

## Leadership behavior as perceived by clinical teacher and nursing students

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**Abstract:** Leadership behavior of clinical teacher influences the effectiveness of clinical teaching. However, leader perception of their leadership behavior might be different with follower perception of it. Based on it, the study aim to describe the relationship between clinical teacher perception of leadership behavior and compared with student perception of it. 27 clinical teachers and 214 nursing students were participated in this study using Multifactor Leadership Questionnaire (MLQ). The results revealed statistically significance difference between leadership behaviour perception of clinical teacher and their students ( $p < 0.05$ ).

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### 1. Introduction

Leadership in nursing education is essential for the quality of nursing curriculum. Particularly, for clinical teaching, clinical teachers act as the leader and nursing students act as their followers. Consequently, leadership behavior of clinical teacher influenced the quality of nursing education. In Saudi Arabia, nursing educator struggles to improve their graduate students in order to fulfill the needs of healthcare system in the Kingdom. Leadership behavior of clinical teachers influence the quality of clinical teaching. Concomitantly, deeper understanding of leadership behaviour of clinical teacher helping in creating framework of nursing education leadership studies in Saudi Arabia.

### Leadership

The study of leadership started since the beginning of civilization. It goes parallel with organization study so when organization evolved to become a supportive and positive environment, the focus of leader also shifted 1. Sullivan E & Decker P (2005) 2 defined leadership as a process of uses interpersonal skills to influence others to accomplish specific goals. Leadership requires attending to and acknowledging others and being authentic and accountable 2. In addition, Yukl (1999) 3 defines leadership as an alternative perspective in a shared process of enhancing the collective and individual capacity for people to accomplish their work roles effectively.

Based on the literature, a lot of leadership style that consider popular. One of it is the transformational leadership style. The transformational leaders are proactive in many different and unique ways. These leaders attempt to optimize development, not just performance. Development encompasses the maturation of ability, motivation, attitudes, and values 4-6. Another approach by Yukl (2009) 3 stated that transformational leadership involves motivating individuals to do something different from before, or to do more than initially expected. In other words transformational leaders are change agents, visionaries and calculated risk-takers 6.

### Nursing Education

In nursing education, particularly, clinical teacher is important factor in improving the quality of education. They are responsible for teaching and learning process. They are the key for nursing as a profession. Therefore, nurse educator effective leaderships are essential for the improvement of nursing education 7.

Many challenges that faced by the clinical teacher regarding the shortages of faculty number and changes roles. To cope with the increase number of students which is not proportionate pace with the faculty number, it is important to increase efficiency of faculty member. One of way to increase efficiency is through periodic career counseling regarding leadership development and interdisciplinary functioning 8. In scope of teacher role, currently, the

role of supervision in clinical teaching was not only to support students to gain their practical skills, but also to facilitate students to reach clinical proficiency by means that reflects along with students' peers and the supervisors able to display different attributes 8-9.

Sutkin, Wagner and Schiffer (2008) 10 stated that excellent clinical teaching, although multifactorial, transcends ordinary teaching, characterized by inspiring, supporting, actively involving, and communicating with students. Teachers who not only supervise students in their development of technical skills and applied knowledge but also serve as role models of the values and attributes of the profession for the life of a professional. As a result excellence teacher increases performance of student whereas bad teacher lead in low performance of student 11.

The relationship between clinical teacher and nursing student, it can be analogue like link between leader and follower. As stated by Theofanidis and Dikatanidou (2006) 12 that nursing tutors can act as leaders by generating student motivation. Nevertheless, Johnson-Farmer and Frenn (2009) 13 stated that teaching excellence was found to be a dynamic process, which includes active engagement of both students and faculties. Furthermore, Sawatzky, et al. (2009) 14 found that to become the best leader, it needs to be started with learning the basic understanding of what is leadership and how all the skills involved could be developed. Especially in academic setting, the leadership style academia plays an important role in student learning, they are responsible for preparation of the taskforce/manpower needed for the community development. They are the major factors that actualize the university roles; they are the cornerstones upon which any educational reforms are based whether updating or improving 14.

