

How to Cite:

Jabeen, S., Sulzuna, A., Mushtaq, S., Bibi, R., Noureen, F., & Qousain, M. M. (2023). Influence of leadership styles of nurse' managers on their organizational performance and commitments during the COVID-19 in Punjab, Pakistan. *International Journal of Health Sciences*, 7(S1), 347–355. <https://doi.org/10.53730/ijhs.v7nS1.14206>

Influence of leadership styles of nurse' managers on their organizational performance and commitments during the COVID-19 in Punjab, Pakistan

Saira Jabeen

Charge Nurse, DHQ Teaching Hospital, Sargodha, Pakistan
Email: sairajabeen962@gmail.com

Atiqah Sulzuna

Charge Nurse, Lahore General Hospital/Ameer Ud Din Medical College, Lahore, Pakistan
Email: atiqahussain1985@gmail.com

Sadaf Mushtaq

Charge Nurse, Lady Willingdon Hospital, Lahore, Pakistan
Email: inbox.sadafmushtaq@gmail.com

Razia Bibi

Nursing Instructor, College of Nursing, Sahiwal, Pakistan
Email: raziaghafloor97@gmail.com

Fareeha Noureen

Assistant Nursing Instructor, College of Nursing, Bahawalnagar, Pakistan
Email: fareeha.noureen.hn@gmail.com

Muhammad Mutahir Qousain

Scholar, Department of Bio informatics, Comsats University Islamabad, Pakistan
Corresponding author email: mianmutahir8786@gmail.com

Abstract--Background: The pandemic Covid-19 has very impacted the physical, psychological and emotional well-being of the nurses which were directly linked with their performance. The objective of the study was to assess the relationship between the leadership styles of nurse' managers and their adherence with the organizational commitments and performance during the Covid-19 in Punjab, Pakistan. Methods: The nature of study was cross sectional and quantitative. The study was conducted in five public hospital located in District Lahore, Punjab i.e. Jinnah Hospital, General Hospital, Sheikh Zaid Hospital,

Services Hospital and Lady Willingdon Hospital. The participants of the study were nurses who have performed their duty in the Covid-19 ward. Out of 755 nurses, 200 nurses were selected for the interview through convenient sampling technique. The researchers used well-structured research instruments to interview the participants. The collected data was entered and analyzed by using SPSS version 26. The descriptive analysis was employed to measure the demographic characteristics of the participants. T-test and one-way ANOVA were also applied to observe the differences among the variables. At the end, Pearson's Correlation (bi-variate) were used to measure the extent of relationship between the leadership styles and nurse' organizational commitments. Results: The nurses revealed that nurse' managers usually applied idealized influence leadership styles to enhance the employees' performance. Year of experience and ward assignment were found statistically significant with employees' performance and organizational commitments. However, year of experience and ward assignment were found not significant with idealized influence, inspirational motivation, intellectual stimulation and management expectations. Further, year of experience and ward assignment were found connection with the individualized consideration, reward and laissez-fair leadership. Conclusion: It can be concluded that organizational performance and commitments are strictly adhered with the leadership of styles of the nurse' managers under Covid-19 scenario. Individualized consideration, reward and laissez-fair leadership styles has proved very instrumental in enhancing the nurse' performance during the Covid-19 in Punjab, Pakistan.

Keyword--influence, leadership styles, organizational performance, commitments.

Introduction

It is a striking fact that Covid-19 has impacted the world in every aspect. It has unleashed the multifaceted challenges for the human beings. The experience and exposure of the Covid-19 have left many lessons for human being to lessen the miseries of the world. It was an alarming call for the world leaders, health managers, health practitioners, policy makers and researchers to devise and adopt the new leadership roles to perform the effectively and efficiently under the Covid-19 scenario (Yuniawan et al., 2020). It is an admitted fact that doctors and nurses were directly contacted with patients affected by Covid-19 and they were at high risk vulnerable workers (Fernandez et al., 2020). They were fighting as frontline soldiers at their assigned borders against the Covid-19. On the other hand, they were suffering from physical, psychological and emotional instability due to the over-burden and relentlessly duty hours (Jim et al., 2018). In this dreary scenario, they were needed a blow of motivation and reward to keep them encouraged and motivated to save the world from this malaise (Marquis and Huston., 2017). Most importantly, role of leaderships and health managers were

highly instrumental to adhere the nurses with their organizational performance and commitments during the Covid-19 pandemic (Goldfarb et al., 2021).

