

# Effect of Servant Leadership Style on Staff Nurse's Loyalty

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**Abstract:** Servant leadership is a philosophical practice of leadership that promotes nursing service, encourages loyalty, confidence, motivation, future oriented, and utilizes moral power to make powerful others for the moment leadership synchronization in organization which describes the culture within its association.

**Aim:** The aim of study was to assess the effect of servant leadership style on staff nurse's loyalty.

**Methods:** The study was performed at Oncology Center, Mansoura University. The subjects of the present study was included all accessible staff nurses during data collection (n=93). Two tools were used in this study the first tool was servant leadership style scale and the second tool was loyalty scale.

**Results:** There is statistically positively significant regarding director and head nurses servant leadership. As well as positive correlation between total score of servant leadership style subscale items and loyalty subscale items regarding head nurses.

**Recommendations:** Promote training in servant leadership principles. Improving nurse managers' servant leadership and empowering nurses to enhance their organizational loyalty, evaluate each level of nurse management on leadership competencies based on specific servant leadership behaviors and further researches on nurse's loyalty.

**Keywords:** Leadership, Servant Leader, Nurse's loyalty.

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## 1. INTRODUCTION

In recent years, servant leadership is the most influential style in the performance of any association whether it is private or public sector. This style influences the thought, attitude, behaviors of others and the styles of leaders used based on a mixture of their belief, value and preference. Organization advantages from accepting of how leadership engage staff nurse in day-to-day actions as the outcomes of this act contribute to the organization's capability to be efficient. Furthermore style influences place of work outcome such as nurse's engagement, loyalty and happiness (Rayan, et al, 2015).

Leadership is the mainly prominent factor in determining organizational culture so, ensuring the necessary leadership behaviors, strategies and qualities are developed (West, et al, 2015). Besides, leadership in common is consider a means of influence nurses within an organization in such a manner as to direct them and motivate them toward achieving specific common goals (Carter, 2012). Servant leadership is one leadership style philosophy that connects loosely to diverse leadership styles such as dependable, moral, charismatic and transformational in current organizations that promoting nurses achievement and loyalty which address the concern of ethics, patient experience and nurses loyalty as creating a single organizational culture where both leader and follower unite to arrive at organizational goals with no positional or authoritative power (Carter, 2012).

The idea of servant leadership is away from spiritual leadership and is on behalf of the top shape of leader's commitment to staff (John, et al, 2006). Servant leaders focus on identify and meet the desires of others slightly than trying to obtain power and wealth for themselves (Dennis and Bocarnea, 2005 and Prevost, 2017). As well as, centered on the core values of helpful and serving others and focus on the values of trust, admiration of others (McCann, et al, 2014). Servant

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leader has vital importance character include: listening, empathy, healing, awareness, affiliation, insight, stewardship, and commitment to the growth of people, building public character, caring leaders and image driven through these traits and positive ethics servant leaders encourage the best from all individuals (Prevost, 2017 and Larry, 2010).

Dimensional model of servant leadership includes: intentional subordination, authentic self, covenantal connection, dependable morality, transcendent spirituality and transforming influence (Sokoll, 2014). In addition another dimensional model were value for employees, being friendly and easy of approach, willing to sacrifice, being impartial and honest, pioneer spirit, provide direction of staff works, social dependability and empowering (Ding, et al, 2012 and Khan, 2017). Besides there are multilevel of servant leadership such as servant leadership at the individual level, servant leadership at the dyadic level, servant leadership at the group and organizational levels servant leadership (Brown and Bryant, 2015). The world is standing by for ethical and successful leadership that serves others, invest in their development and fulfills a shared image. Among the many leadership styles such as dictatorial, participatory the one that best represents the principles personified in the human factor is servant leadership (Rayan, et al, 2015).

Staff nurses loyalty is an important indicator and idea that describe the level to which the nurses are committed for their work and for their manager including realize their personnel responsibility for work and whether they tend to try to find new job opportunity or not (Coughlan, 2005). Staff nurses loyalty is one of the main responsibilities of the nursing manager thus the manager should have positive attitudes toward their nurses and they should have managerial and leadership skills to support and maintain their staff nurse's loyalty and commitment (Messmer and Turkel, 2010).

