Relationship Between Nursing Managers’ Leadership Styles and Nurses’ Job
Burnout: A Study at Shahid Dr. Faghihi Hospital, Shiraz, Iran

Najme Ebrahimzade 1; Alireza Mooghali 1; Kamran Bagheri Lankarani 2; Ahmad Kalateh Sadati 2,*

1Department of Management, Payam Noor University, Shiraz, IR Iran
2Health Policy Research Center, Shiraz University of Medical Sciences, Shiraz, IR Iran
*Corresponding Author: Ahmad Kalateh Sadati, Health Policy Research Center, Shiraz University of Medical Sciences, P. O. Box: 71348-53185, Shiraz, IR Iran. Tel/Fax: +98-7132309615, E-mail: asadati@sums.ac.ir

Background: Burnout, which is mostly found among workers in social services like nursing and teaching, is a continued response to stressful stimuli at work.

Objectives: Considering the importance of management in nursing, we investigated the relationship between managers’ leadership styles and nurses’ burnout.

Patients and Methods: This cross-sectional study was performed at Shahid Dr. Faghihi Hospital, Shiraz, in 2011. It was based on the Maslach Burnout Model. A random sample of 207 nurses completed a questionnaire assessing demographic characteristics, a burnout measure, and the multifactor leadership questionnaire (MLQ). Data were statistically analyzed using SPSS. The study period was from January to March 2011.

Results: Burnout scores for emotional exhaustion were above average (27.26), for depersonalization were low (5.96), and for reduced personal accomplishment were high (30.85). In addition, both transformational (P = 0.03) and transactional leadership (P = 0.04) had a significant negative relationship with total burnout and also with emotional exhaustion (P value = 0.01) and depersonalization (P = 0.003). Laissez-faire leadership had a significant negative relationship with reduced personal accomplishment (P = 0.004).

Conclusions: This study sheds light on the effective role of transformational leadership in improving nursing management and reducing burnout among nurses. Because this style of leadership enhances creativity and motivation among nurses, it can decrease burnout. Transactional leadership, because of its emphasis on collaboration, also reduces burnout. Therefore a combination of these two styles can reduce nurses’ burnout.

Keywords: Nurses; Burnout; Leadership; Job Satisfaction

1. Background

One of the basic challenges to human health is stress, which leads to job burnout. Job burnout is a pattern which is related to emotional exhaustion which happen for people in a job (1, 2). Job burnout is a reaction to chronic occupational stresses; it is described in terms of emotional exhaustion, depersonalization, and reduced personal accomplishment (3, 4). The main dimension of job burnout is emotional exhaustion (5). Emotional exhaustion is specifically similar to psychological pressure, associated with a sense of strain and loss of emotional motivation in a person’s life (6-8). Job burnout has several negative consequences such as lack of self-confidence, poor job performance, increased abuse of drugs, and isolation from clients, the job, and the organization (9).

Burnout is a characterized by weakness and disappointment. It is generally associated with work anxiety, commitment to a cause, and a lifestyle that does not accord with the individual’s desires (10). Burnout has three dimensions. The first, exhaustion, refers to feeling overextended by people, emotionally or physically (11). People who feel exhaustion are unable to unwind and recover and are just as tired when they get up in the morning as when they go to bed. Their energy levels are reduced because of burnout. Lack of energy is the first reaction to the stress of job demands or major changes. The second dimension, cynicism, refers to a cold and distant attitude toward work and other people on the job (11). They have less involvement in and fewer ideals about the job. This is a kind of measure to protect themselves from exhaustion. They feel the future is uncertain, and this negative attitude reduces their self-efficacy, which then makes every new venture seem overwhelming (12). Leadership style has been shown to be related with job burnout (14-18). Two dimensions of leadership behavior are “consideration” and “initiating structure” (19). Burns proposed the concepts of transactional and transformational styles of leadership (20). He states that only transformational leaders can outline essential paths for...
new organizations, because they have main role in organizational changes. Bass identifies four components of transformational management: idealized influence (charisma), inspiration, intellectual stimulation, and individual consideration (21-24). Transformational authority was utilized throughout the undertaking, from the starting nearby planning, preparing and improvement, through to liaising with the suitable staff and choosing an assessment methodology (24). Transactional leaders concentrate on the relationship between themselves and their employees (20, 25). Another leadership style is laissez-faire. Such leaders have faith in their followers’ decision-making skills, allowing them autonomy in their tasks; therefore, it may be the best or worst leadership style (26). In case leaders withdraw excessively from employees, profitability, team cohesiveness, and a sense of fulfillment in employees may decline (27). The laissez-faire style has been shown to be destructive (28).

