’ll go, ‘okay, you go do that and I’ll check back in with you.’” —Susan (Med)</p>
Denied holding: Relational isolation	<p>“[I asked] how could [we] do it? ... We want to collaborate ... So I’m thinking I’m going to hear back from [holder], and—never. I think I was [just] a checkmark on her list.” —Shirley (Admin)</p> <p>“So feeling like I was on an island by myself with that and every day advocating [for the innovation].” —Kayla (Med)</p>
Innovator identity implications	
Tight holding: Identity validation	<p>“If you want to be an innovator wherever you are, you can ... and really make a strong contribution.” —Megan (Admin)</p> <p>“It gives you a good feeling like you’re an important piece to the puzzle.” —Barbara (Admin)</p>
Loose holding: Identity expansion	<p>“And so, I’ve seen ... growth from noninnovator to innovator.” —Levi (Admin)</p> <p>[Describing why she took matters into her own hands after a loose holding episode] “I shouldn’t be speaking to a clinical surgical instrumentationist [about] why they need [my innovation] in a meeting ... I shouldn’t be! I’m not clinical.” —Ophelia (Med)</p>
Denied holding: Identity thwarting	<p>“I had no opportunity for innovation, no opportunity to do anything. It was emotionally stifling ... [because] for me, [innovating is] personally absolutely the thing that makes me happy.” —Heather (Med)</p> <p>[After describing a denied holding episode] “So I feel a little stifled now.” —Martha (Med)</p>
Responses to obstacle	
Tight holding: Conquering	<p>He “enables [me] to be able to keep moving forward and to overcome obstacles that we reach.” —Miriam (Admin)</p> <p>“I definitely persevere[d] through some of those challenges because when ... I’ve gotten validation from [holder] that this is, [when they say] ‘for sure, keep pushing on on that platform. This is a hill that you should be willing to die on.’ I think that was part of the motivation to keep moving on.” —Lori (Med)</p>
Loose holding: Circumventing	<p>“So sometimes, I think we do do the MedCo process, and then there are times we’re like, ‘Let’s just figure this out and get it done.’” —Kevin (Med)</p> <p>“Whether it’s work around or just work different approaches to the tasks that then can drive down the barrier and overcome it. Or come up with a whole [other] idea that eliminates the barrier.” —Travis (Admin)</p>
Denied holding: Conceding	<p>“It’s just, I don’t think it’s [innovation] going to happen. It doesn’t seem like it’s going to pan out.” —Barbara (Admin)</p> <p>“There’s nothing positive happening right now and we’re just gonna be stuck in the same old rut. Like it’s hard for me to get out of that mindset.” —Martha (Med)</p>

Note. “Admin” indicates that the informant held an administrative role at MedCo, and “Med” indicates that the informant held a medical role.

Three Unique Interpersonal Holding Trajectories with Divergent Innovation Outcomes

The obstacles that derailed our informants’ innovative work were highly distressing. After their efforts were thwarted, they described feeling “very frustrated [and] very overwhelmed” (Barbara, Admin)³ or so upset that “I almost lost it” (Eli, Med). Such distress was understandable given how important innovating was to them. Camilla (Med), for instance, explained that innovating was her “whole life.”

It’s my whole life. I want to make the greatest impact I can ... on my desk, there’s a thing that says, “Think big.” Think big. I think oftentimes we limit ourselves in how far we can get because we just think within the box when there’s so much more ways that we can do stuff. [I am] Definitely an influencer and an innovator. —Camilla (Med)

The distress that innovators felt after obstacles derailed their innovative work often prompted them to seek interpersonal holding from colleagues because as Martha (Med) said, “I need ... to like recover from feeling rejected.” The fact that stymied innovators desired holding from colleagues in such circumstances did not surprise us. What did surprise us was that although the interpersonal holding episodes that our informants described exhibited the fundamental characteristics of interpersonal holding, such as containment and interpretation (Kahn 2001, 2025; Petriglieri and Petriglieri 2010), they also differed in important ways. In these episodes,

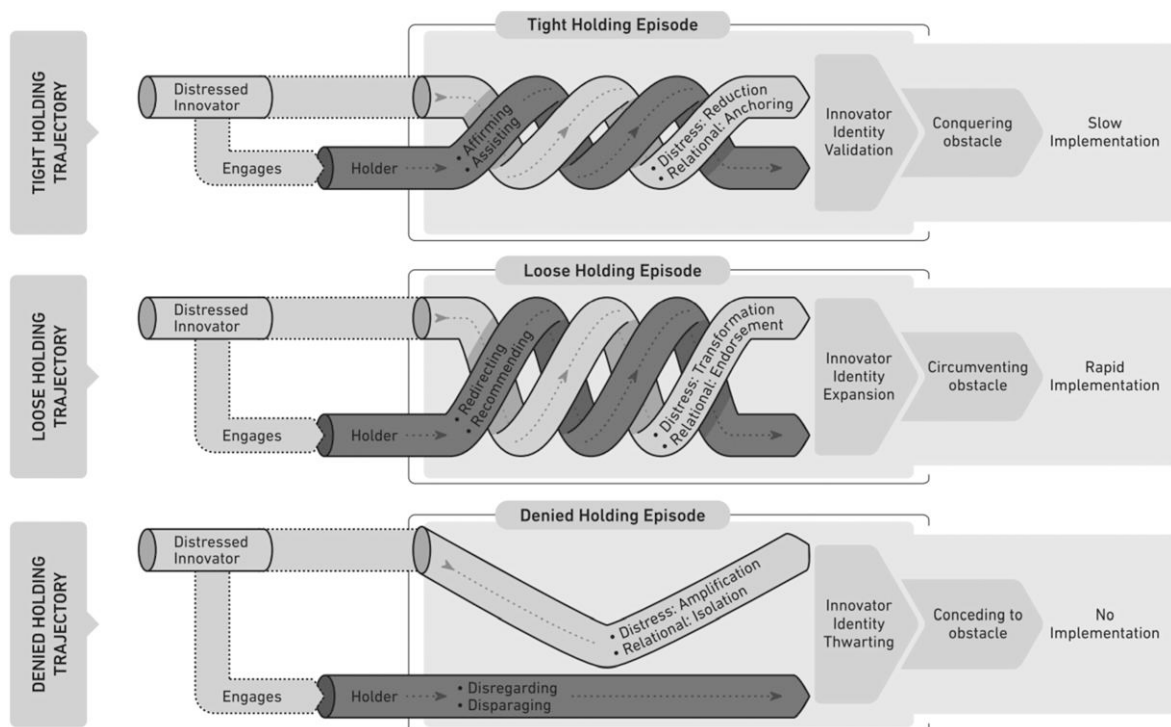
our informants described that holders (their colleagues) engaged differently with their emotions and the obstacles that incited them to seek holding. Such different forms of engagement provided innovators with unique emotional and relational resources. These resources bolstered innovators’ identities in distinctive ways, ultimately influencing their responses to their obstacles and the fates of their innovation attempts.

The importance of interpersonal holding to innovators’ responses to innovation obstacles became apparent early in our analysis as our informants explained that managing such obstacles without engaging a “holder” was an ill-fated strategy. Consider Sandra (Med), who said that “I think sometimes people wait too long [to talk to others] and then ... they say, ‘You know what, this is more pain than its worth. I’m not doing it. Forget it. I’m done.’” Vera (Med) agreed: “I can have an idea, but if I don’t have a strong partner supporting [me], that idea doesn’t go anywhere.” Interpersonal holding, therefore, emerged in our analysis as critical for managing obstacles that thwarted informants’ innovative work.

And that’s what’s happened with [implementing] this system. [Obstacles are] deflating, but yet, there’s somebody [else] going, “Well, let’s keep going and see what we can do for the next round.” So you need that. You need that ... cheerleader keeping you motivated. —Barbara (Admin)

Through the remainder of our findings, we explain how and why interpersonal holding shaped innovators’ responses to obstacles, ultimately influencing the fates of their innovation attempts. Figure 1 depicts our

Figure 1. A Theoretical Model of Tight, Loose, and Denied Interpersonal Holding Trajectories



theoretical model, in which the three full paths represent the three interpersonal holding trajectories.

As noted, these interpersonal holding trajectories began when innovators—reeling from distress incited by obstacles that derailed their innovative work—engaged a potential holder. For instance, Beverly was implementing a new communication system for incoming ambulances that would allow patients to receive potentially lifesaving care more quickly upon reaching the emergency department. After the technology was rejected by users who needed to adopt it, Beverly described seeking out her medical director to tell him “I’m struggling. I need help.”

