The Relationship Between Self-leadership and Job Performance Among Staff Nurses in Jordan

Murad Saed[1] and Raya Alhusban[2(✉)]

[1] SEHA Ambulatory Health Care Service, Abu Dhabi, United Arab Emirates
[2] Nursing Faculty, Zarqa University, Zarqa, Jordan
ralhusban@zu.edu.jo

Abstract. The demand for high-quality care requires nurses to have self-leadership skills to improve their existing workforce and job performance. This study explored the relationship between self-leadership (SL) and job performance (JP) among nurses working in governmental hospitals in Jordan. A descriptive, correlational cross-sectional design was used, and a sample of 147 nurses completed the study. The revised SL questionnaire was used to measure the SL. In addition, the six-dimensional scale (6-DSNP) was used to measure job performance. The results showed that Jordanian nurses have a high perceived level of SL ($\bar{x} = 120.11$, SD $\pm$ 22.72) and job performance (SL ($\bar{x} = 146.48$, SD $\pm$ 25.82). Moreover, the results showed that nurses who have taken training courses have a higher mean score for SL and JP than nurses who did not. Also, nurses with master's degrees have higher mean scores for SL and JP than those with bachelor's degrees. There was a statistically significant positive relationship between self-leadership and JP ($r = 0.86$, $p = 0.001$). In conclusion, assessing self-leadership is crucial in enhancing the job performance of Jordanian nurses in governmental hospitals. Nursing leaders can enhance the self-leadership abilities among nursing staff by conducting training courses and advancing the educational level of their staff.

Keywords: Self-leadership · Job performance · Jordanian nurses. Governmental hospital

1 Introduction

The demand for high-quality care requires nurses to have leadership skills to improve the existing workforce [1]. A leader is "anyone who uses interpersonal skills to influence others to accomplish a specific goal" [2]. Leaders positively influence others to achieve the organization's goals by adopting formal or informal strategies [3]. The leader influences staff through legitimate authority and job descriptions in the organization, and leadership influences others with no specific job description [3]. Many theories have been formulated for effective leadership [1]. An example of this can be found in leadership styles, stating that SL (self-leadership) can help nursing staff to be good leaders [4].

Self-leadership is "the work of all behavioral and cognitive human elements to achieve self-improvement and to do the right task in the right way at the right time" [5]. The theoretical bases of the SL concept are the normative theory that comes from three primary dimensions: behavior, natural rewards, and Constructive Thought [6]. The behavioral dimension aims to improve individual awareness that leads to engaging in unpleasant tasks to achieve organizational goals and improve self-attentiveness of behavior during performing a job [6].

Leadership style is essential in maintaining JP, and Job Performance is the cornerstone to achieving all organization's goals. *Job performance* is "the way of performing the job to accomplish the organization's goals" [7]. Also, JP is defined as a group of tasks that must be completed during a limited time frame [8]. Moreover, JP can include all activities contributing to organizational goals and can be defined as the amount of expected benefit for the institution of an individual's various activities over a specified period [9]. The importance of awareness about SL skills among nurses was explored by [10], who found that training staff nurses about self–leadership significantly impacted staff nurses' performance. Similarly, Bozyiğit [11] conducted a study to identify the importance of the SL educational program among 144 staff nurses in Turkey; the researchers showed that staff nurses who received self–leadership training had higher scores about SL than those who did not take this education. Also, Mmakola, Mothiba, and Bopape [12] assessed the understanding of self-leadership during clinical learning of 250 staff nurses in South Africa. The researchers found that SL is seen as an acquired strategy that will improve during years of experience. Many researchers investigated the relationship between SL and JP. A study was conducted to identify the interaction between SL and JP among 213 staff nurses in Turkey; the researcher found that SL has a positive relationship with JP [13].