Stress is a well-known problem within the nursing profession (29, 30). Nurse burnout is a crucial issue for healthcare professionals. It affects nurse turnover and nursing shortage (31). Positive leadership in nursing coordinators directly and indirectly promotes a healthy work environment with lower conflicts, burnout, and psychosomatic disorders among nurses and limits the presence of negative workplace indicators.

2. Objectives

The goal of this study is to investigate the relationship between nursing managers’ leadership styles and nurse burnout.

3. Patients and Methods

This cross-sectional study was conducted in Shahid Dr. Faghihi Hospital, Shiraz, in 2011. Given that this is a descriptive correlational study, 179 out of the 334 nurses employed in the hospital were recruited, a number determined on the basis of Cochran’s sample size calculation formula. In order to account for non-responses or attrition, 230 questionnaires were distributed; 207 questionnaires were returned. Simple random sampling was used. Nurses completed (1) a questionnaire on demographic characteristics, (2) the Maslach burnout inventory, and (3) the multifactor leadership questionnaire (MLQ). The Maslach Burnout Inventory is the most widely used burnout measure. The current form contains 22 items, of which 9 address emotional exhaustion, 5 deal with depersonalization, and 8 measure reduced personal accomplishment within the profession. Cronbach’s alpha (a measure of internal consistency) was found to be 0.73, 0.81, and 0.70 for emotional exhaustion, depersonalization, and reduced personal accomplishment, respectively. The MLQ was used for the first time in Bass’s research (32). The latest version of MLQ was developed by Bass in 2000. It contains 36 questions that examine the components of transformational, transactional, and laissez-faire leadership styles (33). Moghli (34) found that this questionnaire has adequate reliability, with Cronbach’s alpha coefficients of 0.80, 0.76, and 0.95 for the subscales on transformational, transactional, and laissez-faire leadership styles, respectively, in the context of Iran.

Collected data were analyzed with SPSS 19 via independent t-tests, a one-way variance analysis of variance, and Pearson’s correlation analysis. The significance threshold was 0.05. Stepwise multiple regression analysis was conducted to determine the strongest predictors of burnout by using beta coefficients. The study followed the declaration of Helsinki (35).

4. Results

As mentioned previously, the final sample consisted of 207 nurses. Of them, 37 (17.9%) were men and 170 (82.1%) were women; 116 (56%) were married and 91 (44%) were single. Further, 145 participants were aged 22 - 23, 47 were aged 34 - 45 (22.7%), and 15 (7.2%) were above 45 years of age. In terms of professional experience, 35 participants (16.9%) had less than 2 years, 40 (19.3%) had between 2 and 5 years, and 132 (63.8%) had more than 5 years of work experience. In this hospital, nurses are informed about their schedules weekly. Of the sample, 11 nurses (5.3%) had morning shifts, 1 had (0.5%) an evening (early night) shift, 3 (1.4%) had late night shifts, and 192 (92.8%) had a rotating shift schedule (Table 1).

Participants scored as follows on the dimensions of burnout: 27.26 (moderately high), 5.96 (low), and 30.38 (high) for emotional exhaustion, depersonalization, and reduced personal accomplishment, respectively. Mean scores were compared by sex and marital status (Table 2).

Table 1. Descriptive Statistics of Participant Characteristics

<table>
<thead>
<tr>
<th>Demographic Features</th>
<th>Frequency (Percentage)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sex</strong></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>37 (17.9%)</td>
</tr>
<tr>
<td>Female</td>
<td>170 (82.1%)</td>
</tr>
<tr>
<td><strong>Age, y</strong></td>
<td></td>
</tr>
<tr>
<td>22 - 33</td>
<td>145 (70.1)</td>
</tr>
<tr>
<td>34 - 45</td>
<td>116 (52.7)</td>
</tr>
<tr>
<td>&gt; 45</td>
<td>15 (7.2)</td>
</tr>
<tr>
<td><strong>Marriage Status</strong></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>91 (44.0)</td>
</tr>
<tr>
<td>Married</td>
<td>116 (56.0)</td>
</tr>
<tr>
<td><strong>Professional Experience, y</strong></td>
<td></td>
</tr>
<tr>
<td>&lt; 2</td>
<td>35 (16.9)</td>
</tr>
<tr>
<td>2 - 5</td>
<td>40 (19.3)</td>
</tr>
<tr>
<td>&gt; 5</td>
<td>132 (63.8)</td>
</tr>
<tr>
<td><strong>Nursing Shift</strong></td>
<td></td>
</tr>
<tr>
<td>Morning</td>
<td>11 (5.3)</td>
</tr>
<tr>
<td>Evening</td>
<td>1 (0.5)</td>
</tr>
<tr>
<td>Late night</td>
<td>3 (1.4)</td>
</tr>
<tr>
<td>Rotating</td>
<td>192 (92.8)</td>
</tr>
</tbody>
</table>
Table 2. Comparison of Mean of Scores for Burnout by Sex and Marital Status