And what I did was I called one of our other EMS (emergency medical services) coordinators and I said, “listen, I need a half an hour. I need to walk away from this to relax, breathe, get a different perspective. Can you just come cover for half an hour?” She said, “great. Yes. Okay.” So I did that. I walked away, took a breather, went to my medical director who was working in the cath (cardiac catheterization) laboratory at the time. —Beverly (Med)

Similarly, Hannah (Admin) described seeking holding after experiencing an error with a new technology that she was implementing: “I had to open up to a few select others and just put my heart out there and [say], ‘I can’t do this!’” She sought out a close colleague, saying she needed to have “a few good cries” with him. The interpersonal holding episodes that ensued were at the heart of one of three distinct interpersonal holding trajectories. These interpersonal holding episodes were differentiated by how holders engaged with both innovators’ negative emotions and the innovation obstacles that caused them.

Tight Holding Trajectories

Tight Holding Episodes. Building on the foundational imagery of holding as being wrapped in the arms of another (i.e., figuratively “held”), tight holding episodes were akin to being psychologically held in an enveloping embrace (illustrated by the close “orbit” between the holder and the innovator in Figure 1). Tight holding episodes represented 36% of the interpersonal holding episodes in our data. To illustrate, Beverly (Med), who we noted above went to her medical director for holding, explained that “I could feel myself starting to kind of break down.” She described what happened when she approached her medical director: “I just looked at him and he knew automatically when he looked at me that something was wrong.” She went on to describe her experience of tight holding.

He was like, “okay, sit down, let’s talk, what happened?” So, I told him everything that happened, and the fact that he just knew immediately that things weren’t going good and just immediately dropped everything even

though he was in the cath laboratory, working with patients, [he] dropped everything for 15–20 minutes to help me talk through it and to help get me a different perspective and to encourage me. —Beverly (Med)

Tight holding episodes shared several common characteristics.

Holder Engagement: Affirmation and Assistance. To start, tight holding episodes were characterized by holders *affirming* innovators’ negative emotions and *assisting* them with their innovation obstacle. Miriam (Admin) was implementing a new workstation on wheels (“WOW”) for a nursing unit. She explained that the old WOWs were cumbersome and large. The new ones that she was trying to implement were a fraction of the size, utilized modern tablets, and allowed nurses to document their work conveniently and efficiently. Despite clear drawbacks of the current WOWs, her attempt to implement new ones was derailed; various departments could not agree on which budget lines should pay for the prototype WOWs. Engulfed in distress, she engaged her director, expressing her pain: “I said [to him], ‘This sucks! This is like you’re asking me to build a house without a hammer! This is just too hard and it’s stupid and I can’t get anywhere!’” She went on to describe how her director affirmed her feelings.

He basically came back and said, “Yup, it is. Yeah, it’s tough that [the vice president] has given you this project, but he hasn’t given you the resources ... He does that. He’s done it to me. He’s done it to [another team member]. He’s done that ... But he’s got a vision and he’s trying to push forward.” —Miriam (Admin)

Similarly, Theo (Med) explained how, after his attempts to implement a new professional development program were unsuccessful, a holder affirmed his distress, saying, “Yeah, I understand. I feel your pain.” Kayla (Med) described feeling disrespected and upset when trying to implement a new plan for moving patients from one part of the hospital to another. She expanded: “And I almost felt like I was ready to walk out the building. And just, I just didn’t feel heard. I didn’t feel respected. I didn’t feel like people were taking [my idea] into consideration.” Kayla turned to a physician who she described as affirming her: “He’s like, ‘you know, *I’m with you.*’” She continued “for him to, you know, sort of see it and feel it in the same way that I did and intercede ... he broke down all of the silos in that moment, which was huge.” Similarly, Andrea (Admin) reflected on a tight holding episode in which her holder enabled her to “decompress” without making her “feel dumb.”

She was really good about breaking that down, and explaining how things work, different ways to look at things without ever making you feel dumb, [or saying]

like, “you should have known this.” ... You could just sit in her office and if you needed to decompress for 20 minutes, you could just sit ... and then get back to your day. —Andrea (Admin)

Not only did the holders in tight holding episodes affirm innovators’ emotions, but they also provided innovators with assistance. For instance, Bella (Med) described how an unexpected staffing shortage derailed her implementation of a new patient home-visit program. In the face of this obstacle, she sought out a close friend at MedCo. She noted that the holding that this friend provided was helpful in “figuring out how we should [overcome it]” and that “she and I really put our heads together” regarding solutions. Natalie (Med) expressed that she had turned to her manager for holding because this manager “join[ed] in with you, right? Like you have this issue and she’s becoming part of the solution instead of just like lending an ear. She’s doing more than that.” Natalie repeatedly explained how the assistance that her current manager provided was crucial to feeling a sense of space to interpret her negative emotions. Barbara (Admin) similarly described how a holder who “gets a little bit more involved” is very helpful in moving past obstacles and failures in innovative work.

Innovator Emotional and Relational Resources: Distress Reduction and Anchoring. The affirmation and assistance that constituted tight holding episodes provided innovators with unique *emotional* and *relational* resources relative to those gained by innovators who experienced the other two types of holding episodes in our model. They reduced innovators’ distress and provided them with a sense that the holder was “in it” with them—what we refer to as a relational “anchoring.”

Our informants articulated that their holders’ attuned and caring affirmation of their emotions lessened their distress about the obstacles that they faced. Miriam (Admin) noted that the tight holding episode initiated after the obstacles to her WOW project helped assuage her emotional distress. She explained, “[He] helped me to chill out and talk me off the ledge ... I needed that.” Kayla (Med), the informant who was struggling to implement a new way of moving patients around the hospital, described how she was able “to see the light” through the tight holding episode because her holder helped her get to “a much better place” emotionally. Megan (Admin) described the exchanges that she had with her boss in episodes of tight holding as helping her “get back down.”

I feel like if I’ve climbed too high up in the trees, I can call my boss and she can get me back down. I think I got too far with this [project]. And she’s a great support ... Sometimes I’ll say, “well, what do you think?” And then other times, I’m like, “I don’t

even need your guidance. I just need to cry on your shoulder.” —Megan (Admin)

Emma (Med) summed up the feelings of many of our informants who experienced episodes of tight holding when she described them as providing her with “a really good kind of time to de-escalate.”

Tight holding episodes also made innovators feel relationally anchored, defined earlier as a sense that the holder was “in it” with them. Informants often used the words “we” and “us” to capture the sense of togetherness that they felt in a tight holding episode. Barbara (Admin) turned to a holder who “was like, ‘no, let’s see what we can do to make it happen ... Let’s try it again and see what we can do to make it happen.’” This made Barbara feel like she was not alone in managing the obstacle threatening her innovative work. Beverly (Med) similarly described anchoring in a tight holding episode: “The fact that I haven’t been completely alone in this process and in this project ... makes things so much easier because I have [holder] that I can rely on and who understands what I’m going through.” This anchoring helped innovators feel like interpersonal holding was not one-sided advice seeking but rather, a “partnership”: “If you get the sense that somebody is working with you ... (pause) it really helps to have somebody on the other side who wants to join you in that partnership” (Megan, Admin).

Distress reduction and relational anchoring served as the resources needed to *validate* our informants’ identities as innovators. In line with previous research that suggests that holding can shape identity-related outcomes (Petriglieri et al. 2019, Kahn 2025), our analysis highlighted that interpersonal holding episodes—and the resources gained therein—influenced innovators’ identities in unique ways. Even if they were facing a significant hurdle that jeopardized their ability to innovate in a particular situation, tight holding episodes left informants feeling affirmed as innovators who affect positive change. Virginia (Med) noted that when she faced a setback in innovating, she engaged a colleague. When reflecting on the tight holding episode that unfolded, Virginia described that her holder “know[s] that I’m an innovator. I think they respect that, that I think outside the box. I don’t know if everybody does, but that’s just my nature ... She sees me as being different than most of the OR (operating room) people.” Similarly, Bethany (Med) explained how a holder—her supervisor—played a “pretty fair role” in helping validate her innovator identity by contrasting her holder’s approach (her boss) to others’ approaches.

If I had one of those bosses like we spoke about that said, “No, this is the way we’re doing it. This is the way we’ve always done it.” (pause) I think that, because I hold that innovation so close to my heart, I feel like that would be a hit to me. —Bethany (Med)

Response to Obstacle and Implementation Outcome: Conquering and Slow Implementation. Tight holding episodes propelled innovators to “conquer” the obstacles that threatened their innovative work. Conquering behavior—pushing through the obstacle within the prescribed MedCo processes—was described as “we’re still fighting” (Andrea, Admin). It required that individuals “throw your shoulder into it” (Megan, Admin) and persevere in their same course of action. Tight holding episodes uniquely facilitated this type of behavior. The reduction of their distress created the psychological space necessary for informants to push back against innovation obstacles. Relational anchoring made the idea of conquering the obstacles more tenable given that they did not feel like they were in it alone. Finally, the validation of their innovator identity seemed to coincide with validation of their existing approach to their innovative work. For these reasons, the emotional and relational resources that validated the identities of the held as innovators uniquely enabled a conquering response.