Particularly in Saudi, some leadership studies in Kingdom Saudi Arabia had been performed 15-18. The most recent study was conducted by Al-Kherb (1996) 15 which was about the relationship between principals length of administrative experience and organizational leadership behaviour in elementary schools in Saudi Arabia. This studied recommended the use of transformational leadership for schools in Saudi Arabia. The other researcher was conducted during 1980's by Al-Magidi (1989) 17 investigated the leadership behaviour of public elementary school principals as perceived by principals and their teacher in a selected school district in the south region of Saudi Arabia. The main important conclusion of the researcher was the principals perceived themselves as exhibiting leadership behaviour categories often to very often more than their teacher did. It showed the principals perceive themselves higher in positive

dimensions rather than teacher did (Al-Magidi, 1989) 17.

### Significance of the study

Based on the all studies described, researchers have found that the leadership is one of the most significant factors affecting the quality of nursing education. However, in the Kingdom Saudi Arabia limited studies have been conducted regarding nursing leadership. Therefore, the goal of this study was to assess relationship between leadership behavior of clinical teacher from their own point of view (self-assessment) and also from the nursing student perception (observer-assessment).

### Purpose

The objective of this study was to assess the relationship of clinical teacher leadership behaviour as perceived by themselves and by their students at CON.

## 2. Methods

### Research design

Correlational design was used in this study

### Setting and sample

The study was conducted at CON, King Saud University (KSU), Riyadh. The academic education departments (n=4), namely: 1) medical surgical nursing; 2) community health and psychiatric nursing; 3) maternity and pediatric nursing; 4) nursing administration and education. Concomitantly, the nursing student group was consisted of student from level 4<sup>th</sup> – 8<sup>th</sup>.

A non-probability, convenience sample was used in the present study. Inclusion criteria were established for both subject groups to control some variables. In the current study, for clinical teachers group, the inclusion criteria were have a direct contact with students at clinical settings and willing to participate in the study. Because of small number of clinical teachers, the inclusion criteria regarding year of experience was eliminated; total number of subject as clinical teacher was (n=27). For the second group who were nursing students, the inclusion criteria were having direct contact with clinical teachers and voluntary participation in the study; total number of nursing students( n= 214). Total number of clinical teacher was 31 so there were only 4 respondents not participated due to maternity leave. For the nursing student, total sample was 286 and it was distributed from fourth until eight level semesters. In average, the participant rate for the nursing student was approximately 75% whereas for the clinical teacher was 87%.

## Instruments

In the current study, the questionnaire used as an instrument for data collection. Particularly, the tool used in this study was Multifactorial Leadership Questionnaire (MLQ) of 5x-short. This type of MLQ is for organizational survey and research purpose and for preparation of individual leader report. This questionnaire developed by Bass and Avolio (2005) it is used to measure leadership behaviours as perceived by nursing clinical teachers and nursing students through reference to “self” and “observers”. Permission to use this questionnaire was obtained from Mind Garden as official institution for MLQ researchers.

The MLQ consists of three main components of leadership behaviour, namely: 1) transformational leadership behaviour consists of 20 item questions, it is divided into five main sub items, namely: idealized influence (attributed), idealized influence (behaviour), inspirational motivation, intellectual stimulation and, individualized consideration; 2) transactional leadership consist of 8 item questions. It is divided into two main types, namely: contingent reward and, active management by exception; 3) passive/avoidant behaviour grouped into two also, namely: passive management by exception and, laissez-faire. All those components in each sub grouping were consisted of four questions. Each questions assessed by likert rating scale ranging from 0 “Not at all” to 4 “Frequently, if not always”.

In addition, demographic characteristics for nursing clinical teachers and nursing students were added. For clinical teachers, the demographic questions contain of six questions, which were: age, marital status, academic departments, years of experience, level of education and nationality. In other hand, for the demographic of nursing student consisted only from three questions, which were: age, marital status and level of education. Moreover, ethical consideration with a brief explanation about aim of the study and ensure anonymous of subjects was attached in each questionnaire. Instruction to the respondent was provided.

