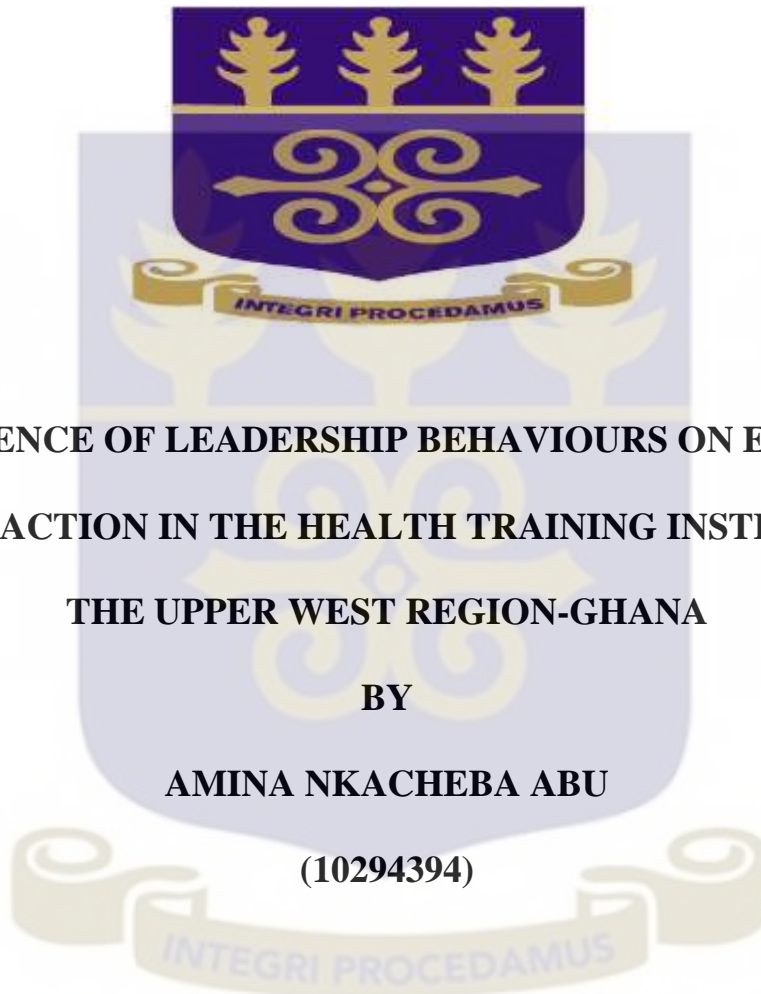


UNIVERSITY OF GHANA

COLLEGE OF HEALTH SCIENCES

SCHOOL OF NURSING AND MIDWIFERY



**THE INFLUENCE OF LEADERSHIP BEHAVIOURS ON EMPLOYEES'
JOB SATISFACTION IN THE HEALTH TRAINING INSTITUTIONS IN
THE UPPER WEST REGION-GHANA**

BY

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**THIS THESIS IS SUBMITTED TO THE UNIVERSITY OF GHANA,
LEGON IN PARTIAL FULFILLMENT OF THE REQUIREMENT FOR
THE AWARD OF MPhil IN NURSING DEGREE.**

JULY, 2019

DECLARATION

I, AMINA NKACHEBA ABU hereby declare that this thesis is the outcome of my original research and has not been presented for any academic degree in this university or any other university. The references used in this work have been duly acknowledged. The study was undertaken under the guidance and supervision of Dr. Adelaide Maria Ansah Ofei and Atswei Adzo Kwashie (Mrs.) both of the School of Nursing and Midwifery, University of Ghana.

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DEDICATION

This thesis is dedicated to all family members and friends for their support, prayers and diverse contributions that made this study a reality.

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ABSTRACT

Effective leadership and employees' job satisfaction are fundamental to the success of educational institutions. Adopting ideal leadership behaviour by the Nurse Leaders can have a positive influence on employees' job satisfaction and institutional outcomes. It is widely accepted that employees' who are satisfied with their jobs have a tendency of being more innovative, creative, motivated and committed, focusing on tasks that are beneficiary to the organization as compared to employees' that are dissatisfied (Gutierrez, Candela, & Carver, 2012). Using the Path-goal leadership theory as the organizing framework the study to explored the leadership behaviours of Nurse Leaders and the influence of these behaviours on employees' job satisfaction at the seven Health Training Institutions (HTIs) in the Upper West Region-Ghana.

Quantitative cross-sectional design was used to collect data from 179 respondents. The data was analysed using Statistical Package for Social Sciences (SPSS) version 22. Data was analysed using descriptive and inferential statistics. Descriptive statistics such as frequencies central tendencies and percentages were used to describe leadership behaviours and job satisfaction. Whereas inferential statistics such as correlation, linear multiple regression and moderation to predict relationship between the study variables.

Nurse Leaders in the HTIs practised all the five leadership behaviours (directive, supportive, participative, achievement- oriented and laissez-fair) but are more inclined to the directive (autocratic) leadership behaviour.

The study established a significant positive but moderate correlation between directive, participative and achievement-oriented leadership behaviours and employees' job satisfaction, while supportive leadership shows a strong positive significant correlation with

employees' job satisfaction, but laissez-faire had no correlation with employees' job satisfaction. There is a significant positive correlation ($r = 0.465$, $p < 0.001$) between job characteristics and employees' job satisfaction.

Result indicates gender, higher educational qualification and place of work or institution predicted the outcome variable (job satisfaction), whereas, supportive, participative and achievement-oriented leadership behaviours also predicted job satisfaction. The study variables explained 40.9% of the variance in employees' job satisfaction.

Result shows job characteristics moderated the relationship between leadership behaviours (directive, participative, achievement-oriented and laissez-faire) on job satisfaction. Finally, years of experience under supportive leadership behaviour was significant. The study recommends that Nurse Leaders should be conversant with the varied leadership behaviours and adopt the most ideal for the effectiveness of the HTIs in the Upper West Region-Ghana.

TABLE OF CONTENTS

DECLARATION	i
DEDICATION	ii
ACKNOWLEDGEMENT	iii
ABSTRACT.....	iv
TABLE OF CONTENTS.....	vi
LIST OF FIGURES	ix
LIST OF ABBREVIATIONS.....	xi
CHAPTER ONE	1
INTRODUCTION	1
1.1 Background	1
1.2 Problem Statement	5
1.3 Purpose of the Study	7
1.4 Objectives of the study.....	7
1.5 Significance of the Study	8
1.6 Operational Definitions	9
CHAPTER TWO	10
LITERATURE REVIEW	10
2.0 Introduction.....	10
2.1 Theoretical Framework for the study.....	10
2.1.1 Leadership behaviour.....	15
2.1.2 Contingency factors	16
2.1.3 Leader effectiveness.....	18
2.1.4 Justification for adopting the Path-goal theory.....	18
2.1.5 Conceptual Framework for the study.....	19
2.2. Leadership Behaviours of Nurse Leaders	20
2.2.1 Directive leadership behaviour	21
2.2.2 Supportive leadership behaviour.....	22
2.2.3 Participative leadership behaviour	24
2.2.4 Achievement-oriented leadership behaviour	25
2.2.5 Laissez-faire leadership behaviour	28