Loyalty defined as psychological connection or commitment to manager and develops as a outcome of raise satisfaction (Phaneuf, 2013). Loyalty is willingness of the staff nurses invests for hospital to strengthen the relationship between them and manager. Furthermore, manager support, team work, and work environment play crucial roles and significantly affect staff nurses loyalty to manager (Held, 2003). Loyalty has two dimensions such as internal and external dimension; the internal dimension is the emotional component and must be nurtured it includes feeling of helpful of attachment and of commitment. The external dimension has to do with the way loyalty manifested itself. This dimension is comprised of behaviors that exhibit the emotional element and is the part of loyalty that changes the most (Malfa, 2007).

Consequently there is obvious facts of the linkage between servant leadership and a range of important outcomes within health services, including staff nurses loyalty, patient satisfaction, patient mortality, organizational monetary performance, engagement, turnover, absenteeism and on the whole quality of care (West, et al, 2015).

**Significance of the study:**

The most difficult problem that trouble leader today to improve staff nurse's loyalty. To solve this problem several ways are proposed, along with which improving style of leadership is a key viewpoint, for that to some extent, leadership style determines the relationship involving leaders and staff nurses (Ding, et al, 2012). The problem is that staff nurses reported their dissatisfaction with their manager due to leadership style. As well as staff nurses might not be adapt to certain leadership styles resulting in low level of nurses' loyalty to their manager. Which return consequence, influenced the staff nurses' performance, working production and work environment in hospital. So, study aims to assess leadership style as perceived by staff nurses and it is effect on their loyalty.

**Research questions**

In this study were answered the research questions through analysis of data collected from the staff nurses these questions were:-

1. What is the servant leadership style perceived by staff nurses?
2. What are the levels of loyalty among staff nurses?
3. Is thererelation between servant leadership style and loyalty among staff nurses.

**2. SUBJECTS AND METHODS****Research Design:**

A descriptive design was used to carry out this study.

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### Setting:

The study was conducted at Oncology Center, Mansoura University. It is located in delta region which serving patients with cancer disease. It is composed of 11 floors with bed capacity of 500 beds.

### Subjects:

Subjects of present study was included all available staff nurses during data collection (n=93).

### Tools of data collection:

This study was used two tools:

**Tool 1: Servant Leadership style Scale:** consisted of two parts:

**Part 1: Personnel characteristics:** of staff nurses include: name (optional), age, educational qualification, years of experience, and marital status.

**Part 2: Servant Leadership style Scale:** Used to measure servant leader perceived as by staff nurses, developed by (Chiniara and Kathleen, 2016). It consists of two categories; category one is related to director (23) items divided into 6 subscales, the second category related to head nurses (26) item divided into 7 subscales.

Response to items was calculated on five point likert scale ranging from strongly agree (5) to strongly disagree (1).

**Tool 2: Loyalty scale:** This tool was used to measure staff nurses' loyalty, developed by (Chen, Tsui, and Fahr, 2002). It consists of 17 statement categories into 5 subscale divided into dedication of staff nurse (4 items), extra effort of staff nurse (3 items), attachment of staff nurse (4 items), identification of staff nurse (3 items) and internalization of staff nurse values (3 items).

Response to items was calculated on four point likert scale ranging from strongly agree (4) to strongly disagree (1).

Collect the score of items then multiplied the total score of this items, the percent was given and give it cut of point. Total scores were calculated and classified into two levels (low < 60% and high  $\geq$  60%).

### Ethical consideration:

- The researchers ensure that the right procedures were undertake concerning informed consent, autonomy, anonymity and the maintenance of confidentiality.
- Privacy of study sample was assured.

### Methods of data collection:

1. An official permission was obtained from the director of Oncology Center by approval of the protocol.
2. An informed okay for membership in the study was secured from the entire study subject.
3. Participation in research is voluntary. Each staff nurses may decide to stop completing the research and withdraw from the study at any time.
4. Tools was translated into Arabic and tested for validity by 3 experts from nursing administration department. The experts asked to answer on five point likert scale ranging from strongly relevance = 5 to strongly not relevance = 1. A pilot study was carried out on (10%) of staff nurses and excluded from the total sample to ensure clarity and relevancy of tools. Some questions were revised, deleted and rearranged to be easily understood and simple related words were used.
5. The staff nurses recorded the answers in the presence of the researcher to ascertain all questions were answered. The data was collected over period of three months started from November.