## Procedures

After obtaining the official permissions from the CON administration and heads of academic departments, pilot study was carried out on 10% of clinical teachers who were previously affiliated to academic departments and nursing students in order to ensure clarity of tools and time consumption for filling the questionnaire. The decision was made to conduct the pilot study on those subjects in order not to contaminate the sample, for their limited number. Accordingly, they were excluded from the main study sample.

Directly after the pilot study and revision of it, the self-administered questionnaire was distributed to both subjects group. In this study, questionnaire for clinical teacher was distributed during their work hours in college. As well as for nursing student, questionnaire was given during their study activities in college and in clinical settings. Duration time for data collection was from May – July 2009.

## Statistical analysis

The Statistical Packages for Social Science (SPSS 17) were used for performing the statistical analysis. A p-value <0.05 was considered statistically significant.

## 3. Results

The respondent consisted of 214 nursing students and 27 clinical teachers. All the respondents were female due to gender separation of education system in Saudi Arabia. Generally, the nationality of respondents for both clinical teachers and nursing students were Saudi. However, two clinical teachers were considered non-Saudi.

Table (1) illustrates that the mean score of teacher higher compared with students, except for the passive/avoidant domains. Management by exception active and passive not able to shows significance difference whereas other domains gives statistically significance difference ( $p < 0.05$ ). Whereas, in table (2) it is clearly seen that there predominant leadership style between nursing teachers and student with  $p$ -value < 0.001\*.

For clinical teacher, idealized influence (behavior) with the intellectual stimulation, individual consideration and contingent reward give positive statistically significance difference correlation ( $p < 0.05$  and  $p < 0.01$ ). Consequently, contingent reward also positively statistically significance difference with idealized influence (behavior), intellectual stimulation and individualized consideration ( $p < 0.01$ ). Though most of the correlation is positive, in the other hand for leadership domain of intellectual stimulation, active and passive management by exception and laissez faire show some negative statistically significance difference correlation (table 3).

Following it, in nursing student group, the matrix table reflects that laissez-faire leadership statistically give significance difference when correlated with all leadership domains ( $p < 0.05$ ;  $p < 0.01$ ). The correlation between leadership domain become lesser as the leadership character become more transformational and it is show with idealized influence (attribute) that not have any correlation with other leadership domain (table 3).

**Table 1. Comparison of leadership scores between nursing teachers and students**

Leadership score domains	Group (mean±SD)		Mann Whitney Test	p-value
	Teachers (n=27)	Students (n=214)		
Transformational:				
Idealized Influence (Attributed)	2.8±0.6	2.0±0.8	27.46	<0.001*
Idealized Influence (Behavior)	2.7±0.6	2.1±0.6	22.28	<0.001*
Inspirational Motivation	3.0±0.4	2.1±0.8	33.48	<0.001*
Intellectual Stimulation	3.0±0.5	2.0±0.7	41.35	<0.001*
Individual Consideration	3.1±0.5	2.1±0.8	38.27	<0.001*
Total	2.9±0.3	2.1±0.6	45.77	<0.001*
Transactional:				
Contingent Reward	2.9±0.5	2.0±0.7	38.44	<0.001*
Management-by-Exception (Active)	2.1±0.7	2.1±0.8	0.00	0.97
Total	2.5±0.4	2.0±0.6	17.23	<0.001*
Passive/avoidant:				
Management-by-Exception (Passive)	1.5±0.8	1.8±0.7	2.75	0.10
Laissez-faire Leadership	1.2±0.6	1.8±0.7	17.80	<0.001*
Total	1.3±0.6	1.8±0.6	12.65	<0.001*

(\* ) Statistically significant at p<0.05

**Table 2. Comparison of predominant leadership style between nursing teachers and students**

	Group				X <sup>2</sup> Test	p-value
	Teachers (n=27)		Students (n=214)			
	No.	%	No.	%		
Transformational	22	81.5	61	28.5	30.22	<0.001*
Transactional	2	7.4	71	33.2		
Laissez-faire (passive/avoidant)	2	7.4	72	33.6		
Mixed	1	3.7	10	4.7		