No one can deny the fact that leadership roles and styles determine the performance of the health facilities and organizations. It also encourages the workers to stick with the organizational vision and goals under any uneven circumstances (Dirani et al., 2020). It can be stated beyond any doubt that leadership styles provide the oxygen and fuels to workers in terms of devotion and determination to enhance their potential and capacity (Al-Yami et al., 2018). Therefore, leadership styles of nurse' managers were highly significant and important for achieving the organization commitments under the Covid-19 scenario in Punjab, Pakistan (Ali et al., 2020). It was observed that only leadership roles were only panacea to cater the physical, psychological and emotional distress of the workers during the Covid-19 (Talu and Nazarov, 2020). It was also seen that nurse' performance were very highly impressive under the nurse' managers with the individualized consideration, reward and laissez-fair leadership roles (Al-Haroon et al., 2020). Indeed, physical and psychological support from the health managers were highly important for the emotional and physical well-being of the nurses (Sperling, 2021). Basically, it was a paradigm shift of the leadership roles from autocratic roles to laissez-fair roles to sustain the health of workers as well performance (Sabbah et al., 2020).

Significance of the study

This study is very significant for the leaders, health practitioners, managers, policy makers and planners to understand the importance of their nature and styles of roles during the Covid-19 in Punjab, Pakistan. It attempts to unearth the relationship between styles of managers and performance of nurses under the scenario of Covid-19. It is highly recognized that physical, psychological and emotional well-being of the nurses are highly pivotal to upheld the organizational commitments and performance under the distress circumstances during the Covid-19 in Punjab, Pakistan. Most significantly, this study draws the attention towards the leadership styles and roles of nurse' managers for enhancing the performance of the workers.

Objective of the study

The objective of the study was to assess the relationship between the leadership styles of nurse' managers and their adherence with the organizational commitments and performance during the Covid-19 in Punjab, Pakistan.

Materials and Methods

The nature of study was cross sectional and quantitative. The correlational research design was applied to establish the relationship between the leadership styles of nurse' managers and their adherence with the organizational commitments and performance during the Covid-19 in Punjab, Pakistan. The study was conducted in five public hospital located in District Lahore, Punjab i.e. Jinnah Hospital, General Hospital, Sheikh Zaid Hospital, Services Hospital and Lady Willingdon Hospital. The participants of the study were nurses who have

performed their duty in the Covid-19 ward. Out of 755 nurses, 200 nurses were selected for the interview through convenient sampling technique. This study was conducted from the February 2021 to March 2021 with the approval of medical superintendent of the concerned hospitals. Regarding the ethical considerations, a written consent was obtained from the participants and their confidentiality and information were assured. The researchers used well-structured research instruments to interview the participants. An orientation session was also conducted with the staff nurses in every hospitals to get the in-depth and grounded information. Two research questionnaires were used to get the objectified information i.e. Multifactor Leadership Questionnaire (MLQ), it was used to know the leadership styles. The second questionnaire known as the Organizational Performance and Commitments which measures the organizational commitments, performance and future desire to adhere with the organizational commitments. The collected data was entered and analyzed by using SPSS version 26. The descriptive analysis was employed to measure the demographic characteristics of the participants. T-test and one-way ANOVA were also applied to observe the differences among the variables. At the end, Pearson's Correlation (bi-variate) were used to measure the extent of relationship between the leadership styles and nurse' organizational commitments.

Results and Discussions

Table 1
Demographic Characteristics of the Respondents

Demographics		Frequency	Percentage
Age	Below 25 years old	14	7
	26-28 years old	40	20
	29-31 years old	56	28
	Above 32 years old	90	45
Marital Status	Un-married	36	18
	Married	164	82
Years of Experience	1-5	50	25
	6-10	110	55
	Above 11	40	20

The above table 1 depicts that 7% of the participants were aged below 25 years, 20% of the participants were aged between 26-28 years, 28% of the participants were aged between 29-31 years and most of the participants (45%) were aged above 32 years old. And, most of the participants (82%) were married and only 18% of the participants were un-married. Regarding the year of experience, most of the participants (55%) had 6-10 years of experience, 25% of the respondents had 1-5 years of experience and only 20% of the respondents had above 11 years of experience.