Furthermore, another study identified the impact of self-leadership on JP among 332 staff nurses in Turkey. Findings illustrated that implementing a high level of SL improved JP for staff, the overall organization's performance, and the quality of care provided to the patient [10]. Furthermore, job performance is positively related to the following concepts: job satisfaction [14], evidence-based practice [15], and communication competency [16]. The number of nursing staff in Jordan constantly increases, and Jordanian nurses work nationally and internationally. Thus, influencing nurses to be leaders in their hospitals and communities is highly recommended, and leadership enhancements are a strategic goal of the Jordanian Nursing Council to improve the quality of care for patients. Although, Self-leadership is a significant facet of improving job performance [5]. More studies should be conducted to explore the SL level and investigate the link between SL and JP. Therefore, the main aims of this study are to investigate the relationship between SL and JP, determine the level of SL and JP among nurses working in Governmental hospitals in Jordan, and explore the unique contribution of the demographic variables to the SL and JP.

2 Method

2.1 Research Design and Sampling

A Quantitative Cross-Sectional correlation design was selected for this study. A convenience sampling method was used to recruit the participants. The inclusion criteria include Jordanian staff nurses, shift in-charge nurses working in available units for a governmental hospital, and staff with a minimum experience of six months who have finished the orientation program and become familiar with their job description. Jordanian staff nurses were selected due to recruiting only locals in the governmental hospitals. In contrast, students and trainees working in hospitals, associate nurses, and nursing managers are excluded because they do not directly participate in patient care. A convenience sampling technique was used. Besides, the required sample size was calculated using the G*Power program version 3.1.9.2. Based on multiple linear regression analysis, with a medium effect size, a power $= 0.80$, $\alpha = 0.05$, and ten predictors (. A minimum sample of 118 participants was needed. However, the sample size was increased to 200 subjects to address the possibility of missing data or incomplete questionnaires. The actual sample size was 147 participants.

2.2 Instruments

The revised SL questionnaire (RSLQ) developed by Neck [5] was used to measure the self –leadership. It includes three main elements and nine dimensions with 35 items as follows: behavioral-focused elements that have five dimensions self-observation (four items),self-goal setting (five items), self-reward (three items), self-punishment (four items),self-cueing (two items), natural reward elements that have one dimension with five sub-items, and constructive thought elements that contain three dimensions; Visualizing successful performance (Five sub-items), self-talk (Three sub-items), and evaluating beliefs and assumptions(Four sub-items)The scale is a Likert-type scale ranging from 1 = strongly disagree to 5 = strongly agree; the highest score is 175, which means a high level of SL. The scoring for this tool is as follows, from 117- to175 indicates a high SL level, from 59–116 indicates a moderate SL level, and from 0–58 indicates a low SL level [5]. Conducted a study to check an SL questionnaire's test-retest reliability and construct validity (RSLQ). They found that the confirmatory factor analysis (CFA) that the measures of SL have good agreement with the self-leadership theory. This tool is reliable and valid for measuring SL based on this information. The instrument is available with appropriate permission [5].

The second instrument is the six-dimensional scale of nursing performance (6-DSNP) was used to measure JP. It showed good reliability and construct validity [17]. It contained six subscales with 52 items as follows: Interpersonal Relations/Communication (IRR/C) (12 items), Leadership subscale (5 items), Critical Care (CC) (7 items), Teaching/Collaboration (T/C) subscale (11 items), Planning/Evaluation (P/E) (7-items), and Professional Development (PD) (10- items). The 6-DSNP uses a rating scale of 4 points to rate the item as the quality of this behavior [17]. The tool was examined with factor analysis by [17]. Also, the reliability of the 6-DSNP ranged from 0.90 – 0.97 using Cronbach's alpha scores [17]. Due to the difference in the number

of items in each scale, the score is calculated depending on the average rating of all subscales; a higher score indicates good performance.

2.3 Data Collection Procedure and Ethical Consideration

After receiving the ethical approvals from Zarqa University and the Ministry of Health, the researcher approached the head nurses of the selected settings explaining to them the purpose of the study and asking them for the lists of staff's telephone numbers. Since due to the COVID-19 pandemic, the nurses were sent a link that includes a cover letter, a consent form, and the questionnaire (online Google form) via What Sapp inviting them to participate in the study. The electronic cover letter explains the purpose, risks, and benefits and explains to them that completing the electronic questionnaire was considered an implicit approval to participate in the study. The researcher assured them that their phone numbers and the information provided would be kept confidential. The research instrument was provided in the English language. Data collection was started on 15/03/2021 and finished on 15/5/2021. Furthermore, potential participants were assured that their information would be used only for research purposes, and they were assured anonymity and confidentiality; the participation was voluntary.