<table>
<thead>
<tr>
<th>Demographic Features</th>
<th>Burnout</th>
<th></th>
<th>Emotional Exhaustion</th>
<th></th>
<th>Depersonalization</th>
<th></th>
<th>Reduced Personal Accomplishment</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>P Value</td>
<td>Mean</td>
<td>P Value</td>
<td>Mean</td>
<td>P Value</td>
<td>Mean</td>
<td>P Value</td>
</tr>
<tr>
<td>Sex</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>63.97</td>
<td>0.966</td>
<td>26.51</td>
<td>0.676</td>
<td>6.02</td>
<td>0.944</td>
<td>31.43</td>
<td>0.666</td>
</tr>
<tr>
<td>Female</td>
<td>64.10</td>
<td>0.944</td>
<td>27.42</td>
<td>0.666</td>
<td>5.95</td>
<td>0.844</td>
<td>30.72</td>
<td>0.078</td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
<td>0.170</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>62.31</td>
<td>0.170</td>
<td>26.32</td>
<td>0.322</td>
<td>6.38</td>
<td>0.360</td>
<td>29.60</td>
<td>0.078</td>
</tr>
<tr>
<td>Married</td>
<td>65.45</td>
<td>0.170</td>
<td>27.99</td>
<td>0.322</td>
<td>5.63</td>
<td>0.360</td>
<td>31.82</td>
<td>0.078</td>
</tr>
</tbody>
</table>

Table 3. Pearson’s Correlation Coefficients Between Leadership Styles and Burnout and Its Components

<table>
<thead>
<tr>
<th>Leadership Style</th>
<th>Job Burnout</th>
<th></th>
<th>Emotional Exhaustion</th>
<th></th>
<th>Depersonalization</th>
<th></th>
<th>Reduced Personal Accomplishment</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>r</td>
<td>P Value</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transformational</td>
<td>-0.150</td>
<td>0.031^a</td>
<td>-0.172</td>
<td>0.013^a</td>
<td>-0.158</td>
<td>0.021</td>
<td>0.059</td>
<td>0.395</td>
</tr>
<tr>
<td>Transactional</td>
<td>-0.135</td>
<td>0.04^a</td>
<td>-0.165</td>
<td>0.018^a</td>
<td>-0.204</td>
<td>0.003</td>
<td>0.107</td>
<td>0.126</td>
</tr>
<tr>
<td>Laissez-faire</td>
<td>0.085</td>
<td>0.222</td>
<td>-0.005</td>
<td>0.943</td>
<td>-0.080</td>
<td>0.254</td>
<td>-0.199</td>
<td>0.004^b</td>
</tr>
</tbody>
</table>

^a Significant at P < 0.05.
^b Significant at P < 0.01.

Table 2 shows no significant difference between the groups. Thus, sex and marital status do not have an effect on burnout score.

To investigate the relationship between leadership styles and burnout, Pearson’s correlation analysis was used. Transformational leadership (P = 0.031) and transactional leadership (P = 0.04) both had a negative relationship with burnout. Among the components of burnout, depersonalization was related to transformational leadership (P = 0.023) and transactional leadership (P = 0.003). However, there was not any significant relationship between transformational leadership and transactional leadership and burnout. Finally, the laissez-faire style was not significantly related to overall burnout or depersonalization but was significantly related to reduced personal accomplishment (P = 0.004) (Table 3).