2.3 Perceived Leadership behaviours and employees job satisfaction	30
2.4 Respondents factors that predict job satisfaction.....	32
2.5 Task characteristics and job satisfaction.....	34
2.6 Summary	36
CHAPTER THREE	39
METHODOLOGY	39
3.0 Introduction.....	39
3.1 Research design	39
3.2 Research setting	40
3.3 Study population	43
3.4 Inclusion Criteria	43
3.5 Exclusion Criteria	43
3.6 Sample size determination	43
3.7 Sampling technique.....	44
3.8 Data collection tool.....	45
3.9 Data collection procedure	47
3.10 Data management.....	48
3.11 Data analysis	48
3.12 Validity and Reliability.....	50
3.13 Ethical considerations	51
3.14 Summary	52
CHAPTER FOUR	54
FINDINGS	54
4.0 Introduction.....	54
4.1 Socio-demographic characteristics of respondents	54
4.2: Perceived leadership behaviours of Nurse Leaders	56
4.3: Perceived Nurse Leaders' Leadership Behaviour and Employees Job Satisfaction.....	60
4.4 Predictors of job satisfaction.....	63
4.5: Task characteristics and job satisfaction.....	65
4.6: Task characteristics as moderators the relationship between leadership behaviours and job satisfaction	65
4.7. Respondents demographic characteristics moderate the relationship between leadership behaviours and job satisfaction	69
4.8 Summary of key findings.....	72

CHAPTER FIVE	74
DISCUSSION OF FINDINGS	74
5.0 Introduction.....	74
5.1 Perceived Leadership behaviours of Nurse Leaders	74
5.2 Perceived leadership behaviours and employees’ job satisfaction	77
5.3 Respondents characteristics that predict job satisfaction.....	82
5.4 Task characteristics and job satisfaction.....	84
5.5 Moderator effects of task characteristics and subordinates characteristics the relationship between leadership behaviours and job satisfaction	86
5.6 Effectiveness of the Model Used for this study.....	88
5.7 Summary of Discussion	88
CHAPTER SIX	90
SUMMARY, IMPLICATIONS, LIMITATIONS, CONCLUSION AND RECOMMENDATIONS	90
6.0 Introduction.....	90
6.1 Summary	90
6.2 Implication for using the Path-goal theory	92
6.3 Implication of the study for Nursing Administration	92
6.4 Implication for Nursing Education	93
6.5 The limitations of the study	93
6.6 Conclusion	94
6.7 Recommendations.....	95
6.7.1 Health Training Secretariat	95
6.7.2 Training institutions	95
6.7.3 Nurse Researchers.....	95
REFERENCES	96
APPENDICES	115

LIST OF FIGURES

Figure 2. 1: Theoretical Framework: Path-Goal leadership theory 15

Figure 2.2 Conceptual Framework20

Figure 3.1 Map of Upper West indicating the seven Health Training Institutions.....42

LIST OF TABLES

Table 3.1 Quota of the institutions.....	44
Table 3.2 Reliability Analysis.....	51
Table 4.1 Socio-demographic characteristics of respondents.....	55
Table 4.2 Perceived Leadership behaviour of Nurse Leaders	58
Table 4.3: Independent Samples t Test: Relationship between leadership behaviours and employees' job satisfaction.....	61
Table 4.4: Independent Samples t Test: Relationship between leadership behaviours and employees' job satisfaction.....	61
Table 4.5 : Relationship between leadership behaviours and employees' job satisfaction	62
Table 4.6: Predictors of job satisfaction	64
Table 4.7: Relationship between job characteristics and satisfaction.....	65
Table 4.8: Moderator effect of task characteristics on the relationship between leadership behaviours and job satisfaction.....	68
Table 4.9: Moderator effect of employee characteristics on the relationship between leadership behaviours and job satisfaction	70

LIST OF ABBREVIATIONS

CINAHL - Cumulative Index of Nursing and Allied Health Literature

HTIs - Health Training Institutions

GHS - Ghana Health Service

M - Mean

MLQ - Multifactor Leadership Questionnaire

NMIMR - Noguchi Memorial Institute for Medical Research

SPSS - Statistical Package for Social Sciences

SD - Standard Deviation

WHO - World Health Organization

CHAPTER ONE

INTRODUCTION

1.1 Background

Health Training Institutions are essential educational institutions for the education of future generations of nurses (Mahdinezhad, Bin Suandi, Bin Silong, & Binti Omar, 2013). Historically, nursing education in Ghana has had remarkable transformations in the past decades, from hospital-based training to training institutions. Nursing practice requires the acquisition of theoretical and practical training. Practical training as in hands-on learning experience in a supervised environment and theoretical training in the form of tutorials and demonstrations to equip the student nurse with the abilities needed to satisfy society's health requirements (Nabolsi, Zumot, Wardam, & Abu-Moghli, 2012; Nielsen, Noone, Voss, & Mathews, 2013).

The World Health Organization (WHO, 2016) reported a global need-based shortage of well-trained health workers to be approximately 17.4 million and out of the 17.4 million over 9 million are nurses and midwives. The leading needs-based shortages are in Africa at 4.2 million and South-East Asia at 6.9 million (WHO, 2016). A competent, efficient and sustainable nursing educational system is needed to build adequate, relevant and capable nursing working force necessary for the attainment of the Sustainable Development Goals (Bvumbwe & Mtshali, 2018). Frenk, Chen, Bhutta, Cohenet, Crisp, Evans and Zurayk (2010) have identified some few challenges with health professional education which includes poor teamwork, weak leadership among others. These challenges are both intrinsic and extrinsic and as the challenges keep increasing, organizations have to devise means to succeed by

placing emphasis on leadership and employees' outcomes. To achieve the institutional goal and objectives it is important to have leaders and employees who are committed to training future nurses. Leadership and staffs job satisfaction are crucial in organizational success, especially in the recent competitive world.

Leadership in the Health Training Institutions (HTIs) is the same as in other organizations, who have to ensure the educational institution's goals are achieved. The leaders at the HTIs are Nurses who are appointed as heads of the various institutions. Nurse Leaders are responsible for managing all other employees including health tutors. These leaders are also referred to as principals. Over the past decades, the leadership roles of Nurse Leaders have significantly undergone some changes making it increasingly multifaceted. Nurse Leader leadership behaviours can have an effect on employee job satisfaction and students learning. According to Amin (2013) leadership is the central aspect of administration as it has a fundamental bearing on the kind of actions that leads to employees' job satisfaction and organizational performance. Nurse Leaders should be able to balance their leadership behaviours between job performance and the needs of other employees to achieve the institutional goals. Employees' who are satisfied with their job have the tendency of being more innovative, creative, motivated and committed, focusing on tasks that are beneficiary to the organization as compared to employees who are dissatisfied (Gutierrez, Candela, & Carver, 2012).

Leadership and job satisfaction are the two essential concepts for the attainment of institutional objectives, as institutional leaders are the key personality in outlining the learning attainment of the institutions, departmental work output and the academic performance of students (Mahdinezhad et al. 2013). Hence, the need for innovative leaders is paramount in educational institutions for the accomplishment of outstanding educational performances (Clement & Vandenberghe, 2001). Leaders, therefore, should identify and

adopt varied leadership behaviours suitable for diverse situations, which would aid the transformation of educational institutions into professional learning environments, sustaining the institutional success with the help of competent and committed employees (Haruni & Mafwimbo, 2014; Wahab, Rahmat, Yusof, & Mohamed, 2016).

There are various views concerning leadership in literature making it a challenge in getting a common definition. However, Chatterjee, Suy, Yen, and Chhay (2017) defined leadership as the ability to inspire individuals so as to actively work to accomplish collective objectives. Likewise, Velu, Manxhari, Demiri and Jahaj (2017) posit that leadership is being able to inspire others to upsurge a team to attain a collective goal. This definition is in line with that of Uzohue, Yaya, and Akintayo (2016) who defined leadership as a process of influencing a team to work in order to achieve collective goals. From the above definitions, leadership is the ability to influence, motivate, empower and guide others to work diligently to accomplish institutional goals and objectives to enhance productivity.