### Statistical analysis:

Data was carried out through organized, categorized, computerized, tabulated and analyzed using appropriate statistical Package for social Science (SPSS) version 21. ANOVA Independent test and qualitative, quantities approaches. Statistical presentation and analysis of the present study data was conducted using means, standard deviation, Pearson coefficient correlation test

### 3. RESULTS

Table (1): Personal characteristics of the studied nurses (n=93)

Personal characteristics	(n=93)	
	No	%
<b>Age (in years):</b>		
▪ ≤30	61	65.6
▪ 31-40	23	24.7
▪ >40	9	9.7
<b>Marital status:</b>		
▪ Ever married	72	77.4
▪ Never married	21	22.6
<b>Educational qualification:</b>		
▪ Bachelor degree	31	33.3
▪ Technical institute of nursing	28	30.1
▪ Diploma of nursing	34	36.6
<b>years of experience:</b>		
▪ ≤10	49	52.7
▪ 11-20	36	38.7
▪ >20	8	8.6

Table (1): represents personnel characteristics of studied nurses. According to this table the majority (65.6%) was in age group less than 30 years, the most of them were married (77.4%). About (36.6%) were diploma degree and 52.7% of them having experience less than ten year.

Table (2): Servant leadership styles mean score regarding head nurse and director as perceived by the studied nurses (n=93)

Servant leadership style subscales regarding head nurse	Mean (SD)	Total score	P value
1. Self-sacrificing	16.35 (3.11)	102.90 (15.90)	0.000***
2. Behaving ethically	12.84 (2.23)		
3. Respecting employees	16.17 (2.950)		
4. Caring about employees	15.21 (3.09)		
5. Helping employees to develop	15.34 (3.11)		
6. Empowering	15.11 (3.33)		
7. Sociability	11.84 (2.47)		
<b>Servant leadership style subscales regarding director</b>		82.38 (15.15)	0.000***
1. visioning	13.53 (3.31)		
2. Pioneering	13.63 (3.18)		
3. Visiting the frontline	10.43 (2.54)		
4. Taking social responsibility	17.04 (4.04)		
5. Self-sacrificing	14.81 (3.27)		
6. Behaving ethically	12.92 (2.49)		

\*\*Highly statistically significant (p ≤ 0.01)

Table (2): shows the servant leadership styles mean score regarding head nurse and director as perceived by the studied nurses. There is statistically positively significant regarding director and head nurses servant leadership with the highest total means score was 102.90 (15.90) regarding to head nurse as perceived by the studied nurses.

Table (3): Mean score of loyalty as perceived by the studied nurses (n=93)

Loyalty subscale (Each item scored 1-5)	Min - max	Mean(SD)
A. Dedication of staff nurses	4-18	12.86 (2.46)
B. Extra effort of staff nurses	5-14	10.80 (1.56)
C. Attachment of staff nurses	4-18	12.61 (2.94)
D. Identification of staff nurses	3-14	8.78 (2.86)
E. Internalization nurse's values of staff nurses	3-13	8.53 (2.81)
<b>Total loyalty score</b>	23 – 73	53.60 (10.43)

**Table (3):** Show mean score of loyalty as perceived by the studied nurses. The highest mean score was 12.86 (2.46) regarding dedication of staff nurses while lowest mean score 8.53 (2.81) regarding internalization nurse's values of staff nurses.

**Table (4):** loyalty levels as perceived by the studied nurses (n=93)

loyalty levels			
Low (<60%)		High (≥ 60%)	
No	%	No	%
30	32.3	63	67.7

**Table (4):** revealed that loyalty levels as perceived by the studied nurses. Majority of studied nurses (67.7%) reported high level of their loyalty.