3   Results

3.1 Participants' Demographical Characteristics

The total number of participants was 147, with an average age of 31 years old of staff nurses ($\bar{x} = 31$, $SD \pm 2.54$), and the average number of years of work experience was 5.6 years. Also, the majority had a bachelor's degree (73.5%). Around half of the participants were married. Table 1 shows the demographic characteristics of the participants.

3.2 The Level of JP and SL and the Difference in the JP According to the Demographic Variables

The data were checked for normality using Shapiro-Wilk (for self-leadership $P = 0.190$ and JP $P = 0.203$) and Kolmogorov-Smirnov (for self-leadership $p = .079$ and JP $P = 0.200$). The self-leadership mean score was ($\bar{x} = 120.11$, $SD \pm 22.72$); this indicated that the staff nurse had a high perceived SL level. Also, the mean for JP was ($\bar{x} = 146.48$, $SD \pm 25.82$), which is close to the maximum value of the JP level. The mean score for staff nurses who had training courses ($\bar{x} = 141.55$, 13.5) was higher than those who did not take training courses ($\bar{x} = 108.37$, 17.577, t =, 11.817, $P < 0.001$). The mean score for staff nurses with master's degrees ($\bar{x} = 138.84$, $SD \pm 18.2$) was higher than those with bachelor's degrees ($\bar{x} = 113.35$, $SD \pm .20.296$, t = –6.896 $P < 0.001$) Moreover, it has been found that there is a statistically significant difference regarding gender; the mean score for females ($\bar{x} = 127.42$, $SD \pm 23.861$) was higher than their counterparts of males nurse ($\bar{x} = 110.36$, $SD \pm 16.879$, t = –5.076 $P < 0.001$). However, no statistically significant differences existed between marital status and the time shift.

Table 1. Demographic Characteristics of the Participants (n = 147)

Variables	Frequency	Percent
Marital status		
Single	72	49.0
Married	75	51.0
Gender		
Male	63	42.9
Female	84	57.1
Education degree		
Bachelor	108	73.5
Master	39	26.5
Position		
Staff nurse	125	85.0
Charge nurse	22	15.0
Income		
400-600jd	120	81.6
600–800 jd	27	18.4
Training courses taken		
Yes	52	35.4
No	95	64.6
Working time		
A, B, C, shift	83	56.5
Day, night shift	48	32.7
Fixed morning	16	10.9

3.3 The Relationship Between SL and JP

The findings of this study showed that there is a strong positive correlation between self-leadership and job performance F = 203.734, P<0.001, adjusted R square = .86. Also, there is a strong positive correlation between JP and Constructive thought sub scale t = 25.794, and the natural reward sub scale t = 25.071, P<0.001, adjusted R square = .811. Also, a strong positive correlation exists between JP and behavioral strategies subscale t = 37.970, P < 0.001, adjusted R square = .908.

Multiple linear regression analysis was used to determine the unique relationship between SL and the demographic characteristics of the participants. The overall regression model 1(gender, educational degree, training courses taken, position) was statistically significant, F = 49.400, p < 0.01, R = .725d, R square = .526, adjusted R square = .513. The model explained 51% of the variance in the self -leadership, as illustrated in Table 2.