Leadership behaviours are defined as qualities and approaches used by leaders to aid employees' working in an organization to attain their set aims and objectives (Germain & Cummings, 2010). Scientific literature has publicized several leadership theories and behaviours from which a leader can select any of the leadership behaviours depending on the context (Amanchukwu, Stanley, & Ololube, 2015). According to Cummings et al. (2010), the leadership behaviours can be supportive (relations-oriented) or directive (task-oriented). Studies have shown that, leadership behaviours have numerous effects on the outcomes of the employees and the organization (Germain & Cummings, 2010; Tetteh & Brenyah, 2016).

Job satisfaction is the view employees have concerning their work and the institution where these jobs are being performed (Rad & Yarmohammadian, 2006). Similarly, Singh and Jain (2013) indicated that satisfaction is the combination of positive or negative emotional response a person has regarding their job. Employees' satisfaction with their job is significant

in every institution and it is observed as a complex idea that comprises of intrinsic and extrinsic factors that influence employees' outcomes. The factors includes leadership behaviour, remuneration, task structure, demographic characteristic, institutional practices and relations with other employees among others (Chirchir, 2016; Mosadeghrad & Ferdosi, 2013; Muhammad & Jamilha, 2010; Ozturk, Hancer, & Im, 2014; Rad & Yarmohammadian, 2006; Traymbak, Kumar, & Jha, 2017). It remains imperative to recognize some elements that would enhance job satisfaction among employees within the educational establishments.

Previous studies conducted in other parts of the world have revealed that leadership behaviours either have a positive or negative significant relationship on employees and organizational outcomes (Abdelhafiz, Alloubani, & Almatari, 2016; Morsiani, Bagnasco, & Sasso, 2017; Velu, Manxhari, Demiri, & Jahaj, 2017). To illustrate, employees that are satisfied with their work have the tendency of remaining in their jobs, and they in a better position to work and increase performance than employees who are less satisfied (Negussie & Demissie, 2013; Mosadeghrad & Ferdosi, 2013). Alonderiene and Majauskaite (2016) studied the impact of leadership behaviour on faculty job satisfaction in a higher educational institution. It was revealed that leaders who adopt democratic leadership behaviour have a significant impact on faculty job satisfaction as compared to autocratic leadership behaviour. Similarly, Mosadeghrad and Ferdosi (2013) also reported that leaders who adopt participative leadership behaviour have their employees becoming relatively more satisfied and devoted with their work to the institution.

In Africa, leadership is evolving and remains an interesting area for researchers. Some scholars have attributed the developing of Africa as a continent to effective leadership, while others associated challenges of the continent to irresponsible leadership (Fourie, Merwe, & Merwe, 2017; Gorfie & Pradesh, 2017). In Sub-Saharan Africa, a study conducted in Ethiopia by Gorfie and Pradesh (2017) on the correlation between leadership behaviours and

job satisfaction of subordinates (faculty) in some selected public institutions of higher education, discovered transformational (supportive) leadership behaviour as the most preferred and appropriate leadership behaviour than transactional (achievement-oriented) and laissez-faire. Similarly, transformational (supportive) leadership behaviour was also associated with employees' job satisfaction (Gorfie & Pradesh, 2017).

In Ghana, HTIs, like other organizations are evolving in complexity with varied factors that have an impact on the management and performance of institutions. Therefore, the leadership roles of Nurse Leaders in the HTIs should change in order to fit activities at the institutions that would foster and sustain the college's goals and objectives (Demirbağ & Öztürk, 2013). Also, there is a dearth of knowledge on the effects of leadership behaviours on employees' job satisfaction in HTIs. The Path-goal leadership theory was used as the organizing framework for this study to explore the perceived leadership behaviours of Nurse Leaders and its influence on employees' job satisfaction from the employees' perspective at the HTIs.

1.2 Problem Statement

There are numerous factors that may be attributed to employees' level of job satisfaction including workplace conditions, pay, relationships with employees, student behaviour, and supportive administration. Considering all of the different research available on employees' job satisfaction, the problem remains that a crucial factor has not yet been investigated. Specifically, there is need for research to ascertain the connection between employees' job satisfaction and the leadership behaviours at HTIs. Effective leadership is crucial in organizational success, especially, in the contemporary health industry. Inappropriate leadership behaviours can trigger undesirable consequences that would hinder job satisfaction and performance which are unfavourable to the effectiveness of organizations (Sfantou, Laliotis, Patelarou, Pistolla, Matalliotakis, & Patelarou, 2017). It is widely accepted

that employees' who are satisfied with their job have a tendency of being more innovative, creative, motivated and committed. Consequently, employees are more focused on tasks that are beneficiary to the organization as compared to employees' that are dissatisfied (Gutierrez, Candela, & Carver, 2012).

Earlier studies conducted in Ghana have established the gap in knowledge about the leadership behaviours of heads of institutions (Baffour-awuah, 2015; Mensah, 2016; Ofei, Sakyi, Buabeng, & Mwini-Nyaledzigbor, 2014). Lot has also been done at other organizations and other parts of the world. However, little is known in the HTIs. For example, a study by Azaare and Gross (2011) discovered that Nurse Leaders who practice autocratic leadership were seen as 'figure heads'. According to Azaare and Gross (2011), Nurse Leaders were also regarded as being weak, and inarticulate regarding policy planning and implementation. In addition, their followers had no confidence, trust or satisfied with their job.

However, previous studies have focused on homogenous groups such as Nurse Manager and nurses, Nurse Leader and nursing faculty, forgetting about other categories of employees who also work in the institutions. This is because the Nurse Leader does not only manage nurses but also manage other employees in the institutions including cleaners. So it will be interesting and emanating to understand non- nursing employees' perception about leadership behaviour of Nurse Leaders; whether or not there are differences in the perception of Nurse Leadership behaviour as compared to other health tutors or other employees. This is the gap the research is actually interested in filling.

In the Upper West Region, there are anecdotal reports that the heads of the Training Institutions demonstrate autocratic leadership behaviour where key decisions are taken without the consultation of their subordinates. Employees also perceive the heads as being intimidators. This kind of behaviours might have an influence on the employees' job

satisfaction and performance which may also affect students' performance negatively. This would further influence the standards of nursing practice and the quality of health care delivery. Currently, there is no study in the region that has examined the impact of the leadership behaviours of the heads in HTIs. This study, therefore, sought to explore the perceived leadership behaviours and its influence on employees' job satisfaction in the HTIs perspective using Path-Goal leadership theory.

1.3 Purpose of the Study

The purpose of the study is to explore the leadership behaviours of Nurse Leaders and the influence of these behaviours on employees' job satisfaction at HTIs in the Upper West Region, Ghana.

1.4 Objectives of the study

The specific objectives of the study are to;

1. Describe the perceived leadership behaviours used by the Nurse Leaders in the HTIs in the Upper West Region.
2. Examine the relationship between perceived leadership behaviours and job satisfaction among employees.
3. Determine factors that predict job satisfaction among employees
4. Examine the relationship between task characteristics and job satisfaction
5. Examine whether task characteristics and subordinates demographic characteristics moderates the relationship between leadership behaviours and job satisfaction.