**Table (5):** Correlation between total servant leadership style and total loyalty regarding director as perceived by the studied nurses (n=93)

Servant leadership style sub items regarding director	Loyalty subscale											
	Dedication		Extra effort		Attachment		Identification		Internalization		Total loyalty score	
	r	P	r	P	r	P	r	P	r	P	r	P
1. visioning	0.16	0.10	0.17	0.09	0.17	0.08	0.10	0.31	0.15	0.13	0.18	0.07
2. Pioneering	0.03	0.76	0.06	0.53	0.02	0.85	0.01	0.86	0.01	0.86	0.00	0.98
3. Visiting the frontline	0.03	0.72	0.17	0.09	0.06	0.51	0.07	0.49	0.03	0.76	0.08	0.43
4. Taking social responsibility	0.04	0.67	0.23	<b>0.02*</b>	0.07	0.50	0.06	0.51	0.00	0.94	0.08	0.41
5. Self-sacrificing	0.14	0.17	0.25	<b>0.01**</b>	0.16	0.11	0.08	0.41	0.14	0.18	0.08	0.08
6. Behaving ethically	0.13	0.21	0.02	0.82	0.14	0.17	0.11	0.27	0.15	0.14	0.17	0.15
<b>Total score</b>	0.11	0.27	0.20	<b>0.05*</b>	0.12	0.23	0.08	0.40	0.09	0.37	0.14	0.17

\* Statistically significant (P<0.05)

r=Correlation Coefficient

Table (5): shows correlation between servant leadership style sub items regarding director and loyalty as perceived by the studied nurses. There is no significant correlation between total score of servant leadership style and total loyalty subscale items except items of extra effort loyalty item with taking social responsibility and self-sacrificing item was positive correlation.

**Table (6):** Correlation between total servant leadership style and total loyalty regarding head nurses as perceived by the studied nurses (n=93)

Servant leadership style sub items regarding head nurses	Loyalty subscale											
	Dedication		Extra effort		Attachment		Identification		Internalization		Total loyalty score	
	r	P	r	P	r	P	r	P	r	P	r	P
1. Self-sacrificing	0.22	0.03	0.02	0.78	0.28	<b>0.006**</b>	0.25	<b>0.01**</b>	0.27	<b>0.008**</b>	0.28	<b>0.007**</b>
2. Behaving ethically	0.12	0.22	0.11	0.26	0.17	0.09	0.17	0.09	0.19	0.06	0.16	0.12
3. Respecting employees	0.03	0.75	0.08	0.40	0.13	0.18	0.22	<b>0.02*</b>	0.12	0.23	0.13	0.21
4. Caring about employees	0.20	<b>0.05*</b>	0.05	0.59	0.27	<b>0.007**</b>	0.32	<b>0.002**</b>	0.28	<b>0.005**</b>	0.30	<b>0.003**</b>
5. Helping employees to develop	0.30	<b>0.00**</b>	0.16	0.11	0.36	<b>0.000**</b>	0.37	<b>0.000**</b>	0.30	<b>0.004**</b>	0.38	<b>0.000**</b>
6. Empowering	0.22	<b>0.03*</b>	0.14	0.17	0.15	0.13	0.10	0.33	0.06	0.52	0.16	0.11
7. Sociability	0.26	0.26	0.00	0.98	0.25	<b>0.01**</b>	0.26	<b>0.01**</b>	0.27	<b>0.008**</b>	0.28	<b>0.006**</b>
<b>Total score</b>	0.25	<b>0.01**</b>	0.04	0.66	0.30	<b>0.003**</b>	0.31	<b>0.002**</b>	0.27	<b>0.008**</b>	0.31	<b>0.002**</b>

\* Statistically significant (P<0.05)

\*\*Highly statistically significant (p ≤ 0.01)

r=Correlation Coefficient

**Table 6:** Shows correlation between total servant leadership style and total loyalty regarding head nurses as perceived by the studied nurses. Shows statistically significant positive correlation between the total servant leadership style and total loyalty regarding head nurses.

#### 4. DISCUSSION

Staff nurses loyalty and commitment is essential organizational factor that depends on leadership style. In actuality, without continuous improvement in leadership style, organization could hardly utilize organization effectively and fail to retain loyal staff (**Khan & Ali, 2013; Rimes, 2012**). Servant leadership style it is very essential to retain staff nurses commitment and loyalty and to build good relation to agree to and face any challenge with well-built physical and mental support.

The present finding revealed that there were statistically positively significant regarding director and head nurses servant leadership as perceived by staff nurses. This means that leaders focus on identify and submit the needs of others rather than trying to obtain power and material goods for themselves. As well as, centered on the center values of caring and helping others and focus on the values of trust, enjoyment of others and empowerment.