Table 2
Perceived level of organizational commitment and the leadership styles of nurse managers

Variables	Mean	Std	Interpretation	Highest possible range score
Organizational commitment	4.9670	0.92071		8
Factor 1 (idealized influence)	9.7553	1.99815	High	12
Factor 2 (inspirational motivation)	8.9961	1.66678	Moderate	12
Factor 3 (intellectual stimulation)	7.9975	1.98787	Moderate	12
Factor 4 (individual consideration)	8.8685	1.86711	Moderate	12
Factor 5 (contingent reward)	8.9280	1.67860	Moderate	12
Factor 6 (management by exception)	8.8856	1.89726	Moderate	12
Factor 7 (laissez-faire leadership)	7.5939	1.46312	Moderate	12

* Score range: high = 9-12, moderate = 5-8, low = 0-4

The above table 2 shows that employees' performance to organization commitment is 4.9 out of 8 and nurses perceived that idealized influence (9.75) is dominant leadership styles among the nurse managers, followed by the inspirational motivation (8.99) and contingent reward (8.92). They also stated that intellectual stimulation (7.99) and laissez-fair leadership styles were applied less.

Table 3
Differences between age group, organizational commitment, and leadership styles

Indicators	Age Group	Mean ± SD	Sig.
Organizational Commitment	<25 years old	4.64±0.722	0.192
	26-28 years old	4.72±0.602	
	29-31 years old	4.48±0.658	
	>32 years old	4.81±0.553	
Factor 1 (idealized influence)	<25 years old	10.62±0.955	0.041
	26-28 years old	9.61±1.76	
	29-31 years old	9.47±1.92	
	>32 years old	8.57±1.62	
Factor 2 (inspirational motivation)	<25 years old	8.22±2.99	0.183
	26-28 years old	8.00±1.96	
	29-31 years old	7.82±1.97	
	Above 32 years old	8.72±2.49	
Factor 3 (intellectual stimulation)	<25 years old	10.5±1.62	0.168
	26-28 years old	7.72±2.69	
	29-31 years old	7.69±1.96	
	>32 years old	7.20±1.52	
Factor 4 (individual consideration)	<25 years old	10.58±1.55	0.008
	26-28 years old	9.26±1.60	

	29-31 years old	8.44±1.88	
	>32 years old	8.26±1.92	
Factor 5 (contingent reward)	<25 years old	10.28±1.15	0.001
	26-28 years old	8.88±2.00	
	29-31 years old	7.60±1.82	
	>32 years old	7.53±1.43	
Factor 6 (management by exception)	<25 years old	10.16±0.690	0.105
	26-28 years old	8.89±1.72	
	29-31 years old	8.46±1.84	
	>32 years old	8.75±1.58	
Factor 7 (laissez-faire leadership)	<25 years old	9.65±0.497	0.001
	26-28 years old	7.94±2.37	
	29-31 years old	8.12±1.66	
	>32 years old	7.88±1.73	

The above table 3 reveals the Differences between age group, organizational commitment, and leadership styles. There is no significant relationship with different age group to organization performance and commitments ($p>0.192$). Similarly, there is no found connection between the different age group with the inspirational motivation ($p>0.183$) and intellectual stimulation ($p>0.168$). It is also found that there is strong relationship with different age group to contingent reward ($p<0.001$), laissez fair leadership ($p<0.001$) and individual consideration ($p<0.008$).