Theo (Med) exemplified this conquering response. After being rejected in his efforts to obtain an advanced research computer, he sought a colleague who responded in a manner typical of a tight holding episode. Theo explained that despite “the constraints within the MedCo [system],” he later decided to push onward: “I [said], ‘hey, let’s ... go for it!’” He took this conquering approach even though he had to “go through the [MedCo] system” to move the project past this obstacle. Ultimately, although the approvals took years, he was able to implement the new computer: “It’s gone on almost two and a half, three years to come to completion—to move this [approval forward and] to get this to work.” Miriam similarly typified this conquering response in her WOW project. The relational anchoring and reduced distress that she garnered helped her see “the bigger picture” of how she might overcome her obstacle (a vice president): “[I said] ‘All right, you’re right. He’s got a lot more to worry about than my little WOW project.’” She concluded that she could “keep moving forward” to “overcome obstacles.” With these newfound resources, her resolve was renewed to conquer the obstacle: “[I] said, ‘All right, you’re right ... I’ll keep banging my head against the wall to make it happen.’” Similarly, Hannah (Admin), who we previously noted sought holding, explained how her colleague “reset my perception and reset my viewpoint [by saying] ‘[Hannah] on the whole, you’re doing great, don’t beat yourself up. This too shall pass.’ You know, [and give me] that level headedness to keep me from fleeing.” She continued: “The actual solution [to the obstacle] was something that [required] a lot of consultation, but as far as the drive to just keep going—it really ... [came from that] trusted friend. He’s got that, that skill set. You know ... definitely judgment free.” A tight holding

episode was crucial for conquering her obstacles—what she described as “the drive to keep going.” She attributed her ability to persist to the fact that “he was there for me in in a few dark moments.”

As the previous examples suggest, conquering behavior enabled by these resources usually led to the successful implementation of ideas, but the process of implementation was described as prolonged and arduous. For instance, Lori (Med) was working on implementing a new system that would automate how the MedCo pharmacy distributed medications. She faced a significant “last minute” obstacle when she found out that the program would require the approval of two external agencies, not just one. After engaging in a tight holding episode, her “incredibly frustrating” experience was diminished, allowing her to conquer it within the prescribed processes at MedCo: “We got all the required paperwork and everything together for the waiver process, [and] had multiple calls with the Board of Pharmacy.” Despite a very long road to completion—“the process just got held up, I would say, for a good year ... [holder] and I kept on pushing on”—shortly before the time of our interview, she received approval for her new program not only for MedCo but much to her surprise, for all hospitals throughout the state.

I think it was March or April, I got [a] notification from the Board of Pharmacy that they actually approved this program as a statewide approval. As long as you had all the technology systems outlined and you followed the map that we put together for how you train technicians and how you onboard them ... anyone in the state with those systems could use this in their organization. —Lori (Med)

Similarly, for Miriam (Admin), conquering—“banging [her] head against the wall” to work through MedCo processes—allowed her to implement the new WOW: “[A]nd it was months of just chasing my tail and trying to find resources, but we pulled it together.”

Loose Holding Trajectories

Our analysis revealed that some interpersonal holding episodes—and the broader holding trajectories that they set into motion—looked qualitatively different from tight holding episodes. We label the first of these two remaining paths *loose holding* trajectories. The loose holding episodes at the heart of loose holding trajectories were characterized not by a holder’s affirming concern for the innovator personally but by a focus on the innovation obstacle or failure that caused their distress.

Loose Holding Episodes. Loose holding still involved holders’ nonjudgmental attunement to the plight of those who sought holding. However, compared with tight holding episodes, loose holding episodes were more uplifting than validating, more directive than

receptive, and more focused on finding solutions than dwelling on distress. Metaphorically speaking, whereas tight holding was experienced by the held as an enveloping embrace, loose holding was experienced as more akin to a supportive hand on one's shoulder. Loose holding represented 34% of holding episodes in our data.

Holder Engagement: Redirection and Recommendations. What primarily differentiated loose holding episodes from tight holding episodes was that informants described holders as less focused on their distress (although innovators still felt that holders provided containment) and more focused on the obstacle itself. Emotionally, informants noted that their holder *redirected* their distress toward positive emotional alternatives. For instance, Jane (Med) recounted a holding episode in which her holder said, “Don’t give up! ... Don’t be so fixated that it did not come to fruition”—a response that felt qualitatively different from those that occurred in tight holding episodes. Similarly, Owen (Admin) explained how his holder encouraged him to move past his distress from a project that got stalled when “middle managers” shot down his idea: “And then they’re like, ‘Pull it together.’ I’m like, ‘I know, you’re right.’” Holders in loose holding episodes were attuned and judgement free—illustrated by statements such as “I didn’t feel like I was being judged” (Brittany, Med) and “she really fosters an environment where it’s safe” (Nadia, Med)—but innovators experienced this nonjudgemental attunement as oriented toward finding positives instead of dwelling on negatives.

The second defining characteristic of loose holding episodes was that holders provided *recommendations* for how innovators should address the obstacle. Holders shared fresh advice on how implementers might proceed but remained uninvolved in implementing that advice. For instance, Ophelia (Med) managed the inventory of surgical instruments and human tissues to be used in surgeries (e.g., tendons and organs). She was attempting to implement a new cataloging system that would replace a multistep paper process with a streamlined electronic one. This involved setting up new carts to organize equipment. However, other departments (e.g., surgical units) did not support the change, and leadership was leery of incurring costs. Facing the potential demise of the project, she engaged a holder: “I absolutely said, ‘I don’t know what else to do. I’ve tried everything.’” Instead of working with Ophelia, this holder recommended potential solutions as Ophelia explained: “I ran it by [holder] like, ‘This is what I’m looking to do.’ And she said ‘[only] if [other department] will go for it. Send the email. Don’t do the work yet. First send the email, see if it’s something that they’re willing to do.’” Similarly, Bianca (Med)

explained that when she faced an obstacle, she turned to her director. She described her director’s response as “Well, you know what, that’s a really great idea, but ... think about it this way instead.”

Providing recommendations contrasted with the assistance provided to those who were tightly held. Instead of a holder joining in and working *with* a distressed implementer, loose holding episodes involved a holder sharing advice but remaining largely uninvolved in the work itself. Joan (Med) described how her holder helped “guide” her “in the right direction to avoid [more problems].” Similarly, Shirley (Admin), who works on hospital-wide projects, recounted that her holder recommended potential solutions but “didn’t cramp [my] style” and “wasn’t part of any of [the] detail[s]” involved with enacting those solutions. She continued that her holder “wasn’t part of any of that detail ... it was a loose touch.” Kelsey (Admin) described how her holder “left me alone to kind of (pause) not alone in the sense that they weren’t supportive, but basically I ran [the process] and any little problems I took care of myself.” In contrast to the warm and caring affirmation and assistance that were characteristic of tight holding, we illustrate the encouraging yet “hands-off” nature of loose holding episodes, with a wider “orbit” between the holders and the innovators seeking holding (see Figure 1).

Innovator Emotional and Relational Resources: Distress Transformation and Endorsement. As with tight holding episodes, the redirection and recommendations that constituted loose holding episodes provided innovators with unique emotional and relational resources. Innovators in these episodes described a positive transformation of their distress and a sense of endorsement. To start, innovators in loose holding episodes consistently articulated a positive shift in their negative feelings. When describing how loose holding shaped their emotions, they noted a shift toward positive emotions that was qualitatively different from the distress reduction in tight holding. In other words, the arousal of their emotions remained high, but the valence seemed to positively shift. For instance, Owen (Admin) explained how his holder gave him newfound emotional energy for his project: “So you have to have a cheerleader, right? ... you have to have that energy because it is infectious.” Similarly, Theo (Med) explained how he went to a vice president when he ran into a frustrating challenge with an idea. This holder responded in a manner typical of loose holding, starting off by recommending novel courses of action that Theo had not thought of before: “[M]aybe [you] could go and move the needle a little bit this way.” He described how this experience generated positive energy: “[W]hen you leave, [you’re] better energized ... I get some additional energy for sure.” Cynthia

(Med) reflected on a similar experience with a holder: “I remember feeling really positive ... and just feeling excited [by the possibilities]. Yeah. It was uplifting.” As these examples illustrate, the emotional redirection characteristic of loose holding incited a positive shift in innovators’ emotions.

Loosely held innovators also garnered a sense of *endorsement*—a belief that the holder supported them up from the sidelines as they navigated the obstacle, even if the holder is not “in it” with them. Unlike anchoring, in which innovators felt like they had a partner who was in the trenches with them, endorsement involved innovators feeling like they had a cheerleader who supported them but was not involved in overcoming the obstacle with them. Beverly (Med) explained that after receiving pushback from providers when implementing a new postoperative care plan for heart surgery patients, she began feeling “reluctant” to continue and engaged a leader in her unit for interpersonal holding. She noted that her holder made her feel more positive and helped see new ways of moving forward. He endorsed Beverly by saying, “There’s a risk to anything. As long as you’re doing it according to guidelines and how you’re supposed to be doing it ... you’re good!” Similarly, Sandra (Med) explained how a holder fostered this sense of endorsement by saying things like “If you want to try it, go ahead!” Our informants who described loose holding episodes explained that their ideas were supported and approved of, but they were not necessarily gaining a “partner in crime” in their holder. Beverly (Med) noted that her loose holding episode made her feel like she had the “backup” of a holder, even though this holder did not provide hands-on assistance: “So knowing that I had the backup made me a lot more confident.”