1.5 Significance of the Study

- The outcomes of this study would contribute to addressing the gap in the literature about leadership behaviours and its effects in nursing and HTIs.
- The findings would, also, encourage Nurse Leader to examine their leadership behaviours and adopt the most appropriate behaviours to boost employees' satisfaction and organizational outcomes.
- The findings would be useful to other fields of studies concerning the variables associated with leadership and employees job satisfaction.
- The findings would help strengthen the leadership behaviours at HTIs.
- Also, the findings would inform policies that are relevant for job satisfaction.
- Finally, the findings would broaden the scope of the researcher about leadership behaviours and its impact on both employees and the organization.

16. Operational Definitions

Table 1.1 : Operational Definitions

Variables	Conceptual Definition	Operational Definition	Measure
Leadership	It is the ‘process of identifying a goal, motivating other people to act, and providing support and motivation to achieve mutually negotiated goals’ (Giltinane, 2013)	Ability of an individual to influence, inspire and motivate team members towards institutional goal attainment.	Questionnaire
Leadership behaviour	The approaches used to motivate followers (Amanchukwu et al., 2015).	The styles used by leaders to influence their subordinates to accomplish collective goals.	Questionnaire
Nurse Leader	A registered nurse who directly supervise others to achieve organizational goals (Curtis, de Vries, & Sheerin, 2011).	A senior nurse who is officially appointed to be the head in the institution to coordinate the activities of the institution. He or she is also known as a principal	Questionnaire
Job satisfaction	It is the extent at which a person likes (is satisfied) or dislikes (is dissatisfied) the work (Sattigeri & Kulkarni, 2017).	Employees’ emotional reaction to a job, based on evaluation between actual outcomes and desired outcomes.	Questionnaire
Employees	Persons engaged to work for an organization for wages (Mirea, Naftanaila, & Mirea, 2012)	The staff working at the various health training institutions in Upper West Region.	Questionnaire
Task characteristics	It is the degree to which a job is well defined or uncertain (House & Dessler, 1974).	A series of actions an individual takes that leads to task performance.	Questionnaire
Demographic characteristics	Are attributes used to differentiate groups of a population (Chaudhary & Rangnekar, 2017).	Gender, age, educational qualification, place of work, area of expertise of employees.	Questionnaire

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

This chapter reviews literature on leadership behaviours in the clinical, academic and other settings. It also looks at the influence of these leadership behaviours on employees' job satisfaction. The search focused on these search engines, science direct, CINAHL, PubMed, and Google Scholar among others. The search consists of studies on leadership in general, nursing leadership, employees' outcomes (satisfaction, intention to stay and performance), and the relationship between leadership behaviours and employees outcomes. The search also included demographic variables predicting the relationship between leadership behaviours and job satisfaction and the moderating role of task characteristics on job satisfaction. The chapter also include a dicussion of the proposed theoretical framework that guided the study.

The literaure review was organised under the following headings: Theoretical Framework, Leadership Behaviours of Nurse Leaders, Perceived Leadership behaviours and employees job satisfaction, Respondents factors that predict job satisfaction, Task characteristics and job satisfaction, and Summary.

2.1 Theoretical Framework for the study

Though there are several theories that focused on leadership behaviours, the research reviwed on these three leadership theories: 'Leader-member exchange (LMX) theory', 'Full Range Leadership Model' and The Path- Goal leadership theory.

First, Leader-member exchange (LMX) theory it focus on the relationship between a leader and followers and how this interaction will either benefits or hinder the growth of the

individual or the institution. Theory has three process: role taking, role making and routinization, also, there are two set of groups (in-group and out-group members) that leader navigate for best outcomes. Role taking: new members joins the institution, the leader assesses the member to know their capability and based on that the leader gives them the opportunity to demonstrates their abilities. Role making: roles are created for members and relationship is build on trust and the leader further grouped the members in to two groups thus in-group or out-group. Members in the in-group are trusted by the leader, they are given high risk tasks and all opportunities to support in their assign tasks. Contrary, the out-group members are given less challenging tasks as the leader do not trusted them, and subsequently no opportunities to explore their talent. Routinization is last stage, there are routines, norms and expectations that established as both groups work and get insight of their work. The in-group work harder and pay attention to the leader's opinons in order to maintain their positions, while the out-group are certain they do not like their leader and strat to gets annoyed. The theory have indicated that a leader exercise strong trust, emotions and reverence some team members, indicating that the leader do not give equally attention to all members. An employee attitude towards work will depend on their relationship with the leader which will eventually have a positive or negative impact on employees committment, turnover and job satisfaction (Graen and Cashman, 1975). This model was not chosen because it could not answer all the objectives of this current study.

Second, Full Range Leadership Model was proposed by Avolio and Bass (1991). The authors argued that the theory was established to include a range of leadership behaviours that existed in the arena of leadership. The theory comprises three styles of leadership which includes: transformational, transactional and laissez-faire (Bass 1985). The theory focus on the impact of leaders' on followers' to move from self-centredness for the greater good of the organization (transformational), but intermittently the leader would employ transactional

leadership behaviour which is built on rewards and punishment and laissez-faire leadership behaviour which represent the absence of a leader (Bass 1985). This model was not chosen because it could not answer all the subject construct.

The researcher adopted the Path- Goal leadership theory (House, 1971) for this study after realising other theories like ‘Leader-member exchange (LMX) theory’, ‘Full Range Leadership Model’ all focused on a particular leadership behaviour. The Path- Goal leadership theory (House, 1971) was adopted for this study. The Path- Goal leadership theory made it flexible for a leader to adopt leadership behaviour that clarify path and provides direction to motivate employees for goal attainment. The Path-goal concepts used for this study facilitated to research to explore leadership behaviours of Nurse Leaders and the influence of these behaviours on employees’ job satisfaction at HTIs.

The theory, Path-Goal, was introduced by the work of Evans (1970) and was revised later by House (1971). The Path-Goal theory is a contingency theory of leadership that is grounded on identifying leadership behaviours or styles (directive, supportive, participative, and achievement-oriented) that will motivate employees’ in their working environment through a path to accomplish set goals and objectives (Alanazi, Alharthey, & Rasli, 2013; Northouse, 2013). These leadership behaviours are contingent on environmental factors and subordinate characteristics. The theory indicates that leaders will have to employ different leadership behaviours dependent on the magnitude and the demand of a specific situation at hand. The leader’s duty is to guide employees in accomplishing goals give directions and to provide support required and to ensure that the goals of individuals are in concordance with the institutional goals (Evans, 1970). This implies that leadership behaviours are the most powerful predictors associated with employees’ job satisfaction and organizational outcomes, hence, the need to adopt varied leadership behaviours that would improve job satisfaction and productivity by clearing the path for goal attainment.

The theory has two unique assumptions: first of all, the most vital function of a leader is to enhance their subordinates' psychological state such that they are motivated to accomplish goals or be satisfied with their work (House, 1971). This denotes that leaders have to adopt ideal leadership behaviour demanding on the situation that will boost motivation in order to increase performance. House and Mitchell (1974) posit that the leader behaviour would be regarded as satisfactory to the subordinates if only the subordinates perceive such behaviour as an immediate source of satisfaction or is instrumental to their future satisfaction. Alanazi et al. (2013) emphasized that leaders' behaviour will be regarded as satisfactory when subordinates perceive that the behaviour of leaders contributes to their present job satisfaction. This suggests that a leader's behaviour would be acceptable to subordinates only when subordinates feel the behaviour contributes to their satisfaction or would influence future job satisfaction.