Table 2. The Predictors of self- leadership (n = 147)

	B	Std. Error	Beta	t	Sig.
(Constant)	172.337	12.074	−190	14.273	.000
gender	-7.263	3.511	−159	−2.069	.040
training courses taken	-38.240	4.548	−807	−8.408	.000
position	10.185	3.830	.160	2.660	.009

Dependent Variable: total RSLQ

4 Discussion

The current study's findings indicated that participants reported high levels of SL. This result is consistent with the findings of Choi & Kim [18]. According to Gomes et al. [19]) the nurses' high use of self-goal setting, self-talk, and natural reward strategies, can lead to high self-leadership levels. Also, the findings of this study showed a high level of JP among staff nurses working in Jordan (M = 146.48, SD = 25.82), which is consistent with Ramadan et al. [15, 21, 22]. Ramadan et al. [20] found that the mean of the 6-DSNP scale score ranged from 135.29 to 163.2 in Egypt. Similarly, Platis et al. [14] studied the effect of job satisfaction on JP, and they found that the JP mean score was close to the maximum (M = 152). In addition, the findings showed statistically significant differences in SL according to gender, educational degree, and training courses. This result is consistent with the findings of Ugurluoglu et al. [22], who reported that females demonstrate higher levels of SL than males. Likewise, females are more likely to demonstrate SL behavior-focused, natural reward, and constructive thought strategies than males [23]. The results of this study showed that the staff nurses who had master's degrees had statistically significantly high JP mean scores than staff nurses with bachelor's degrees. These findings are consistent with the study of Rehman [24]. This result can be explained by the fact that employees with higher education are more invulnerable and sensible in their work, and they are more careful and productive compared to those with lower education levels.

Furthermore, this study showed a positive statistically significant association between self-leadership and JP. These results agree with [5, 15, 24] findings and align with the following studies [25, 26], in which SL and JP correlate positively.

According to the SL theoretical model developed by Neck &Manz [5], the SL improves commitment, independence, creativity, innovation, psychological empowerment, trust, team potency, positive effect, job satisfaction, and self-efficacy of the staff nurses that improve JP. For example, Şahin [13] found that SL had a positive relationship with JP, and Kayral [7] concluded that a high level of SL resulted in enhanced JP. These findings align with [14, 15] in which SL and JP correlate positively. Han and Kwon recommended a need for more focus on SL programs and workshops that help advance leadership and JP [25]. For example, Sahin [25] found that SL had a positive relationship with JP, as well as Kayral and Dülger [10]) concluded that good SL resulted in enhanced JP.

5 Conclusions

The results of this study highlighted important information regarding both the concept self – leadership and job performance and pinpointed the association between these concepts and specific demographic characteristics. Self-Leadership is a significant and crucial element in all organizations aiming to improve patient care and job performance. Measuring the relationship between SL and JP encourages the administrators and policymakers to adopt the self -leadership as an essential element and conduct training to enhance the SL abilities among staff nurses in Jordan. This study showed that participants have high levels of both SL AND JP. Moreover, the nursing curriculum should include the concept of self-leadership. Male nurses should be trained to enhance their capabilities and decrease their burnout. Further research is recommended to study the effect of demographical and self-leadership characteristics on staff and patient outcomes. Moreover, hospital managers can use the tool to obtain baseline data and assess the level of self-leadership among their staff, then build their courses accordingly.