These distinct emotional and relational resources bolstered the identities of innovators in a unique way. As noted, the affirmation in tight holding episodes served to validate innovators’ existing approach and reinforce their existing self-views as innovators. By contrast, the emotional redirection and novel recommendations characteristic of loose holding pushed those who were loosely held to conceive of what it meant to be an innovator in new ways; it helped them *expand* the meaning of their innovator identity. Jane (Med) was trying to implement a video conferencing platform that would allow her patients to meet with their physicians all at once virtually, but MedCo leadership refused to approve the platform. A holder subsequently encouraged her to not “give up” or “get fixated” on the problem. In this loose holding episode, she concluded that it was more important for innovators “to take care of people in real time” than to wait for approvals, thus proceeding to use the video platform without formal approval: “So I decided that we

had to do this, and it was taking longer than we wanted ... I’ve gone rogue.” Essentially, through this process, she came to view her identity as an innovator not only as meaning that she implements new ideas but that she does so as a “rogue.” Such terms were strong indicators of identity expansion, such as with Tammi (Med), who used the term “cowboy” to capture what being an innovator meant to her. She described facing numerous unexpected “hoops to jump through” when implementing a quality improvement program. Feeling stymied, she turned to a colleague in a different clinic who provided loose holding. With newfound energy, Tammi continued the project, telling the holder “I’ll do the work.” She later explained. “I want to be out there and be a cowboy.” By this, she was describing how being an innovator meant doing whatever it takes to get the innovation implemented, even if that means sidestepping the rules—a point that we turn to next.

Response to Obstacle and Implementation Outcome: Circumventing and Swift Implementation.

Taken together, the expanded definition of what it meant to be an innovator propelled our informants to “circumvent” the obstacles that derailed or threatened their innovations. Circumventing involved innovating outside of prescribed MedCo processes. This behavior was different from conquering as it involved not persisting in the same course of action but sidestepping obstacles—even if doing so meant eschewing standard practices or breaking rules. Newfound positive energy served as the ideal fuel for finding novel ways of approaching obstacles. Endorsement provided the belief that the innovation mattered and gave innovators the freedom to explore new ways of approaching it. Moreover, conceiving of their innovator identities in new ways also catalyzed this outside-the-box approach because doing so seemingly opened them up to new possibilities regarding themselves and—by extension—their work. Ophelia (Med) explained that being an innovator meant pushing against opposition. She circumvented the lack of support by implementing the system without other departments’ permission, explaining: “So essentially on Saturdays I’d come in and I would rework all of these park carts and try to get them in [the new] bin locations.” Similarly, Tammi (Med), the previously self-identified “cowboy,” notes that publishing her findings outside of MedCo “basically circumvents MedCo.” She said, “[When you] feel like you’re frustrated or stymied here, just ... say, ‘Okay, well I’m going to take my good idea and go elsewhere.’” This circumventing behavior enabled her to both publish her results and ultimately implement the program at MedCo, leveraging the legitimacy that the publication lent her. Vera (Med) likewise described circumventing as “finding a backdoor or a different leader to sign off on something.” Susan (Med) noted how she worked to “bypass

a lot of the red tape” (instead of working through it) by saying “okay, how can we rig this?” Bethany (Med) described circumventing as finding “a MacGyver fix to something” (referencing the TV show character who used nontraditional methods to solve problems).

Such an approach sometimes meant breaking the rules set forth by MedCo. As an example, Diana (Admin) went outside of her department and instead, worked with another department to complete a project that her director did not support. In describing this circumventing behavior, she explained: “I guess it’s like that old adage, ‘It’s easier to ask for forgiveness.’” Similarly, Sandra (Med) described implementing a new process for checking in patients more quickly at MedCo. After her supervisor refused to sign off on the new process, she described a loose holding episode, noting that her holder was “directive ... [saying], ‘OK Sandra, now you’ve got to do this, and now you’ve got to do this.’” After this experience, she found a way to implement the program without her supervisor’s approval, saying “I didn’t want to wait around any longer and I just did it and now it’s done.” She explained: “It’s kind of like that saying, it’s better to ... do it and then ask forgiveness.”

Compared with conquering obstacles, circumventing them typically led to swift implementation because innovators did not follow the cumbersome formal implementation processes typically required in MedCo. For instance, Ophelia (Med) was able to quickly implement the new cataloguing system and streamline both the processes for locating items and the processes for storing them. She observed that others who used the system (and challenged the implementation) eventually found out that the system had changed without their knowledge or buy-in: “They finally wised up that we pretty much were doing whatever we wanted and were getting away with it.” Despite the possibility of backlash, Ophelia explained that these other departments eventually saw the new system working well: “And so now we’re wrapped into [the new processes] as well as the [existing] system which is good. It really is.” She credited loose holding with propelling her—ultimately circumventing the obstacle and swiftly implementing the idea. In the same vein, Jane (Med), who implemented the video conferencing program after “going rogue,” explained that she began using the program almost immediately, resulting in a rapid implementation after she and her team “just created it ourselves.” As these examples illustrate, circumventing obstacles by working around the prescribed processes allowed innovators to implement their ideas at MedCo quickly.

Denied Holding Trajectories

When facing distressing obstacles to their innovative work, both tightly and loosely held innovators emerged with newfound resources that enabled

productive responses, albeit in different forms (i.e., conquering and circumventing). Yet, some distressed innovators who sought holding experienced negative outcomes. Our analysis suggests that when would-be holders responded in a way that rejected innovators’ attempts for holding, they initiated denied holding trajectories, which comprise the bottom path in Figure 1.

Denied Holding Episodes. Unlike in both tight and loose holding, which involved the nonjudgmental attunement to the plight of those who sought holding, denied holding was more akin to rejection of their plight. Denied holding episodes represented 30% of cases in our data. Martha (Med) described such a denial—an experience that took her by surprise:

I let this person know that I was feeling frustrated with our progress, I let this person know that I was feeling disappointed ... And it just wasn’t there. There was just a wall that was there. And ... there was never any resolution to the problem. It was more just kind of like, “Well, you know, I don’t know what to do in this situation” was the answer. So yeah, it was very frustrating. And it was very disappointing to not have somebody support me. —Martha (Med)

This metaphorical “wall” typified denied holding episodes. Instead of a “tight embrace” or a “hand on their shoulder,” these innovators’ experiences were more akin to receiving a “cold shoulder.”

Holder Engagement: Disregard and Disparagement.

The first defining characteristic of a denied holding episode was that innovators’ distress was *disregarded*. Those who experienced such disregard described their would-be holder as more concerned with past innovation failures than our informants’ distress. To illustrate, Spencer (Med), who worked in the radiology laboratory, was attempting to implement a new vacuum pump for removing blood clots. This pump allowed technicians to see clot removal and included new safety features, such as an automatic off switch when free-flowing blood was detected. He hit a significant roadblock when the new pump was rejected, despite his ability to secure one for free. Feeling very frustrated, he turned to a member of his department who served as “the primary one who handles all the supply management and inventory management.” However, this colleague brushed Spencer’s distress aside, saying, “Oh, well, what we have is good enough. We don’t really need this anyway.” Sandra (Med) similarly sought holding after receiving a “discouraging” rejection for approval to implement a new educational program: “I was more or less told [by my manager], ‘Listen, back off, back off. This is the way we [have done it].’ It was kind of like, ‘We’ve done it that way forever, so it works.’”

Travis (Admin) described a comparable experience when he was met with a “not my problem kind of attitude” toward his distress. Given the significant and self-defining role that innovation played for our informants, the blatant disregard of their distress was jarring.

The second defining characteristic of a denied holding episode was that innovators’ ideas were *disparaged*. Katherine (Med) tried to improve signage throughout the hospital to help direct patients to their destinations. She described feeling so frustrated by the process of implementing this necessary and simple idea that she “just wanted to create my own word document and blast it up there.” After bringing the idea up to others and failing to gain traction, she turned to her supervisor, someone she hoped would help assuage her distress and help her understand the pushback. However, the response was one of disregard and disparagement. Katherine recounted: “And it [meeting with her supervisor] was met with defense [when they said], ‘Oh, but this place is running good.’ And I’m like, ‘But it’s not, actually.’ ... [I]t makes me feel like I’m going insane!” Similarly, after receiving negative feedback about a proposal for a new fundraising tracking system, Diana (Admin) turned to a holder who told her to simply drop the idea altogether: “[A]nd again, that was the message, that ‘You need to let this go. You need to let this go. You need to stay in your lane.’”