Table 4
Differences between years of experience, organizational commitment, and leadership styles

Indicators	Years of Experience	Mean ± SD	Sig.
Organizational commitment	1-5 years	4.42±0.473	0.007
	6-10 years	4.53±0.804	
	Above 11 years	4.34±0.678	
Factor 1 (idealized influence)	1-5 years	9.52±1.47	0.077
	6-10 years	9.34±2.19	
	Above 11 years	8.65±1.32	
Factor 2 (inspirational motivation)	1-5 years	8.23±1.74	0.285
	6-10 years	8.12±2.12	
	Above 11 years	7.56±1.69	
Factor 3 (intellectual stimulation)	1-5 years	7.62±2.25	0.876
	6-10 years	7.66±1.72	
	Above 11 years	7.84±1.14	
Factor 4 (individual consideration)	1-5 years	9.28±1.47	0.056
	6-10 years	8.31±1.68	
	Above 11 years	8.43±1.89	
Factor 5 (contingent reward)	1-5 years	8.24±1.81	0.001
	6-10 years	7.52±1.53	
	Above 11 years	8.38±1.84	

Factor 6 (management by exception)	1-5 years	9.24±1.46	0.85
	6-10 years	8.12±1.78	
	Above 11 years	8.45±1.29	
Factor 7 (laissez-faire leadership)	1-5 years	8.29±1.73	0.001
	6-10 years	7.35±1.67	
	Above 11 years	8.29±1.77	

The above table 4 shows the Differences between years of experience, organizational commitment, and leadership styles. There is a significant relationship with years of experience to organization performance and commitments ($p < 0.007$). Similarly, there is found a connection and difference between the years of experience with the contingent reward ($p < 0.001$) and laissez fair leadership ($p < 0.001$). It is also found that there is no relationship with years of experience to idealized influence ($p > 0.077$), inspirational motivation ($p > 0.285$), intellectual stimulation ($p > 0.876$) and management exception ($p > 0.85$).

Table 5
Differences between marital status, organizational commitment, and leadership styles

Indicators	Marital Status	Mean ± SD	Sig.
Organizational commitment	Married	4.42±1.17	0.053
	Un-married	4.54±0.465	
Factor 1 (idealized influence)	Married	8.33±1.68	0.035
	Un-married	9.25±1.37	
Factor 2 (inspirational motivation)	Married	6.26±1.85	0.001
	Un-married	8.31±1.66	
Factor 3 (intellectual stimulation)	Married	6.84±1.88	0.078
	Un-married	7.93±1.95	
Factor 4 (individual consideration)	Married	8.12±2.47	0.806
	Un-married	8.65±1.57	
Factor 5 (contingent reward)	Married	7.87±1.65	0.456
	Un-married	8.12±1.89	
Factor 6 (management by exception)	Married	8.89±1.94	0.606
	Un-married	8.63±1.57	
Factor 7 (laissez-faire leadership)	Married	7.45±1.70	0.107
	Un-married	7.64±1.58	

The above table 5 shows the Differences between marital status, organizational commitment, and leadership styles. There is a weak relationship with marital status to organization performance and commitments ($p < 0.053$). Similarly, there is found a connection and difference between the marital status with the inspirational motivation ($p < 0.001$) and idealized influence ($p < 0.0345$). It is also found that there is no relationship with marital status to individualized consideration ($p > 0.806$), management by exception ($p > 0.606$), contingent reward ($p > 0.456$), laissez-fair leadership ($p > 0.107$) and intellectual stimulation ($p > 0.078$).

Table 6
Relationship between organizational commitment and leadership styles

Indicators	R	Sig. (2-tailed)
Organizational commitment		
Factor 1 (idealized influence)	0.062	0.211
Factor 2 (inspirational motivation)	0.082	0.183
Factor 3 (intellectual stimulation)	0.048	0.348
Factor 4 (individual consideration)	0.066	0.269
Factor 5 (contingent reward)	0.054	0.413
Factor 6 (management by exception)	0.072	0.217
Factor 7 (laissez-faire leadership)	0.016	0.789

The above table 6 presents the relationship between organizational commitments and leadership styles. It can be gauged that there is no significant relationship between the organizational commitments and idealized influence ($p > 0.211$), inspirational motivation ($p > 0.183$), intellectual stimulation ($p > 0.348$), individual consideration ($p > 0.269$), contingent reward ($p > 0.413$), management by exception ($p > 0.217$) and laissez-faire leadership styles ($p > 0.789$).