References

1. Huber,DL.:eadershipandNursingCareManagement,2020 .:https://books.google.com/books?hl=en&lr=&id=OTg1DwAAQBAJ&oi=fnd&pg=PR1&ots=QrAvvOlhVz&sig=qPM_rt5NjK2xjwIlr1yoTmDNBUQ,Last accessed 2020/10/25
2. Eleanor J. Sullivan Effective. In Leadership and Management in Nursing, In 8th edition, pp. 19–30: Pearson US, (2012).
3. Sullivan, Eleanor J., and Phillip J. Decker. "Effective leadership and management in nursing." *AJN The American Journal of Nursing* 98.6 (1998).
4. Marquis, Bessie L., and Carol Jorgensen Huston. *Leadership roles and management functions in nursing: Theory and application.* Lippincott Williams & Wilkins, (2009).
5. Neck, Christopher P., and Charles C. Manz. *Mastering self-leadership: Empowering yourself for personal excellence.* pearson, (2010).
6. Neck, Christopher P., Charles C. Manz, and Jeffery D.: Houghton. *Self-leadership: The definitive guide to personal excellence.* Sage Publications, 2019.
7. Kayral, İbrahim H., and Dilek Dülger.: "The impact of self-leadership skills of healthcare employees on institutional performance and job performance." *Journal of Basic and Clinical Health Sciences* 3.3145–150. (2019)
8. Mmakola, M. A., T. M. Mothiba, and M. A. Bopape.: "Exploration of Student Nurses' Voices Regarding Self-Leadership in Clinical Learning at the Limpopo College of Nursing, South Africa." *Global Journal of Health Science* 11.4125-127 (2019): 125.
9. Şahin, F.: The interaction of SL and psychological climate on job performance. African Journal of Business Management, 5(5), 1787-1794(2011).
10. Hamouda, G. M., & El-Aliem, S. M. F.: Evaluating Nursing Staff SL Traits. IOSR Journal of Nursing and Health Science, 7(6), 56-61(2018).
11. Bozyiğit, Elif.: "The importance of leadership education in university: Self-leadership example." *International Education Studies* (2019).
12. Mmakola, M. A., T. M. Mothiba, and M. A. Bopape. "Exploration of Student Nurses' Voices Regarding Self-Leadership in Clinical Learning at the Limpopo College of Nursing, South Africa." *Global Journal of Health Science*, 125(11) (2019).
13. Kayral, İbrahim H., and Dilek Dülger. "The impact of self-leadership skills of healthcare employees on institutional performance and job performance." *Journal of Basic and Clinical Health Sciences* (3) 3 145–150(2019).

14. Platis, Ch, P. Reklitis, and S. Zimeras. "Relation between job satisfaction and job performance in healthcare services." *PROCEDIA-Social and behavioral sciences* (17) 5 480–487 (2015).
15. Prentiss, Andrea, and Eve Butler. "What's in a Name: Performance Improvement, Evidence-Based Practice, and Research?." *Nursing & Health Sciences Research Journal* (1)1140–45 (2018):.
16. Yukuung,K.: The effects of nurse 's communication and SL on nursing performance. *Korean Joccup Health Nurse*, (24) 1(2017).
17. Schwirian, P.: Nursing Performance Appraisal. https://www.scribd.com/document/394754277/12491-45268-1-PB(2020). Last accessed 2020/11/25.
18. Choi, Yeon Hee, and Hyeon Mi Kim. "Effect of self-leadership recognized by newly-employed nurses on job satisfaction: Mediating effect of organizational commitment." *Journal of Korean Academy of Psychiatric and Mental Health Nursing* (23) 4 242–249 (2014).
19. Gomes, Catarina, Luis Curral, and António Caetano. "The mediating effect of work engagement on the relationship between self-leadership and individual innovation." *International Journal of Innovation Management* 19.01 (2015)
20. Rehman, Saif UR, et al. "Impact of leadership behavior of a project manager on his/her subordinate's job-attitudes and job-outcomes." *Asia Pacific Management Review* (25) 1 38–47 (2020)
21. Tesfaye, Temamen, et al. "Assessment of factors affecting performance of nurses working at Jimma University Specialized Hospital in Jimma Town, Oromia Region, South-West Ethiopia." *J Nurs Care* (4) 6 312–316(2015
22. Ugurluoglu, Ozgur, et al. "Exploring the impacts of personal factors on self-leadership in a hospital setting." *The International journal of health planning and management* (30.1 3–13. (2015):
23. Norris, Sharon E. "An examination of self-leadership." *Emerging leadership journeys* (1).2 43–61 (2008).
24. Rehman, Saif UR, et al. "Impact of leadership behavior of a project manager on his/her subordinate's job-attitudes and job-outcomes." *Asia Pacific Management Review*(25) 1 38–47 (2020):.
25. Im, Sun Im, Jong Park, and Hye Sook Kim. "The effects of nurse's communication and self-leadership on nursing performance." *Korean Journal of Occupational Health Nursing* (21) 3 274–282(2012).
26. Han, A-Leum, and Suhye Kwon. "Effects of self-leadership and self-efficacy on nursing performance of nurses working in long-term care hospitals." *Journal of Korean Gerontological Nursing* (18) 12–21 (2016).