Innovator Emotional and Relational Resources: Distress Amplification and Isolation. When innovators were denied holding, instead of gaining relational resources that fueled productive responses, their feelings of distress were amplified. After the blood pump idea that Spencer (Med) had was rejected and he was denied holding, his distress festered: “I mean, you hear about some new, beneficial thing and you want to try and help improve patient care ... [then you experience] failing to follow through and failing to embrace new technology ... that is definitely frustrating.” Katherine (Med), who we noted felt like she was going “insane” when the person who she turned to for holding did not provide it, said that “I think it certainly has a dampening effect ... it’s certainly not uplifting.”

Relationally, instead of feeling anchored or endorsed, denied holding cultivated feelings of isolation. Jane (Med), who sought to implement a revolutionary wellness initiative for maternity patients, went to the person who she thought could help her push the idea through but described the interaction as “demoralizing.” She continued that after repeated attempts in which she tried to reframe her innovation, she concluded, “I can’t. I don’t have enough stamina. I don’t have enough bandwidth. I don’t have enough support. I’m one person.” Shirley (Admin) provided another example of how lonely it felt to turn to someone for holding only to

be denied, saying “I feel like I’ve been relegated to the basement.”

This amplification of distress and sense of isolation resulted in stymied innovators feeling like their identities as innovators were *thwarted*. Take Hannah (Admin), who had turned to several others throughout the MedCo organization in moments of frustration but was denied. She said, “in my heart, what am I really? ... In my heart, I’d say I am [an innovator]. But in reality? I feel limited.” Shirley (Admin) similarly described her identity as an someone who champions new ideas being thwarted by interactions with a would-be holder who had limited experience with innovation at MedCo.

I’m used to sort of creating something from nothing and that’s what I thought I was being hired to do. I guess I’ve always been an innovator ... [but] I don’t know how much space there is for that ... I felt like I lost the ability to bring my insight about innovation ... so those are the things, I think, that really crush the kind of innovative spirit. —Shirley (Admin)

Response to Obstacle and Implementation Outcome: Conceding and No Implementation. In combination, the amplification of distress and sense of isolation that thwarted their identities as innovators resulted in those in denied holding trajectories conceding to the obstacles that threatened their innovative work. The amplified distress proved debilitating, and the sense of isolation made hope for a successful implementation feel futile. Finally, rejection of their identities as innovators fostered doubts about whether they could successfully implement ideas in MedCo. For these reasons, denied holding fostered conceding responses to obstacles.

For example, following an interaction with a would-be holder who disregarded the negative reaction of Barbara (Admin) to a technological failure, Barbara realized, “I think we’re hitting a wall moving the old system into the new system.” This left her feeling as though proceeding with the project was fruitless: “[I]t’s kind of a bummer that the work that you’re doing ... [is] just going to go nowhere. It’s been a year, and it’s not going to go anywhere.” She ultimately conceded to the obstacle, noting that “[i]t’s just kind of not working out.” Kabir (Admin) explained how he tried to implement something simple—a template that would streamline information shared across projects. However, he failed to get support from his team. Distressed, he turned to his supervisor for holding. After the denied holding episode, he concluded that he stood no chance of success “because I was new and the person that put [the old template] in place before me was an influential informal leader who had a relationship with my direct supervisor.” He ultimately conceded: “I realized, you know what? Give up on this because you know it’s not going to go anywhere.”

Not surprisingly, conceding to obstacles led informants to abandon their innovation. For instance, after having his emotions disregarded and his blood pump idea disparaged, Spencer (Med) spiraled further into distress, and he conceded to the obstacle: “[I]t’s just, if it’s not something that’s really worth it and really [even if it] is going to be an improvement or a benefit, it’s just not worth it.” In short, he never implemented the new pump, despondently stating: “Now we still have the old original version, where we could have had the new, the better one for free ... the whole thing just kind of got dropped.” Similarly, Jane (Med) explained how after being ignored by a person who she thought would provide holding, she never implemented the new program that she had been previously excited about: “And I gave up, I found that I couldn’t beat this, they beat me down ... It is demoralizing, but over time, you know that there’s just so much that a person can do.” Sandra (Med) similarly questioned if facing obstacles alone was worth it—ultimately concluding that it was not and giving up: “At first, I was like, ‘You know what, is this worth it? Is this really worth the headache? Maybe I should just forget it.’ That kind of thing, and then [I] kind of just dismissed it. That’s part of it. You just learn that it’s part of it. You got to grow up.”

Discussion

Innovative work is rife with obstacles (Rosso 2014). For innovators, who often view their innovative work as deeply important and even self-defining, such obstacles are distressing. Rather than processing this distress in isolation, our analysis suggests that innovators seek interpersonal holding from colleagues (Kahn 2001, 2025). Whereas past research on holding has largely focused on commonalities in the holding process, we find that interpersonal holding episodes can take starkly different forms. Our analysis allowed us to differentiate between three interpersonal holding trajectories, at the heart of which are tight holding episodes, loose holding episodes, and denied holding episodes. These episodes featured unique holder behaviors that endowed those seeking holding with distinct emotional and relational resources. These resources differentially shaped innovators’ identities, their responses to the obstacles that pushed them to seek holding in the first place, and the fates of their innovative projects. By closely examining interpersonal holding from the perspective of those who seek holding, our research makes important contributions to the literatures on holding innovation.

Contributions to Scholarship on Interpersonal Holding

Chief among our contributions is that we move the literature on interpersonal holding beyond understanding

the commonalities of the holding process to highlighting its differences across holding episodes. Tight holding episodes—with their caring affirmation of the distress of those who seek holding and their close engagement with the obstacles that caused their distress—bear some similarity with foundational theorizing on how holding is experienced more broadly (Kahn 2001). Yet, although these episodes emphasized what Kahn (2025) called exploration (i.e., exploring the distress of the held), they seemingly de-emphasized propulsion (i.e., the held feeling challenged to grow and develop). Conversely, loose holding episodes unfolded in a qualitatively different way. Through fresh ideas and encouragement to move past negative feelings, distressed innovators felt challenged and reinvigorated; their distress was not contained for containment’s sake but rather, for use as fuel to find a new path forward. These differences suggest that although interpersonal holding may entail a range of holder behaviors, they are not enacted uniformly across episodes of holding. Also, our analysis is one of the first to our knowledge to empirically examine denied holding, significantly extending theory on this phenomenon. We find that denied holding is a jarring experience that further disheartens workers as they go from suspecting that they may be in it alone to experiencing vivid confirmation of those suspicions.

By studying employees striving to implement new ideas while working around constraints typical of many demanding and turbulent modern jobs (albeit more prevalent in our research context), our data gave us a unique perspective into the varied experiences of seeking out interpersonal holding in an organization (Weiss and Rupp 2011). Although previous empirical work on interpersonal holding has studied mental health practitioners caring for patients in distress or addiction recovery workers trying to save recovering addicts from the temptation to relapse (Kahn 2025), those seeking holding in our study were innovators seeking psychological shelter from work-related distress in ways that were often unplanned, unscripted, and unofficial. Innovation, therefore, proved to be an ideal context for understanding variation in interpersonal holding as attempts to innovate have inherent variation. In the experience of distressing obstacles—which seem broadly relatable—receivers were not seeking extensive relationships with holders but rather, brief *episodes* of interpersonal holding with colleagues armed primarily with a willingness to provide them space to grapple with their distress. Our work should, therefore, direct scholars’ attention to *episodes* of interpersonal holding and their significant implications for workers seeking holding in organizations. For example, interpersonal holding episodes may underpin broader relational dynamics and provide insight into an organization’s broader relational system (Kahn 1998).

Thus, in a literature largely focused on either the macro conditions that facilitate holding (Van Buskirk and McGrath 1999; Petriglieri and Petriglieri 2020, 2022; Mobasser et al. 2024) or the behaviors holders employ (Kahn 2025), we explain unique trajectories that unfold as a result of the dynamic interactions between those who seek holding and their colleagues (i.e., interpersonal holding episodes). Because our data illuminated outcomes of innovation attempts, we got a rare look at how unique interpersonal holding episodes influence important organizational outcomes—something past research on holding and related concepts, such as interpersonal emotion regulation (Zaki and Williams 2013, Troth et al. 2018) or venting (Parlomis 2012, Behfar et al. 2020), rarely provided (see also Bindl 2019).