This study consistent with **Muthia (2015)** found that perceptions of servant leadership styles as perceived staff nurses toward managers were highly positive significant. **Jones (2012)** found that the servant leadership behavior that held the top rank was the servant leaders' nature of providing opportunities for followers to professional development in the organization. **Hosseini et al (2016)** stated that servant leadership characteristics effect on employees to evaluate their leaders positively.

The present study showed that the highest total means score servant leadership was regarding to head nurse. This due to servant leader has vital traits include, listening, sympathy, healing, consciousness, advice, insight, stewardship, and commitment to the growth of nurses, building community character, caring that lead with these traits had positive effect on perception of staff nurses toward their head nurses. With the same line **Yukl (2010)** stated that nurses are more likely to appreciate and satisfied with head nurses who are perceived to show concern about their needs and well-being, which are aspects of servant leadership.

**Awee et al (2014)** stated that staff nurses performance will raise when they that inspect their head nurses as servant leader. **Krishnan (2015)** concluded that servant head nurses are instrumental in creating a positive work climate and so staff nurses feel a strong sense of shared organizational values.

This study proved that statistically significant positive correlation between total score of servant leadership style and total loyalty there was regarding head nurses. This result due to head nurses more contact to staff nurses and listen intently, understand the needs that lead to building a bond of trust with their staff nurses. The staff nurses tend to get motivated by the fact that the head nurse cares about their well-being. As well as their staff go beyond their call of duty and take up extra initiative that lead to develop an attachment and loyalty with their job and organization.

In congruent with this result **Hashim et al (2017)** he stated that servant leadership has a constructive and significant correlation among nurses' loyalty. **Charles (2015)** indicates that servant leadership increases nurses' trust, loyalty and satisfaction with the leaders. **Carter (2012)** discovered that servant leadership completely influences nurses engagement as contributing to employee loyalty to the place of work. As well as, view nurses as one of the best asset for organizations, maintaining loyal, productive employees while balancing earnings becomes a challenge for leaders, and drives the need to understand employee engagement drivers. Also, **Lee (2015)** supports the present study and stated that head nurses servant leadership supposed by clinical nurses was extensively influenced with their loyalty.

The present study reported that staff nurses have high level of their loyalty. With highest mean score was regarding dedication of staff nurses while lowest mean score regarding internalization nurse's values of staff nurses. That meant nurses have feeling with caring, valued, treated fairly and leader serves the needs that develop their desires to carry out the greatest in them and this in go round will build a sense of attachment and loyalty to organization they are serving.

This study consistent with **Xiyu (2010)** describes that staff nurse's loyalty as sense of recognition, enthusiasm to make additional efforts, attachment and perseverance and internalization. In the same vein **Yee, Yeung & Cheng (2010)** stated that when staff nurses are loyal towards their organization, they will perform their best to upkeep the good name of the organization.



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The present study showed that no statistically significant correlation between total score of servant leadership style and total loyalty regarding director except items of extra effort loyalty item with taking social responsibility and self-sacrificing item was positive correlation. That means director act as servant leader but not effect on their loyalty may be due to workload over her that lead to less concern to our needs and less time contact with their.

This study opposite with **Ding (2012)** found that there was considerable positive correlation involving the service-oriented leadership behavior and staff nurses loyalty. In same line **Sokoll (2014)** found that significantly those servant leadership behaviors of director uniquely and positively affect nurses' loyalty.

As well as, in the same concept **Schneider & George (2011)** found that perception of servant leadership styles were extremely correlated, but servant leadership was identified as a well again predictors of the nurses' loyalty. **Muthia and Krishnan** stated that leadership styles motivate the followers and thus we can infer that a strong relationship exists between these leadership styles and nurses loyalty.

Furthermore, **Donghong, Haiyan, and Yi Song, (2012)** showed that, to develop nurses loyalty, the managers should not just develop their servant leadership style, but also take into concern the individual desires to improve psychological satisfaction.

### 5. RECOMMENDATIONS

1. Continuous evaluated of leadership competencies based on servant leadership behaviors among all levels of management.
2. Create high-achieving environments through flexibility of policies in the organization to meet the nurses' needs.
3. Creating environment by director that empower and build a strong loyalty among nurses through rewarded spiritually to reinforce and motivate them, hence increase their loyalty to their organization.
4. Further researches are needed in areas of staff nurses loyalty influenced by servant leadership.

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