Conclusion

The role and performance of the nurses under the Covid-19 are highly recognized and acknowledged. They fight relentlessly with bravely and determination against the surge of pandemic Covid-19 worldwide. In the same manner, the role and influence of nurse' managers in this dreary scenario was highly important to encourage the potential workforce of the nurses to cure the Covid-19 affected patients. In the light of the findings of the present study, it can be concluded that nurses perform their duty without any fear and risk. They were just adhered with the organizational commitments and performance to defeat the malaise of Covid-19 in Punjab, Pakistan.

Organizational commitments and performance of the nurses were highly influenced by the overwhelmed idealized influence, inspirational motivation and contingent reward. Additionally, it was also found that there were a significant relationship between the different age group with contingent reward, laissez-faire leadership and individual consideration. Similarly, it was also established that years of experience were quite significant to organization's commitments, contingent reward and laissez-faire leadership styles. And, marital status found connection just with inspirational motivation and idealized influence. Arguably, there were no significant relationship between the organization's commitments and leadership styles. It is recommended that effective leadership styles play a critical role in translating the organizational commitments and nurse' performance. Therefore, it high time for the nurse' managers to adopt influential leadership styles with the individual consideration and reward to support the nurses in terms of physical, psychological and emotional well-being.

References

1. Goldfarb N, Grinstein-Cohen O, Shamian J, Schwartz D, Zilber R, Hazan-Hazoref R, et al. Nurses' perceptions of the role of health organisations in building professional commitment: insights from an Israeli cross-sectional study during the COVID-19 pandemic. *J Nurs Manag.* 2021;29(5):1102–10.
2. Sperling D. Ethical dilemmas, perceived risk, and motivation among nurses during the COVID-19 pandemic. *Nurs Ethics.* 2021;28(1):9–22.
3. Galedar N, Toulabi T, Kamran A, Heydari H. Exploring nurses' perception of taking care of patients with coronavirus disease (COVID-19): a qualitative study. *Nursing Open.* 2020;8(1):171–79.
4. Dirani KM, Abadi M, Alizadeh A, Barhate B, Garza RC, Gunasekara N, et al. Leadership competencies and the essential role of human resource development in times of crisis: a response to Covid-19 pandemic. *Human Resource Dev Int.* 2020;23(4):380–94.
5. Talu S, Nazarov AD. Challenges and competencies of leadership in Covid-19 pandemic. *Adv Soc Sci Educ Humanit Res.* 2020;486: 518–24.
6. Ali HM, Abood SA, Thabet M. Relation between leadership styles and behaviors of nurse managers' and organizational commitment of staff nurses. *Minia Scientific Nurs J.* 2020; 7(1):54–62.
7. Sabbah IM, Ibrahim TT, Khamis RH, Bakhour HAM, Sabbah SM, Droubi NS, et al. The association of leadership styles and nurses well-being: A cross-sectional study in health-care settings. *Pan Afr Med J.* 2020;36:328.
8. Fernandez R, Lord H, Halcomb E, Moxham L, Middleton R, Alananzeh I, et al. Implications for COVID-19: a systematic review of nurses' experiences of working in acute care hospital settings during a respiratory pandemic. *Int J Nurs Stud.* 2020;111:103637.
9. Al-Haroon HI, Al-Qahtani MF. Assessment of organizational commitment among nurses in a major public hospital in Saudi Arabia. *J Multidiscip Healthc.* 2020;13:519–26.
10. Yuniawan A, Djastuti I, Hidayati R, Udin U. Investigating the effect of national culture and affective commitment on employee performance: An empirical study in Indonesian banking sector. *Revista Espacios.* 2020;41:6.
11. Jin GAM, Yuh AS, Roy DP. Leadership style of nurse managers as perceived by registered nurses: a cross-sectional survey (short communication). *Proc Singapore Healthc.* 2018; 27(3):205–10.
12. Al-Yami M, Galdas P, Watson R. Leadership style and organisational commitment among nursing staff in Saudi Arabia. *J Nurs Manag.* 2018;26(5):531–9.
13. Marquis BL, Huston CJ. Leadership roles and management functions in nursing: Theory and application. 9th ed. Philadelphia: Lippincott Williams & Wilkins; 2017.