Variation in How Interpersonal Holding Shapes Identities. Our work also builds on past theoretical work that touts the importance of holding for receivers' identity work (Petriglieri and Petriglieri 2010). Notably, our data allowed us to build theory around how and why this happens. That is, beyond showing identity work (Snow and Anderson 1987, Kreiner et al. 2006) being supported by holding more broadly, we explain distinct and specific ways in which innovators' identities were shaped by different holding episodes. For instance, in tight holding episodes, validation of existing self-perceptions seemed to coincide with validation of innovators' existing approach—spurring conquering responses to obstacles. Conversely, the endorsement and novel recommendations characteristic of loose holding fostered an expansion in the way that our informants saw themselves as innovators. Such new ways of thinking about themselves seemed to open innovators to new ways of thinking about their work, ultimately fostering circumventing responses. It is perhaps for this reason that our informants were, in some cases, even willing to sidestep rules in a highly regulated work environment—because doing so was now consistent with the new meanings (e.g., “rogue” or “cowboy”) associated with their innovator identity. Finally, the disparaging experience of denied holding often thwarted innovators' conceptions of themselves as innovators. Their identity claims not being granted (DeRue and Ashford 2010) seeded doubts about their future as innovators and led them to concede to obstacles. By explicating the emotional resources that contributed to these identity dynamics, we answer calls for a better understanding of emotional dynamics in identity-related processes (Lepisto et al. 2015, Pratt et al. 2024).

Contributions to Scholarship on Innovation

Our work also makes important contributions to theoretical understandings of idea implementation—the

late stages of innovation (Grosser et al. 2018, Berg and Yu 2021). Given that ideas do not benefit organizations until they are implemented (Ananth and Harvey 2023), scholars have long been interested in understanding how employees can persevere in their attempts to innovate despite demoralizing obstacles and failures (Van de Ven 1986, Howell and Higgins 1990, Garud and Van De Ven 1992). This literature has recognized that social support is generally helpful in innovation (Madjar et al. 2002, Zhou and George 2003, Perry-Smith 2006, George and Zhou 2007, Madjar 2008, Baer et al. 2015). However, because social support is often measured as broad perceptions of being supported or not, this work says less about the specific characteristics of interactions that may differentially shape innovators' subsequent innovative work.

Our work sheds light on these specific interactions and their effects, highlighting the critical role of interpersonal holding. Our inductive, qualitative research design allowed us to go beyond measuring general perceptions of being supported (or not). Through deeply analyzing innovators' experiences, we explicated the specific characteristics of interpersonal holding episodes that fostered different innovation outcomes. Our research highlights the vital role that interpersonal holding plays for thwarted innovators and more generally illustrates the utility of looking beyond general social support. For instance, the specific ways that holders engaged with innovators' emotions (i.e., affirming or redirecting) and the obstacles that caused them (i.e., assisting or recommending) granted unique resources that shaped innovation outcomes in ways that previous research has not accounted for. We, therefore, provide a more nuanced and precise view of why and how certain types of interactions may influence the fates of innovators and their innovations. More broadly, our research suggests that organizations with holders who are more effective at providing tight or loose holding are likely to fortify innovators' efforts and ultimately, contribute to successful innovation.

Notably, such successful innovation can take two forms as different forms of interpersonal holding cultivate either compliant or defiant perseverance. That is, whereas some innovators persevered through setbacks to *conquer* them, others went outside of the prescribed channels to *circumvent* them. This circumventing behavior bears resemblance to “constructive deviance,” in which employees eschew “prescribed work-role behavior” with positive intentions (Warren 2003, p. 627). Instead of working through predefined processes, circumventing involves finding solutions that are sometimes outside of the organization's routines (or rules) altogether (see Vadera et al. 2013). This finding offers insights into the potential benefits and risks of different types of interpersonal holding. Colleagues or managers seeking to temper a colleague's

distress and help them stay the course may want to offer tight holding—especially in environments where circumventing behavior could pose regulatory or safety risks. Alternatively, if radical new approaches are needed to overcome obstacles and risks are low, offering loose holding could help inspire the innovator to think outside the box and ultimately, succeed more quickly.

Directions for Future Research

In addition to the seeds for future research that we have already planted, we see several other areas as potentially generative. To start, scholars might examine attributes of the relationship between the individual seeking holding and the potential holder as predictors of the different holding trajectories. Although not our primary focus, our analysis suggests that those who seek holding may play a more prominent role in shaping interpersonal holding than previously accounted for. For instance, there were hints in our data that innovators in tight holding trajectories often seemed to seek comfort from close friends at work, innovators in loose holding trajectories seemed to seek clarity about the innovation obstacle from “arms-length” colleagues who they perceived as particularly knowledgeable, and innovators in denied holding trajectories seemed to seek out potential holders rather unreflectively—typically someone who was organizationally assigned but relationally distant. Because such relational dynamics were not core to our data, we encourage future research to explore how the relationship between a holder and the held may shape holding dynamics.

We also encourage future work to explore individual-level factors that shape individuals’ motivations for seeking holding as well as individual-level characteristics of the holders who they seek out. Regarding the former, might distressed innovators with more secure “attachment styles”—which relate to being more comfortable relying on others when distressed (Fraley and Roisman 2019)—influence how they seek holding or who they engage? Regarding the latter, might some potential holders be better at discerning (Chan and Hedden 2023) the needs of distressed innovators, allowing them to more aptly determine whether a distressed colleague requires tight holding or loose holding? Or, might potential holders higher in empathy—an ability to feel others’ feelings (Haidt 2003, Dasborough et al. 2020)—be more likely to provide tight or loose holding? Exploring such characteristics of both holders and the held seems like a fruitful area for future research.

Finally, as with all nonobservational methods, it is possible that retrospective bias, which can be problematic when theorizing emotional responses to situations (Daft et al. 1987, Golden 1992), affected some of our interview data. However, many innovation attempts that we analyzed were recent or ongoing. Consequently,

the potential for retrospective bias was dampened, a conclusion supported by the emotive and animated nature of many of our interviews. Even though the active or recent nature of innovation attempts in our study alleviated issues associated with retrospective bias, future research might benefit from observing interpersonal holding even more expediently. A controlled experiment, for instance, could better assess the causal relationship between experiencing a particular type of holder response and individuals’ subsequent distress and identification (Singleton and Straits 1999).

Implications for Practice

Beyond the contributions and ideas for future research that we have described, our research has the potential to help managers and employees be more successful in overcoming obstacles to their innovative work. To start, our findings suggest that organizations should encourage managers to remain vigilant and attentive to the emotions of employees engaged in innovation. Because implementing new ideas is rife with potential for distressing obstacles, staying connected with employees undertaking innovative work may help managers shield them from a debilitating sense of isolation. As employees may shy away from expressing frustration or otherwise discussing setbacks openly to their direct managers (Morrison and Milliken 2000, Reid 2015), organizations should encourage managers to engage in such discussions either through formal practices, such as required check-ins, or informal ones, such as impromptu lunches with their employees. Indeed, far from being simple complaints (Schulte et al. 2015), reaching out to others to process their distress can spark interpersonal holding episodes that ultimately enable distressed implementers to persevere. Importantly, when responding to a distressed innovator, managers and colleagues should be aware of the implications of their responses for innovation in their organizations. Depending on the response that they might desire (either conquering or circumventing), a potential holder could tailor their engagement with the distressed innovator to affirm and assist or redirect and recommend, respectively. As our model illustrates, all potential holders would do well to avoid disregarding an innovator’s distress and disparaging their innovative work.

Conclusion

Whether because of new technologies, worldwide pandemics, or economic uncertainty, employees will continue to be called upon to innovate for their organizations to be successful. Although such innovation is vital, it is fraught with difficulty. This study reveals how different interpersonal holding trajectories and the unique interpersonal holding episodes at their

heart can significantly affect how innovators respond when they encounter the inevitable obstacles that plague innovative work. We hope that our findings will not only help scholars better understand the various ways that interpersonal holding unfolds at work but also help managers and employees enact beneficial innovations that enable their organizations to thrive in increasingly challenging environments.

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Appendix. Final Interview Protocol

General/Background Information

- What is your role?
- How long have you been at MedCo?

Obstacles When Engaging in Innovative Behavior (Experience of Holding)

- What does innovative behavior look like to you? How would you define it?
- Are you currently in the process of implementing anything new at work?
 - What is the story of the project?
 - How did you feel when you first started working on this project?
- What setbacks, if any, have you encountered during the course of this project?
 - How did you react to the setback(s)? (How did you feel when you encountered them?)
 - Why did you push through (or not push through) the barriers?
 - What role, if any, did others play in your experience of the setback?
 - Who, if anyone, did you reach out to after hitting that setback?
 - Why did you choose this person in particular?
 - What was your conversation like?
 - What did you say to her or him?
 - How did she or he respond?
 - How did your conversation with her or him make you feel?
 - How, if at all, were your feelings about your innovation different after that interaction?
 - Are there specific challenges you feel you cannot overcome?
 - What differentiates them from those you feel like you can overcome?
 - Have you ever had a time when you hit a setback when implementing a new idea and chose to keep it to yourself?

- If so, how, if at all, was this situation different from the one you described earlier (if applicable)?
- How did this setback make you feel?
- How did you respond to this setback?
- Can you tell me about a time when you tried to implement something new and it ended up dying?
 - What happened? How did you feel?
 - What role, if any, did other people play?