Secondly, House asserted that the behaviour of a leader should be motivational enough to enhance performance. Thus, the leader should increase his/her effort such that these behaviours create satisfaction in subordinates towards enhancement in job performance. This suggests that when leaders demonstrate ideal behaviour peculiar to the situation it would inspire employees leading to enhancement in performance.

The theory also postulated two situational variables which are contingency factors (environmental and subordinates characteristics). Subordinate characteristics include locus of control, perceived ability and experience. Environmental factors include task structure, workgroup, role ambiguity and formal authority system. These factors serve as moderators between leadership behaviours and subordinate satisfaction. Hence, these factors should be modified to enhanced task performance and subordinates satisfaction.

The Path-goal theory implies, leaders should not assume specific leadership behaviour but rather identify which leadership behaviour to use at what point in time

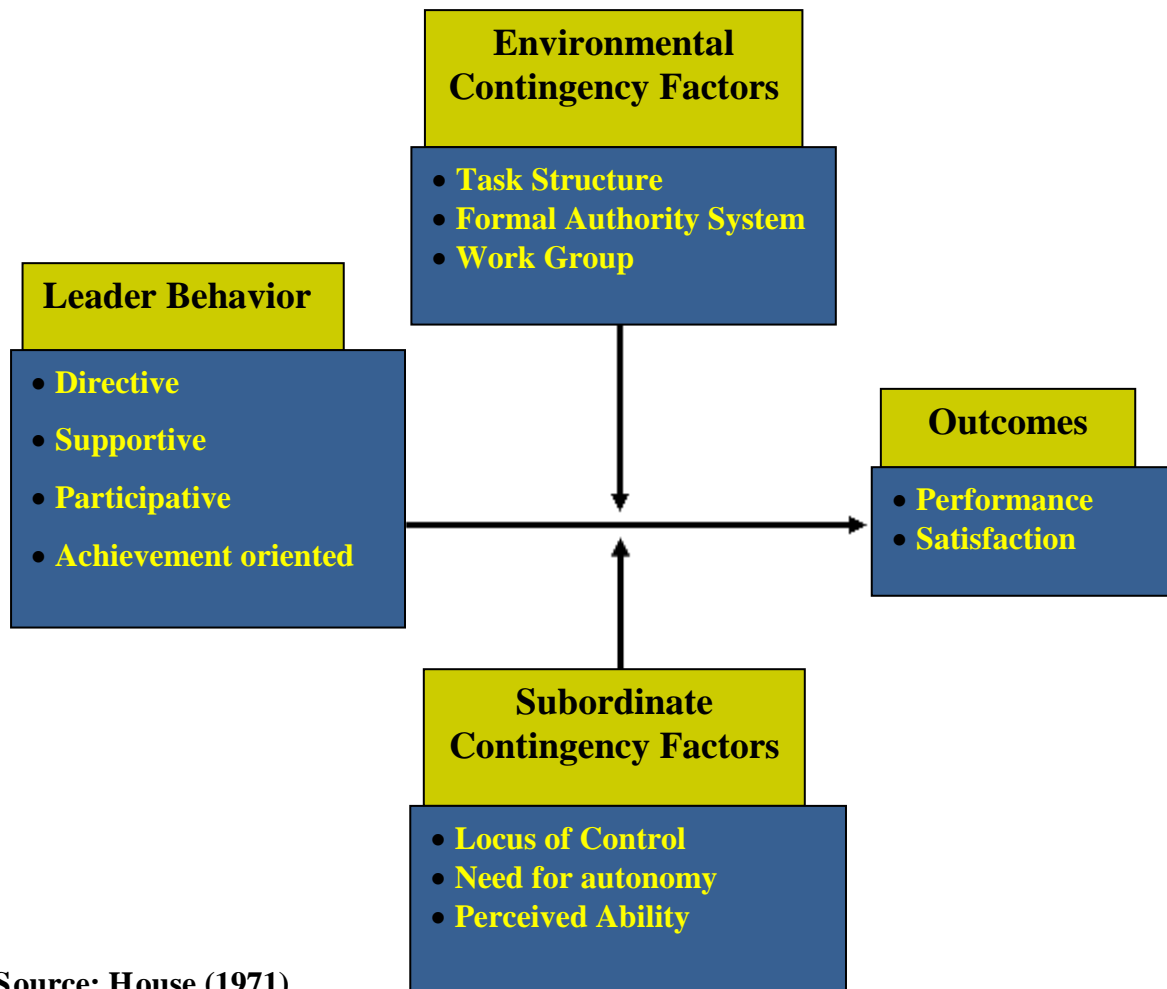
(Polston-Murdoch, 2013; Rad & Yarmohammadian, 2006; Alanazi et al., 2013). The theory based the four leadership behaviours on three approaches: (1) the satisfaction of subordinates, (2) the subordinates' expectation from their leaders and (3) effective performance of subordinates (House & Mitchell, 1974).

These four leadership behaviours under path-goal theory can be utilized by leaders to lead subordinates in different circumstances at various institutional settings (House & Mitchell, 1975). Effective leaders adapt their leadership behaviours depending on the situation. Subordinates might perceive the same leader as using varied leadership behaviours, which could be influenced by subordinates characteristics, environmental characteristics, the motivation level, as well as interpersonal relationship between leaders and subordinates, among other variables. Contrary to other leadership theories that seek to identify dominant or the appropriate leadership behaviour for managers/leaders, House (1971) believes that leaders can display varied leadership behaviours in response to the job satisfaction and motivational needs of their subordinates in order for them to stay on the path of goal achievement.

The four leadership behaviours posit by the Path-Goal theory are supportive, participative, directive and achievement (House, 1971; House & Mitchell, 1974) which are similar to other leadership theories such as transactional, autocratic, transformational and democratic leadership behaviours.

The theory has been used and proven to be one of the authentic leadership theories (Alanazi et al., 2013; Kiboss & Jemiryott, 2014; Sirisookslip, Ariratana, & Ngang, 2015).

Figure 2.1 Theoretical Framework: Path-Goal leadership theory



Source: House (1971)

2.1.1 Leadership behaviour

Directive leaders make clear their expectation from subordinates and give clear guidance on how the task should be performed within a specific time schedule (House, 1971). A directive leader ensures the team follow standard procedures in order to attain preferred goals and objectives. According to the theory, directive leadership is appropriate when tasks are ambiguous and direction is needed to perform the task and also with subordinates who are newly employ will need to work under supervision (House and Mitchell, 1975).

Supportive leaders are approachable, friendly and they make work satisfying by creating enabling environment for others to work. Supportive leaders show concern for the

needs and well-being of subordinates. Supportive leaders are focused on developing their subordinates to be independent (House and Mitchell, 1975).

Participative leadership behaviour adopts a consultative approach where the leader solicits for subordinates views and suggestions in decision making. Participative leaders encourage subordinates to be part of decisions making in the institution, they share responsibilities with the subordinates in order to enhance maximum support from subordinates for goal attainment (House, 1971).

Achievement-oriented leadership behaviour is characterised by setting challenging goals with a high degree of the expectation that subordinates will execute the task at their maximum level. An achievement-oriented leader is constantly focused on achieving excellence in performance with a high confidence level that subordinates can accomplish goals (House, 1971).

2.1.2 Contingency factors

The theory proposed two contingency factors that moderate the relationship between leadership behaviours and subordinates satisfaction. These factors include subordinates characteristics and environmental factors. Leadership behaviour is applied depending on these two factors. Subordinates factors are the personal attributes of an individual. The theory postulated that these attributes would determine which leadership behaviour to use. The theory indicated that leader's behaviour would be regarded as satisfactory to the subordinates if only the subordinates perceived such behaviour as an immediate source of satisfaction or are instrumental to their future satisfaction (House & Mitchell, 1975a).