(\* ) Statistically significant at p<0.05

**Table 3. Correlation matrix of leadership scores components for clinical teachers and nursing teachers**

Leadership score domains	Pearson correlation coefficients (r)															
	Leadership score domains															
	IIA		IIB		IM		IS		IC		CR		MBEA		MBEP	
	CT	NS	CT	NS	CT	NS	CT	NS	CT	NS	CT	NS	CT	NS	CT	NS
IIA																
IIB	.305	.582**														
IM	.335	.622**	.043	.647**												
IS	.016	.540**	.412*	.585**	-.057	.548**										
IC	.340	.569**	.524**	.688**	.175	.647**	.449*	.670**								
CR	.299	.655**	.436*	.599**	.175	.611**	.514**	.572**	.574**	.530**						
MBEA	.053	.462**	.173	.433**	.246	.461**	.227	.410**	.072	.411**	-.009	.459**				
MBEP	-.185	.435	-.305	.453**	.296	.332**	-.121	.407**	-.170	.408**	-.346	.380**	.320	.311**		
LF	-.368	.202**	.060	.297**	-.188	.262**	.179	.248**	.033	.281**	-.374*	.208**	.278	.159*	.549**	.497**

(\* ) Statistically significant at p<0.05

(\*\*) statistically significant at p<0.01

CT= Clinical teacher      IM= Inspirational Motivation      MBEP= Management by      NS= Nursing Student

IS= Intellectual Stimulation Exception (Passive)

IIA= Idealized Influence (Attribute)      CR= Contingent Reward      LF= Laissez-Faire      IIB= Idealized

Influence (Behavior)      MBEA= Management by Exception (Active)

#### 4. Discussion

One of important results in this study was the clinical teacher perceived their leadership behaviour to be more transformational rather than transactional and passive/avoidant behaviour. Different with it, their nursing student perceived the clinical teacher leadership behaviour transformational leadership behaviour not as highly as perception of clinical teacher. This result is similar to research by Faila and Stichler (2008) 19 and McGuire and Kennerly (2006) 20. On contrast with the result, study by Tapahe, Nyland and Eggett (2007) 21 found that student in dietetics education program perceived their instructor displayed more transformational leadership rather than transactional leadership behaviour.

As expected by researcher in the present study, the statistical analysis depicts significance difference among the two studied group. Different perception of self rated and other rated in leadership research was not surprising and research supported it (see table 1). Commonly self rated perceived themselves higher than other perceived themselves like occurred in this research 22. Specifically for transformational leadership, the tendency of self rated is to score themselves more with the transformational leadership style compared with transactional leadership style 21, 23-25. This is consistent with Bass and Yammarino (2000) 26 who reported same result that transformational leadership tended to be more aware of their own leadership abilities than observers.

Particularly to the current study, there are several reasons that might contribute to the highly statistical difference between the groups. First, clinical teacher already have knowledge regarding transformational leadership concept, however their behaviour has not reflect as a transformational leader. In other words, the self awareness of clinical teachers regarding importance of transformational leadership is not developed. Secondly, environment or organizational culture is one of essential factors as obstacles in conducting transformational leadership practice. When the institution still focused with the method of reward that focus with transactional leadership behaviour component such as productivity and cost management it will lead to low motivation in performing transformational leadership practice. Thirdly, high score of transformational leadership in this research might correlate with the gender of leader which was in here the clinical teacher that all female. Research by Hura (2005) 27 found that all female respondents have tendency to rated themselves higher in transformational leadership. Fourthly, the method of self report for the leader might create bias when it is conducted in correlational studies. In nature, people tend to perceive themselves in more positive way rather than negative.

In this context, Mc Guire and Kennerly (2006) 20 stated that perception of one's own leadership characteristic may have no relationship to the behaviours demonstrated by those who are direct reports. In addition, implication is the perceptions may have little or nothing to do with actual leader behaviour. In conclusion, it may suggest that actual leader behaviours differ for different subordinates, and so differing perceptions of subordinate are valid 28.