5. Discussion

The goal of this study was to evaluate the relationship between nursing managers’ leadership styles and nurses’ job burnout at Shahid Dr. Faghihi Hospital. Results show a negative relationship between transformational leadership and job burnout in general as well as emotional exhaustion and depersonalization. This suggests that managers’ reliance on the transformational style in the society under study could reduce the degree of burnout in general and emotional exhaustion and depersonalization specifically. This finding is in line with Hawks’ (36) results on the effect of managers’ leadership style on burnout in an administrative environment, as well as Xirasagar’s (25) research on managers’ leadership styles (transformational and transactional) and high-school teachers’ burnout in four educational districts in Shiraz, Iran.

Transformational managers possess insight and use new methods to inspire employees to ponder over issues, encourage them to take a part in the future of the organization, consider personal differences, and stimulate and foster self-confidence in employees by entrusting responsibilities to them. The present results indicate that by increasing organizational commitment and improving organizational culture, such managers can reduce burnout, emotional exhaustion, and depersonalization in employees.

No relationship was found between transformational style and reduced personal accomplishment. This finding contradicts Hawks’ (36) observations, although it is in line with Xirasagar’s (25) research. Furthermore, no relationship was found between transactional leadership and reduced personal accomplishment; this supports Hawks’ findings. The level of reduced personal accomplishment, reduced competence and capabilities, and negative self-evaluation differed across age groups and did not have a relationship with the other variables. This finding implies that such problems are affected more by personal factors such as age than by leadership style. Furthermore, transactional leadership had a significant negative relationship with burnout in general as well as with emotional exhaustion and depersonalization. This finding is in line with Hawks’ observations (36). Transactional leaders facilitate interactions by establishing commitment to the organization, identifying
ways in which employees' needs can be fulfilled. Such managers help employees based on their efforts; look into problems, discrepancies, and exceptions; and take corrective measures. They also rely on a performance-based reward system to acknowledge good performance or exert contingent penalties for deviations from standard action, encouraging nurses and increasing their job satisfaction. Thus, job burnout, emotional exhaustion, and depersonalization could be reduced.

Laissez-faire leadership was not found to be related to nurses' job burnout in general or emotional exhaustion or depersonalization. Laissez-faire is the most passive leadership style. Leaders following this style refrain from decision-making, entrust responsibilities to others, are absent at critical points, and have a detached role in administering the affairs and the situations governing the organization. Therefore, they do not have a considerable effect on their followers' burnout, emotional exhaustion, and depersonalization.

Furthermore, no relationship was found between laissez-faire and reduced personal accomplishment. This finding is in line with what Gousy and Green (24) observed in his dissertation on the relationship between perceived leadership styles of human service administrators and their followers' scores on the Maslach burnout inventory. The use of this style may lead to lack of motivation in employees and finally to reduced personal accomplishment, because of its passive approach.

Analysis of the relationship between demographic characteristics and components of burnout showed that gender was not significantly related to either burnout or its components. Age too was not significantly related to burnout in general or to emotional exhaustion and depersonalization. This result is compatible with previous findings (37, 38).

However, reduced personal accomplishment scores significantly differed by age, a finding in line with the observations of Hawks (36) as well as Abdi Masooleh et al. (39). Burnout and its components did not significantly differ by marital status, results compatible with the findings of Agbi (40). Work experience too was not significantly related to burnout in general or its components. Agbi (40) and Kim et al. (41) report similar findings. Finally, neither burnout nor its components significantly differed across work shifts, results compatible with the findings of Agbi (40). The present results, in conjunction with previous literature, show that nursing leaders play an undisputable role in providing a positive work environment that reduces nurses' job burnout (42-45).

5.1. Limitations of the Study

Because this study was conducted when nurses were working, some questionnaires had missing responses that limited the analysis.

Leadership style plays an important role in nursing burnout. Nursing leaders can provide space for interaction so that nurses feel better. This reduces work strain and psychological pressure, ultimately lowering burnout. Transformational and transactional leadership styles had significant effects on reducing burnout. These findings are related to the nature of these two styles of leadership. Transformational leadership focuses on motivation and creativity, and transactional leadership increases participation in decision making. Thus, these two styles help nurses to enhance their capabilities. In contrast, the laissez-faire style of leadership has a negative effect on the job environment and leads to reduced personal accomplishment. Therefore, a combination of transformational and transactional styles should be used to improve nurses' job environment.

Authors' Contributions

All authors had equal roles.

References


40. Agbi RO. Burnout of nursing staff working with geriatric residents. Beckley, West Virginia: Mountain State Univ; 2009.