Subordinates are to cope with the factors in order to satisfy their needs and goal accomplish. Examples of subordinates characteristics include perceive ability, need for autonomy and locus of control, which determines how well subordinates accomplish a task. . Perceived ability is the level at which a subordinate is capable of performing task and

achieving goals. Need for autonomy is a desire of subordinates to be independent and in self-control. Locus of control is the extent at which subordinates perceive that what happens in their life is as a result of their behaviour, chance or luck. The belief is that they are 'masters of their own fates'. Those who believe that what happens to them is due to their behaviour are called internal and they are more satisfied with participative leadership behaviours. Those who believe that what happens in their life happens due to chance or luck are external and they are satisfied with directive leadership behaviour (House & Mitchell, 1975).

Environmental factors are situations in the work setting that subordinates have no control over. However, environmental factors there are very important in enhancing subordinates satisfaction and these factors also determine how subordinates are able to perform a task. The leadership behaviour that supports subordinate's motivation is predicted by conditions in the environment. The environmental factors are task characteristics, formal authority of the organization and work group. House and Dessler (1974) define task characteristic as the degree to which a job is well defined or uncertain. The nature of a task would determine which leadership behaviour to use.

Tungkiatsilp (2013) also explained task characteristics as the manner in which each task is designed such that it enhances job satisfaction. For example, unstructured or ambiguous task would need leadership guidance and in such instances, directive leadership would be more appropriate. Work group include the employee within the organization and how they relate to accomplishing the task. Subordinates may ask for assistance from their colleagues rather than their leaders to enable them perform a task. Formal authority of the organization includes the well-defined rules and standards governing the organization. According to (House & Mitchell (1974) the Path goal theory states that the more dissatisfying the task, the more the subordinates will resent leader behaviour directed at

increasing productivity or enforcing compliance with organizational rules and procedures. The theory also indicates that leaders have to modify factors that hinder subordinates motivation and satisfaction such that they will be motivated to work and increase performance (House and Dessler, 1974).

2.1.3 Leader effectiveness

Path-goal theory posits that a leader's main goal is to motivate, empower and boost subordinates satisfaction to be more productive. Leaders are responsible for clearing all paths necessary for goal attainment (House, 1971). Thus, leaders should adopt leadership behaviour that is ideal for the environment and subordinates factors necessary for goal achievement. Leaders should clarify ambiguous tasks and provide all necessary guidance in order to promote satisfaction and increase institutional outcomes. Leader effectiveness is evidenced by the leader's ability to influence the group to achieve their institutional goals and objectives (Alanazi et al., 2013).

2.1.4 Justification for adopting the Path-goal theory

The path-goal theory is a contingency leadership theory that denotes the use of diverse leadership behaviours to accomplish a goal. The theory highlights a flexible practice of diverse leadership behaviour and contingency factors that should be considered to achieve employees' outcomes such as employees' motivation, satisfaction and productivity. The theory is appropriate and relevant to this study as leaders in HTIs have varieties of behaviours to adopt considering subordinates for maximum results. The theory makes it flexible for leaders to adopt different leadership behaviours depending on the situation for maximum benefits. For this reason, it is imperative for a leader to practise ideal leadership behaviour intended to influence subordinate's willingness to accomplish organizational goals.

2.1.5 Conceptual Framework for the study

The theory has indicated that leadership is influencing and directing subordinates towards goal attainment but has not highlighted the absence of leadership (*laissez-faire*) and the impact on subordinates and institutional outcomes. The only possible gap with the Path-Goal theory is its failure to describe *laissez-faire* leadership. *Laissez-faire* leadership is best described as ‘hands-off’ leadership behaviour, the leader shows no interest in the job and the leader may or may not give directions which gives subordinates more liberty as much as possible. The review suggests a gap with the theory as it has not included *laissez-fair* leadership behaviour. Therefore, *laissez-fair* leadership behaviour was added to expand the scope of leadership behaviours to suit the HTIs perspective. Based on the Path goal a conceptual framework was developed by the researcher to suit the study design. However, some tools were adopted to measure some of the variables (some demographics and job characteristics tool). The conceptual framework measured five leadership behaviours (directive, supportive, participative, achievement-oriented and *laissez-faire*), one environmental characteristic (task characteristic), and subordinates characteristics (gender, age, experience, area of expertise and educational background). Also, due to simplicity this study did not measure all the constructs in the Path-goal theory.