Final Questions

- Based on what we talked about today, is there anything else you think I should know?
- Sometimes, people have to be innovative, and other times, they have to maintain the status quo. Are there people at MedCo who you see as particularly innovative? As upholding the status quo? Would you be willing to share their names with us?

Endnotes

¹ Data collection spanned from early 2019 until early 2020.

² In general, healthcare occupations and professions are predominantly female. For example, healthcare practitioners and technicians are approximately 75% female (Data USA 2022). Therefore, although we did not intentionally seek out a particular gender distribution in our sample of informants, our overall sample largely mirrored the gender makeup of the medical industry.

³ All names are pseudonyms. “Admin” indicates that the informant held an administrative role at MedCo, and “Med” indicates that the informant held a medical role.

References

- Ananth P, Harvey S (2023) Ideas in the space between: Stockpiling and processes for managing ideas in developing a creative portfolio. *Admin. Sci. Quart.* 68(2):465–507.
- Baer M (2012) Putting creativity to work: The implementation of creative ideas in organizations. *Acad. Management J.* 55(5): 1102–1119.
- Baer M, Evans K, Oldham GR, Boasso A (2015) The social network side of individual innovation: A meta-analysis and path-analytic integration. *Organ. Psych. Rev.* 5(3):191–223.
- Bavik YL, Shaw JD, Wang XH (2020) Social support: Multidisciplinary review, synthesis, and future agenda. *Acad. Management Ann.* 14(2):726–758.
- Beane M, Anthony C (2024) Inverted apprenticeship: How senior occupational members develop practical expertise and preserve their position when new technologies arrive. *Organ. Sci.* 35(2): 405–431.
- Behfar KJ, Cronin MA, McCarthy K (2020) Realizing the upside of venting: The role of the “challenger listener”. *Acad. Management Discoveries* 6(4):609–630.
- Berg JM, Yu A (2021) Getting the picture too late: Handoffs and the effectiveness of idea implementation in creative work. *Acad. Management J.* 64(4):1191–1212.
- Bindl UK (2019) Work-related proactivity through the lens of narrative: Investigating emotional journeys in the process of making things happen. *Human Relations* 72(4):615–645.
- Branscombe NR, Ellemers N, Spears R, Doosje B (1999) The context and content of social identity threat. Ellemers N, Spears R, Doosje B, eds. *Social Identity: Context, Commitment, Content* (Blackwell Science, Chichester, UK), 35–58.
- Caza BB, Vough H, Puranik H (2018) Identity work in organizations and occupations: Definitions, theories, and pathways forward. *J. Organ. Behav.* 39(7):889–910.

- Chan CK, Hedden LN (2023) The role of discernment and modulation in enacting occupational values: How career advising professionals navigate tensions with clients. *Acad. Management J.* 66(1):276–305.
- Charmaz K (2014) *Constructing Grounded Theory* (SAGE, Thousand Oaks, CA).
- Chong S, Huang Y, Chang CH (2020) Supporting interdependent telework employees: A moderated-mediation model linking daily COVID-19 task setbacks to next-day work withdrawal. *J. Appl. Psych.* 105(12):1408–1422.
- Crosina E, Pratt MG, Lifshitz H (2024) A part of, or apart from, me?: Linking dynamic founder-venture identity relationships to new venture strategy. *Organ. Sci.* 35(6):2198–2222.
- Daft RL, Griffin RW, Yates V (1987) Retrospective accounts of research factors associated with significant and not-so-significant research outcomes. *Acad. Management J.* 30(4):763–785.
- Dasborough MT, Hannah ST, Zhu W (2020) The generation and function of moral emotions in teams: An integrative review. *J. Appl. Psych.* 105(5):433–452.
- Data USA (2022) Healthcare practitioners and technical occupations. Retrieved March 25, <https://datausa.io/profile/soc/healthcare-practitioners-technical-occupations#gender-and-age>.
- Dean JW Jr, Snell SA (1991) Integrated manufacturing and job design: Moderating effects of organizational inertia. *Acad. Management J.* 34(4):776–804.
- De Dreu CK, Baas M, Nijstad BA (2008) Hedonic tone and activation level in the mood-creativity link: Toward a dual pathway to creativity model. *J. Personality Soc. Psych.* 94(5):739–756.
- DeRue DS, Ashford SJ (2010) Who will lead and who will follow? A social process of leadership identity construction in organizations. *Acad. Management Rev.* 35(4):627–647.
- Dewar RD, Dutton JE (1986) The adoption of radical and incremental innovations: An empirical analysis. *Management Sci.* 32(11):1422–1433.
- Dougherty D, Hardy C (1996) Sustained product innovation in large, mature organizations: Overcoming innovation-to-organization problems. *Acad. Management J.* 39(5):1120–1153.
- Duckworth AL, Peterson C, Matthews MD, Kelly DR (2007) Grit: Perseverance and passion for long-term goals. *J. Personality Soc. Psych.* 92(6):1087–1101.
- Dutton JE (2003) *Energize Your Workplace: How to Create and Sustain High-Quality Connections at Work* (John Wiley & Sons, Hoboken, NJ).
- Emerson RM, Fretz RI, Shaw LL (2011) *Writing Ethnographic Fieldnotes*, 2nd ed. (University of Chicago Press, Chicago).
- Ford JD, Ford LW, D’Amelio A (2008) Resistance to change: The rest of the story. *Acad. Management Rev.* 33(2):362–377.
- Fraley RC, Roisman GI (2019) The development of adult attachment styles: Four lessons. *Current Opinions Psych.* 25:26–30.
- Garud R, Van De Ven AH (1992) An empirical evaluation of the internal corporate venturing process. *Strategic Management J.* 13(S1):93–109.
- Garud R, Tuertscher P, Van de Ven AH (2013) Perspectives on innovation processes. *Acad. Management Ann.* 7(1):775–819.
- George JM, Zhou J (2007) Dual tuning in a supportive context: Joint contributions of positive mood, negative mood, and supervisory behaviors to employee creativity. *Acad. Management J.* 50(3):605–622.
- Gilbert CG (2005) Unbundling the structure of inertia: Resource versus routine rigidity. *Acad. Management J.* 48(5):741–763.
- Glaser BG (1978) *Theoretical Sensitivity: Advances in the Methodology of Grounded Theory* (Sociology Press, Mill Valley, CA).
- Glaser BG, Strauss AL (1967) *The Discovery of Grounded Theory: Strategies for Qualitative Research* (Aldine Transaction, London).
- Golan ME, Bamberger PA (2015) Mapping the emergent choreography of assistance: The dynamics of dyadic peer helping relations in organizations. *Acad. Management Discoveries* 1(2):124–149.
- Golden BR (1992) The past is the past—Or is it? The use of retrospective accounts as indicators of past strategy. *Acad. Management J.* 35(4):848–860.
- Grant AM, Wade-Benzoni KA (2009) The hot and cool of death awareness at work: Mortality cues, aging, and self-protective and prosocial motivations. *Acad. Management Rev.* 34(4):600–622.
- Grodal S, Nelson AJ, Siino RM (2015) Help-seeking and help-giving as an organizational routine: Continual engagement in innovative work. *Acad. Management J.* 58(1):136–168.
- Grosser TJ, Obstfeld D, Choi EW, Woehler M, Lopez-Kidwell V, Labianca GJ, Borgatti SP (2018) A sociopolitical perspective on employee innovativeness and job performance: The role of political skill and network structure. *Organ. Sci.* 29(4):612–632.
- Haidt J (2003) The moral emotions. Davidson RJ, Scherer KR, Goldsmith HH, eds. *Handbook of Affective Sciences* (Oxford Academic, New York), 852–870.
- Hällgren M, Rouleau L, De Rond M (2018) A matter of life or death: How extreme context research matters for management and organization studies. *Acad. Management Ann.* 12(1):111–153.
- Howell JM, Higgins CA (1990) Champions of technological innovation. *Admin. Sci. Quart.* 35(2):317–341.
- Huy QN, Corley KG, Kraatz MS (2014) From support to mutiny: Shifting legitimacy judgments and emotional reactions impacting the implementation of radical change. *Acad. Management J.* 57(6):1650–1680.
- Jolly PM, Kong DT, Kim KY (2021) Social support at work: An integrative review. *J. Organ. Behav.* 42(2):229–251.
- Kahn WA (1998) Relational systems at work. *Res. Organ. Behav.* 20:39–76.
- Kahn WA (2001) Holding environments at work. *J. Appl. Behav. Sci.* 37(3):260–279.
- Kahn WA (2025) Through the narrows: The meaning and enactment of interpersonal holding. *Organ. Sci.* 36(1):340–360.
- Kreiner G (2015) Tabula geminus: A “both/and” approach to coding and theorizing. Elsbach KD, Kramer RM, eds. *Handbook of Qualitative Organizational Research: Innovative Pathways and Methods* (Routledge, New York), 350–361.
- Kreiner GE, Hollensbe EC, Sheep ML (2006) Where is the “me” among the “we?” Identity work and the search for optimal balance. *Acad. Management J.* 49(5):1031–1057.
- Lattacher W, Wdowiak MA (2020) Entrepreneurial learning from failure. A systematic review. *Internat. J. Entrepreneurial Behav. Res.* 26(5):1093–1131.
- Lempert L (2007) Asking questions of the data: Memo writing in the grounded theory tradition. Bryant A, Charmaz K, eds. *The SAGE Handbook of Grounded Theory* (SAGE, Thousand Oaks, CA), 245–264.
- Lepisto DA, Crosina E, Pratt MG (2015) Identity work within and beyond the professions: Toward a theoretical integration and extension. Desilva A, Aparicio M, eds. *International Handbook About Professional Identities* (Scientific & Academic Publishing, Rosemead, CA), 11–37.
- Lifshitz-Assaf H (2018) Dismantling knowledge boundaries at NASA: The critical role of professional identity in open innovation. *Admin. Sci. Quart.* 63(4):746–782.
- Lifshitz-Assaf H, Lebovitz S, Zalmanson L (2021) Minimal and adaptive coordination: How hackathons’ projects accelerate innovation without killing it. *Acad. Management J.* 64(3):684–715.
- Locke K (2001) *Grounded Theory in Management Research* (SAGE, Thousand Oaks, CA).
- Madjar N (2008) Emotional and informational support from different sources and employee creativity. *J. Occupational Organ. Psych.* 81(1):83–100.
- Madjar N, Oldham GR, Pratt MG (2002) There’s no place like home? The contributions of work and nonwork creativity support to employees’ creative performance. *Acad. Management J.* 45(4):757–767.
- Marshall C, Rossman GB (2014) *Designing Qualitative Research* (SAGE, Thousand Oaks, CA).
- Maslach C, Schaufeli WB, Leiter MP (2001) Job burnout. *Annual Rev. Psych.* 52:397–422.