In contrast with those researchers, Barbuto and Burbach (2006) 29 found that leader self rated and other self rated not showed any significance difference. Nevertheless, research by Feinsimer and Frame (2001) 30 found the perception of transactional and transformational leadership behaviour do not differ across groups. Individuals within each group, however, do rate those same variables differently. Furthermore, research of Failla and Stichler (2008) 19 found no statistically significance difference were found between the nurse managers' perception of their leadership style as compared with their subordinates' perception of the managers' leadership style on the total scale scores for the MLQ, although the managers rated themselves slightly higher on the total transformational scale than did the subordinates

Passive management by exception and laissez faire leadership were not independent leadership subscales. They constitute a single construct, because these subscales correlated strongly each other 31. In this research, both of these leadership components confirms negative correlation which can be implied that score of leadership perception of clinical teacher was lower compared with their nursing student perception scores (see table 7 and 8). Strong reason for it because both of these leadership behaviours are considered to be more negative and leaders tend to perceive it lower compared with other leadership behaviour components that tend to be more positive.

#### Limitations

The study is limited by the sample, which was in one college. This does not allow for generalizability of the findings. In addition, the self-report questionnaire was used for data collection with research assumption of trustworthiness of the respondents. Furthermore, questionnaire addressed in English which is the second language of respondents.

#### Recommendations for further research

Greater sample size and various study settings are recommended for further studies. In addition, future research might see the applicability on MLQ in Arabic cultures.

### Implications for nursing practice

Based on the study findings, recommendation are addressed into four main fields, namely: nursing administration, research, practice and education. In nursing administration, the university administrators need to continuously improve their efforts on developing transformational leadership behaviours. For nursing research, it is recommended to do further assessment in determining which leadership attributes causes nursing students to perceive their clinical teacher differently than the self-assessment and perception of leader. In addition, future research might see the applicability on MLQ in Arabic cultures. Greater sample size and various study settings are also recommended for further studies. In nursing practice, regular feedback of clinical teacher based from their student's point of view is suggested to create a smaller perception gap that occurred. Last, in nursing education, training and development in leadership, specifically for the transformational leadership is essential in increasing quality of education in college.

### Conclusion

In conclusion, the current study could act as a preliminary study for leadership research in educational setting in Kingdom Saudi Arabia generally and specifically at College of Nursing, King Saud University. Particularly, main findings showed statistically significance difference perceptions of leadership behaviour between clinical teacher and their students which were supported by previous research in nursing leadership.

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### References

1. Stone AG, Russell RF, Patterson K. Transformational versus servant leadership: A difference in leader focus. *Servant Leadership Research Roundtable*. 2003. [http://www.regent.edu/acad/sls/publications/conference\\_proceedings/servant\\_leadership\\_roundtable/2003pdf/stone\\_transformation\\_versus.pdf](http://www.regent.edu/acad/sls/publications/conference_proceedings/servant_leadership_roundtable/2003pdf/stone_transformation_versus.pdf). Accessed May 20, 2009
2. Sullivan EJ, Decker PJ. *Effective Leadership and Management in Nursing*. 6<sup>th</sup> ed. New Jersey: Pearson Education;2005.
3. Yukl G. Leading organizational learning: Reflections on theory and research. *The Leadership Quarterly*, 2009; 20: 49-53.
4. Avolio BJ, Bass BM. *Multifactor Leadership Questionnaire*. 3<sup>rd</sup> ed manual and sampler set. Mind Garden; 2005.
5. Bolden R, et al. A review of leadership theory and competency frameworks. University of Exeter: Centre for Leadership Studies. 2003. [http://centres.exeter.ac.uk/cls/documents/mgmt\\_standards.pdf](http://centres.exeter.ac.uk/cls/documents/mgmt_standards.pdf). Accessed October 30, 2009.
6. Brennan MA, Moon MK, Pracht D. Understanding organizational leadership. University of Florida IFAS Extension. 2008. <http://edis.ifas.ufl.edu/fy1063>. Accessed Dec 10<sup>th</sup>, 2009.
7. Frank B, Eckrich H, Rohr J. Quality nursing care: leadership the difference. 2007. [www.nursingcenter.com](http://www.nursingcenter.com). Accessed May 15<sup>th</sup>, 2009.
8. McBride AB. Breakthroughs in nursing education: looking back, looking forward. *Nurs Outlook*. 1999; 47(3):114-119.
9. Barrett D. The clinical role of nurse lecturers: Past, present, and future. *Nurse Educ Today*. 2007; 27(5), 367-74.
10. Sutkin G, et al. What makes a good clinical teacher in medicine? A review of the literature. *Acad Med.*, 2008 83(5):452-66.
11. Irby DM, Papadakis M. Does good clinical teaching really make a difference? *Am J Med*. 2001; 110(3),231-232.
12. Theofanidis D, Dikatanidou S. Leadership in nursing. *ICUS Nurs Web J*. 2006; 25: 1-8. <http://www.nursing.gr/protectedarticles/leadership.pdf>. Accessed May 10, 2009
13. Johnson-Farmer B, Frenn M. Teaching excellence: What great teachers teach us. *J Prof Nurs*. 2009; 25(5): 267-72.
14. Sawatzky JA, et al. Teaching excellence in nursing education: a caring framework. *J Prof Nurs*. 2009; 25(5):260-6.
15. Al-Kherb HA. The relationship between principals length of administrative experience and organizational leadership behavior in elementary schools in Saudi Arabia. PhD Dissertation: Western Michigan University. 1996.
16. Al-Knawy S. A study of leadership behavior as perceived and expected by deans, head of departments and faculty members in three elected institutions of higher learning in Saudi