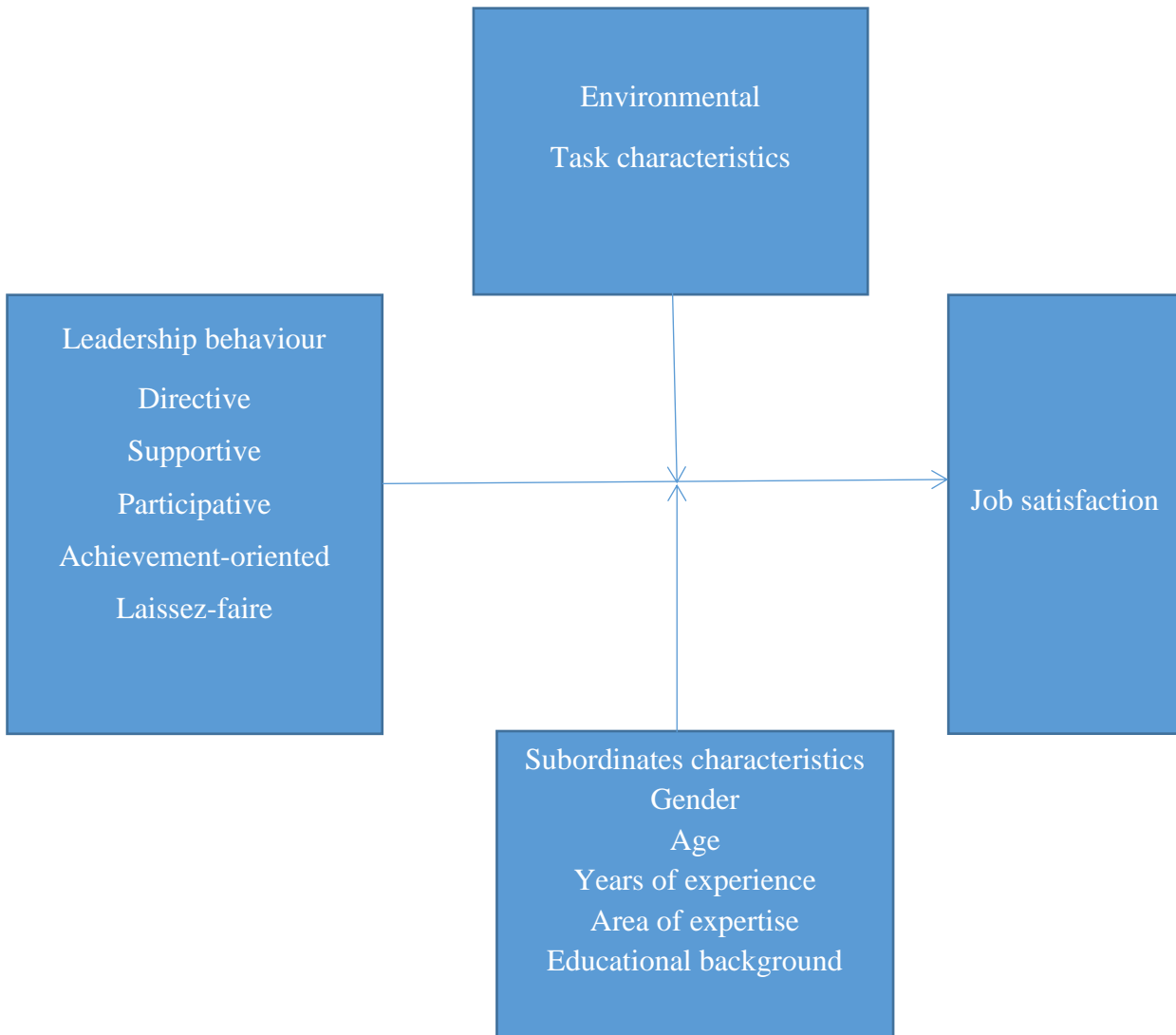


Figure 2.1 Conceptual Framework

2.2. Leadership Behaviours of Nurse Leaders

Leadership behaviours are strategies a leader uses in motivating and directing subordinates in accomplishing target institutional goals (Amanchukwu et al., 2015). Though there are several leadership behaviours, Farris (1988) categorised the leadership behaviours into two kinds as in task-focused and relationship-focused. Task-focused leadership behaviours are mainly focused on achieving goals. The leader defines the roles, goals, set timelines and provides all the necessary support to achieve goals. Such leaders do not consider the well-being of their subordinates. On the other hand, relations-focused leadership behaviours are focused more on establishing a close relationship with

subordinates and subordinates well-being is of concerned to them. Such leaders help develop their subordinates by mentoring and coaching to be independent on the job (Farris, 1988).

According to Cummings, Tatea, Leea, Wong, Paananen, Micaronia, and Chatterjeeet (2018) task-focused leadership behaviour alone, is not enough to accomplish the needed results for employees and highlighted the need to support relations-focused leadership behaviour to improve on employees' job satisfaction and performance.

Previous studies that have examined the relationship between leadership behaviours and employees' satisfaction and performance at the educational and other private and public organizations found leadership behaviours have both positive and negative impact on both employees and organization (Gorfie & Pradesh, 2017; Raheel, Khalil, & Shahzad, 2015; Wahab, et al. 2016). Leadership behaviours to be discussed are as follows; directive (autocratic), supportive (transformational), participative (democratic), achievement-oriented (transactional) and laissez-fair.

2.2.1 Directive leadership behaviour

The directive leaders make their expectations known and clear as well as provide specific assistance to achieve the preferred objectives and goals based on the standard of performance of the organizational guidelines (Northouse, 2016). This leadership behaviour adopts the autocratic leadership behaviour, which gives the leader total power to make decisions without the contributions from other members of the organization or group (Puni, Agyemang, & Asamoah, 2016). The leader has the authority over the others and enforces his/her decisions on the employees thus; decisions are not questioned for fear of intimidation or loss of a job. This behaviour of leadership is most appropriate to use in instances where an urgent decision is required and consultation with a large number of people might delay the process. Urgent projects necessitate urgent approach in

accomplishing set organizational goals efficiently and timely (Uzohue et al., 2016). Also, newly employed or subordinates who are given ambiguous or unstructured tasks to perform will need close observation. However, directive leadership is disliked and it can impede satisfaction and productivity in situations where employees' have the ability, creativity, and experience and where an employee receives well-structured tasks (House, 1971).

A qualitative study by Azaare and Gross (2011) conducted among twenty Ghanaian staff nurses, on 'the nature of leadership style in nursing management'. The study revealed that Nurse Managers' employed intimidation and minimal consultation to control their employees which reflects (directive) autocratic leadership. The study further indicated that Nurse Managers are perceived as 'figureheads' who are weak and inarticulate at the level of policy planning and implementation. Azaare and Gross concluded that subordinates lacked confidence, trust and satisfaction in the leadership behaviour of their Nurse Managers. Subordinates want leaders who can influence positively for transformation of the individual staff and organization. However, leaders who are not able to influence and motivate their subordinates bring about dissatisfaction to the subordinates which can have a negative effect on the institution.

Another quantitative study by Wachira, Tanui, and Kalai (2015) conducted among 348 school teachers on the relationship between directive leadership style and teachers' job satisfaction in public primary' in Kenya found directive leadership behaviour have a positive significant impact on teachers job satisfaction. It was conducted that head teachers should use directive behaviour to ensure that goal and tasks allocated are realized and meet timelines however; structures should be put in place to enhance teacher autonomy.

2.2.2 Supportive leadership behaviour

The supportive leaders are sociable, easy to approach and thus create a friendly atmosphere to enhance job satisfaction and performance. Supportive leaders also recognize

the achievement of subordinates. House and Mitchell (1975) also agree that a supportive leader is characterized as easily approachable and friendly who demonstrate much concern for the needs and well-being of their subordinates. Supportive leaders can be described as transformational leaders. Supportive leaders are easily approachable and make sure work is done in a more pleasant manner (Polston-Murdoch, 2013).

A supportive leader has a personal connection with their subordinates' possibly through good communication and psychological support. Leadership behaviour merely focusing on job achievement is not enough to attain optimal results. However, this notwithstanding, supportive or transformational leadership behaviour needs to be encouraged and the supported for organizational outcomes (Cummings et al., 2018). This means that concentrating on specific leadership behaviour might not always yield the same results but a blend of task-focused and relational focused leadership behaviours would enhance job satisfaction.

A comparative study by Abdelhafiz et al. (2016) on the impact of leadership behaviours of Nurse Leaders on job satisfaction between governmental and private hospitals in Jordan revealed that nurse leaders adopt more of transformational (supportive) leadership behaviour as compared to passive-avoidant leadership and transactional leadership. The findings further found that transformational leadership had a positive relationship ($r = 0.374^{**}$) with job satisfaction.

A similar study conducted by Konstantinou and Prezerakos (2018) examine the relationship between leadership behaviour of Nurse Managers and nurses' job satisfaction in a Greek NHS Hospital. The findings revealed that transformational leadership behaviour was mostly practised than transactional leadership behaviour but both leadership behaviours boost the overall job satisfaction of nursing staff. Therefore, Nurse Leaders should adopt

leadership behaviour depending on the situation appropriate for employees' job satisfaction and organizational outcomes.

2.2.3 Participative leadership behaviour

A participative leader employs a consultative behaviour such as inquiring subordinates' submissions before taking final decisions (House & Mitchell, 1974). Participative leadership behaviour is also known as democratic leadership behaviour. Participative leaders share duties with their subordinates, include them in decision-making, planning and implementation and this behaviour can lead to the promotion of creativity. The leader encourages the participation of subordinates in setting goals, team building and in problem-solving.

Furthermore, Participative leaders focus on developing the talents and skills of their subordinates (Amanchukwu et al., 2015). Subsequently, when employees' are permitted to contribute to decision making they have the likelihood of being truly committed to their decisions (Clark, Hartline, & Jones, 2009). In addition leaders are able to support their employees to accept and adjust easily when changes are effected within the organization as subordinates are part of the decision-making process.

Scholars have also revealed that the participative leadership behaviour is one of the ideal and effective leadership behaviours which lead to increase in job satisfaction and productivity (Kiboss & Jemiryott, 2014; Lumbasi, 2016; Rad & Yarmohammadian, 2006). A quantitative study by Sirisookslip, Ariratana, and Ngang (2015) investigated the influence of leadership behaviours of school administrators that affects teachers effectiveness with a sample size of 254 respondents using the path-goal leadership theory. The results indicated that participative behaviours positively affect teachers' effectiveness significantly. A similar study finding was observed by Shamaki (2015) where teachers who worked with democratic

leaders were more efficient and effective as compared to those who worked with autocratic leaders.