- Miles MB, Huberman AM (1994) *Qualitative Data Analysis: An Expanded Sourcebook* (SAGE, Thousand Oaks, CA).
- Mobasser S, Kahn WA, Ely RJ (2024) Racial inequality in organizations: A systems psychodynamic perspective. *Acad. Management Rev.* 49(4):718–745.
- Morrison EW, Milliken FJ (2000) Organizational silence: A barrier to change and development in a pluralistic world. *Acad. Management Rev.* 25(4):706–725.
- Parlaman JD (2012) Venting as emotion regulation: The influence of venting responses and respondent identity on anger and emotional tone. *Internat. J. Conflict Management* 23(1):77–96.
- Perry-Smith JE (2006) Social yet creative: The role of social relationships in facilitating individual creativity. *Acad. Management J.* 49(1):85–101.
- Petriglieri JL (2011) Under threat: Responses to and the consequences of threats to individuals' identities. *Acad. Management Rev.* 36(4):641–662.
- Petriglieri G, Petriglieri JL (2010) Identity workspaces: The case of business schools. *Acad. Management Learn. Ed.* 9(1):44–60.
- Petriglieri G, Petriglieri JL (2020) The return of the oppressed: A systems psychodynamic approach to organization studies. *Acad. Management Ann.* 14(1):411–449.
- Petriglieri G, Petriglieri J (2022) The work is alive! Systems psychodynamics and the pursuit of pluralism without polarization in human relations. *Human Relations* 75(8):1431–1460.
- Petriglieri G, Ashford SJ, Wrzesniewski A (2019) Agony and ecstasy in the gig economy: Cultivating holding environments for precarious and personalized work identities. *Admin. Sci. Quart.* 64(1):124–170.
- Petriglieri G, Petriglieri JL, Wood JD (2018) Fast tracks and inner journeys: Crafting portable selves for contemporary careers. *Admin. Sci. Quart.* 63(3):479–525.
- Pirola-Merlo A, Härtel C, Mann L, Hirst G (2002) How leaders influence the impact of affective events on team climate and performance in R&D teams. *Leadership Quart.* 13(5):561–581.
- Pratt MG, Hedden LN, Khan H, Sala G, Sciarappa S (2024) Identity in and of organizations: Docents' guide through the Academy of Management Journals. *Acad. Management Collections* 3(2): 17–34.
- Reid E (2015) Embracing, passing, revealing, and the ideal worker image: How people navigate expected and experienced professional identities. *Organ. Sci.* 26(4):997–1017.
- Rosso BD (2014) Creativity and constraints: Exploring the role of constraints in the creative processes of research and development teams. *Organ. Stud.* 35(4):551–585.
- Scheepers D, Ellemers N (2005) When the pressure is up: The assessment of social identity threat in low and high status groups. *J. Experiment. Soc. Psych.* 41(2):192–200.
- Schinoff BS, Pillemer J, Rogers KM, Petriglieri JL (2025) Blurring boundaries in coworker relationships: How a nonwork setting becomes a relational holding environment. *Organ. Sci.*, ePub ahead of print March 17, <https://doi.org/10.1287/orsc.2022.17130>.
- Schulte EM, Lehmann-Willenbrock N, Kauffeld S (2015) Treat us fairly and we won't complain: Multilevel effects of procedural justice on complaining behavior in team meetings. *Psychology* 6(14):1795–1810.
- Shapiro ER, Carr AW (1993) *Lost in Familiar Places: Creating New Connections Between the Individual and Society* (Yale University Press, New Haven, CT).
- Shimoni B (2017) What is resistance to change? A habitus-oriented approach. *Acad. Management Perspect.* 31(4):257–270.
- Singleton R, Straits BC (1999) *Approaches to Social Research* (Oxford University Press, Oxford, UK).
- Snow DA, Anderson L (1987) Identity work among the homeless: The verbal construction and avowal of personal identities. *Amer. J. Sociol.* 92(6):1336–1371.
- Spector PE, Fox S (2002) An emotion-centered model of voluntary work behavior: Some parallels between counterproductive work behavior and organizational citizenship behavior. *Human Resource Management Rev.* 12(2):269–292.
- Stephens JP, Heaphy E, Dutton JE (2011) High-quality connections. Spreitzer GM, Cameron KS, eds. *The Oxford Handbook of Positive Organizational Scholarship* (Oxford University Press, Oxford, UK), 385–399.
- Strauss A, Corbin J (1998) *Basics of Qualitative Research Techniques* (SAGE, Thousand Oaks, CA).
- Strunk KS, Strich F (2023) Building professional holding environments for crowd work job crafting through online communities. *Inform. Systems J.* 33(5):1239–1274.
- Sverke M, Hellgren J, Näswall K (2002) No security: A meta-analysis and review of job insecurity and its consequences. *J. Occupational Health Psych.* 7(3):242–264.
- Thompson TA, Purdy JM (2009) When a good idea isn't enough: Curricular innovation as a political process. *Acad. Management Learn. Ed.* 8(2):188–207.
- Troth AC, Lawrence SA, Jordan PJ, Ashkanasy NM (2018) Interpersonal emotion regulation in the workplace: A conceptual and operational review and future research agenda: Interpersonal emotion regulation research. *Internat. J. Management Rev.* 20(2): 523–543.
- Vadera AK, Pratt MG, Mishra P (2013) Constructive deviance in organizations: Integrating and moving forward. *J. Management* 39(5):1221–1276.
- Van Buskirk W, McGrath D (1999) Organizational cultures as holding environments: A psychodynamic look at organizational symbolism. *Human Relations* 52(6):805–832.
- Van de Ven AH (1986) Central problems in the management of innovation. *Management Sci.* 32(5):590–607.
- Vuori TO, Huy QN (2016) Distributed attention and shared emotions in the innovation process: How Nokia lost the smartphone battle. *Admin. Sci. Quart.* 61(1):9–51.
- Warren DE (2003) Constructive and destructive deviance in organizations. *Acad. Management Rev.* 28(4):622–632.
- Weiss HM, Rupp DE (2011) Experiencing work: An essay on a person-centric work psychology. *Indust. Organ. Psych.* 4(1):83–97.
- Winnicott DW (1960) The theory of the parent-infant relationship. *Internat. J. Psychoanalysis* 41(6):585–595.
- Winnicott DW (1975) Transitional objects and transitional phenomena. *Through Pediatrics to Psychoanalysis: Collected Papers* (Karnac, London), 229–242.
- Yang E, DiBenigno J (2025) Opportunistic change during a punctuation: How and when the front lines can drive bursts of incremental change. *Organ. Sci.* 36(1):40–64.
- Yuan F, Woodman RW (2010) Innovative behavior in the workplace: The role of performance and image outcome expectations. *Acad. Management J.* 53(2):323–342.
- Zaki J, Williams WC (2013) Interpersonal emotion regulation. *Emotion* 13(5):803–810.
- Zhou J, George JM (2003) Awakening employee creativity: The role of leader emotional intelligence. *Leadership Quart.* 14(4–5):545–568.

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