- Arabia. PhD dissertation: Oklahoma University. 1985.
17. Al-Magidi A. Leadership behavior of public elementary school principals as perceived by principals and their teacher in a selected school district in the south region of Saudi Arabia. PhD dissertation: University of South Florida. 1989.
  18. Naji MA. Leadership behavior of secondary school principals and teacher morale in Southern Saudi Arabia', PhD dissertation: Graduate school University of Southern California. 1987.
  19. Failla KR, Stichler JF. Manager and staff perceptions of the manager's leadership style. *J Nurs Adm.* 2008; 38(11), 480-7.
  20. McGuire E, Kennerly SM. Nurse managers as transformational and transactional leaders. *Nurs Econ.* 2006; 24(4):179-185.
  21. Tapahe SJ, Nyland NK, Eggett DL. Instructor and student perceptions of instructor transformational leadership in dietetics education programs. *J Am Diet Assoc.* 2007; 107 (8).
  22. Hallinger P. Leading educational change: reflections on the practice of instructional and transformational leadership. *Cambridge Journal of Education.* 2003; 33 (3): 329-51.
  23. Corrigan PW, et al. Transformational leadership and the mental health team. *Adm Policy Ment Health.* 2002; 30(2), 97-108.
  24. Kleinman C. The relationship between managerial leadership behaviors and staff nurse. *Hosp Top.* 2004; 82(4):2-9.
  25. Reiss RG. A comparison of Leadership Styles of Occupational Therapy Education Program Directors and Clinic Administrators. PhD dissertation: University of North Texas. 2000.
  26. Bass B, Yammarino F. Transformational leader know them selves better. Office of Naval Research; 2000.
  27. Hura GM. The effects of rates and leader gender on ratings of leader effectiveness and attributes in a business environment. PhD dissertation: The Graduate Faculty of University of Akron. 2005.
  28. Yammarino FJ, Spangler WD, Dubinsky AJ. Transformational and contingent reward leadership: individual, dyad, and group levels of analysis. *Leadership Quarterly.* 1998; 9(1): 27-54.
  29. Barbuto JE, Burbach ME. The emotional intelligence of transformational leaders: A field study of elected officials. *J Soc Psychol.* 2006; 146(1), 51-64.
  30. Feinsimer BA, Frame MC. The relationship between transactional/transformational leadership and affective commitment: A multilevel analysis. *Illinois Institute of Technology.* 2001.
  31. Kanste O, Miettunen, J, Kyngas H. Psychometric properties of the Multifactor Leadership Questionnaire among nurses. *J Adv Nurs.* 2007; 57(2):201-12.

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