In contrast, a study by Tandoh (2011) investigated the influence of leadership behaviours on employee performance in Guinness Ghana Breweries Limited (GGBL) showed that democratic and transformational leadership behaviours have no significant effect on employees' performance. This suggests that no one particular leadership behaviour is applicable in all situations and settings, therefore, leaders have to study the situation at hand and adopt leadership behaviour (s) that best suit the situation.

However, participative leadership behaviour can delay the decision-making process in circumstances where rapidity or efficacy is vital. In such an instance, the team takes a long time to get everyone's contribution. Also, a possible danger is when team members lack the necessary knowledge or expertise to make vital contributions towards efficiency (Amanchukwu et al., 2015).

2.2.4 Achievement-oriented leadership behaviour

Generally, the achievement-oriented leaders set goals that are challenging and their expectations are that subordinates execute the job at their maximum levels, constantly striving for improvement in performance. An achievement-oriented leader demonstrates some high levels of confidence that their subordinates have the determination to take up responsibilities and strive for the accomplishment of goals that are challenging (House & Mitchell, 1974). Also, Northouse (2016) highlighted that achievement-oriented leaders give complex tasks to challenge subordinates to accomplish at with a high degree of the expectation that subordinates will execute the task at their maximum level.

Additionally, Asrar-ul-Haq and Kuchinke (2016) posit that achievement-oriented (transactional) leadership is focused on task completion where reinforcements (positive and negative) are used to increase employees performance in order to accomplish the

organizational goals and objectives. The achievement-orientated leadership approach is transactional, the leader demonstrates an amount of assurance that subordinates have the capability to accomplish set goals where leaders offer rewards to subordinates' for successful completion of task (Sims, Faraj, & Yun, 2009). However, achievement-oriented (transactional) leadership behaviour is grouped into three forms. First is the contingent reward describes a leader who makes his expectations clear and provides recognition upon achievement of goals which is common with achievement-orientated. Second form is management by exception-active. This describes a leader who specifies the standards of performance and subordinates are punished for non-compliance with standards. Last but not the least is the management by exception- passive form and it is characterizes a leader who is absent and also avoids taking a stand on issues (Bass, Avolio, & Jung, 2003; Giltinane, 2013; Uzohue et al., 2016). The achievement-orientated or transactional leaders are results-oriented, expectations are made known, roles clearly defined and every effort is made to increase performance. Leadership based on job performance alone might not be sufficient to boost employees' job satisfaction which can further lead to poor performance.

Burke, Stagl, Klein, Goodwin, Salas and Halpin (2006) stated that contingent reward under transactional leadership behaviour can enhance job satisfaction among employees when rewards are fairly given. However, Giltinane (2013) indicated that achievement-orientated and transactional leaders are noted for focusing on managing tasks, and might be unable to recognize the team common principles as compared to supportive or transformational leaders. Giltinane (2013) further stated that task-orientated leadership can be helpful in accomplishing task to meet deadlines, or when dealing with urgent situations. Alanazi et al. (2013) also denote that the achievement-oriented behaviour is appropriate when reward systems (extrinsic motivation) are clearly defined which might stimulate the intrinsic motivation of employees to strive for satisfaction to attain high performance. A

leaders' main duty is to increase performance by motivating subordinates for the attainment of stated objectives, however, this is only effective when leaders are able to identify and adopt varied leadership behaviours for maximum results. “

A latest mixed-method study by Morsiani et al. (2017) outlined how the effect of the leadership style of Nurse Managers on job satisfaction is perceived by personnel nurses. The research disclosed that the Nurse Leaders, who are exceptionally active in the management of transactional leadership behaviour, aim to monitor errors and intervene only to impose penalties that have undesirable effects on job satisfaction of nurses.

A comparable research by Negussie and Demissie (2013) examined Nurse Managers' management styles and the effect on job satisfaction of nurses at a sample size of 186 at Jimma University Specialized Hospital. The findings of Negussie and Demissie's non-experimental correlation design stated that the willingness of nurses to transform leadership over transactional leadership. The research also discovered that the behavior of transactional leadership has an adverse effect on the job satisfaction of staff.

Contrary to that, Javed, Jaffari, and Rahim (2014) performed a private bank survey in Pakistan, results revealed a important correlation between transactional leadership behavior and job satisfaction of staff, where leaders demonstrated transactional leadership behavior compared to transformation leadership style. According to Bucic, Robinson, and Ramburuth (2010), a success-oriented (transactional) leader can enhance job satisfaction and organizational results for staff, particularly when employee performance is correctly measured and reward or punishment is provided reasonably. Transactional leadership behavior is very helpful when the organisation is well structured with well-defined goals to enhance satisfaction and efficiency. This strategy, however, can lead to low employee satisfaction as external motivation may not necessarily increase efficiency.”

2.2.5 Laissez-faire leadership behaviour

This is characterised as ‘hands-off’ leadership behaviour, laissez-faire leader shows no interest in the job and they may or may not give directions which gives subordinates more liberty as much as possible. Subordinates are given much power or authority and they would define aims, take decisions, and resolve problems on their own. A laissez-faire leader will not give feedbacks to subordinates to improve on their next task which might delay the progress of the organization (Chaudhry & Javed, 2012).

According to Goodnight (2011), laissez-faire leadership behaviour could either be the worst or the best leadership behaviours. Laissez-faire leadership behaviour is best when subordinates are highly experienced and able to achieve goals without the leader, however, it is worst when subordinates lack the expertise to work on their own. Therefore, Amanchukwu et al. (2015) posit that laissez-faire leadership behaviour can be made efficient when the leader provides feedback and monitor the performance of the followers more often. Despite the numerous criticisms, this type of behaviour has some benefits. Leaders give their followers significant independence and that might lead to increase in job satisfaction and productivity when the followers are experienced to perform the job. However, this leadership can be unhelpful when followers waste time, have less knowledge, undertake ambiguous task, lack the needed skills, or have little or no motivation to efficiently perform the task (Amanchukwu et al., 2015; Dimitriou, 2014).

Similarly, Dimitriou (2014) posit that for a leader to exhibit laissez-faire leadership behaviour, it is necessary for the leader to know the strength and weakness of his/her subordinates. When laissez-faire leadership behaviour is adopted appropriately it can have a positive influence on employees and organizational outcomes.

A study by Gorfie and Pradesh (2017) indicated that the Dean and departmental heads at selected public universities in Ethiopia used varied leadership behaviours such as laissez-

faire, transactional and transformational but transformational leadership behaviour was mostly used, followed by transactional and laissez-faire. The study also found that leaders who practised inspirational motivation have a positive influence on subordinates' satisfaction as compare to others. This implies that a situation will demand the use of different leadership behaviours would boost job satisfaction and performance. When employees' are satisfied with their work, they would be more concern and committed to their work as compare to dissatisfied employees.

Another study by Aboshaiqah, Hamdan-Mansour, Sherrod, Alkhaibary, and Alkhaibary (2014) examined the perception of nurses about the leadership behaviours of their Nurse Managers and its related outcomes in Saudi Arabia. The findings indicated that Nurse Managers often used transformational and transactional than laissez-faire leadership behaviour. The study further indicated transformational and transactional leadership behaviours have positive outcomes on nurses' satisfaction and performance as compared to laissez-faire leadership behaviour. On the contrary, to the above studies Wahab et al. (2016) in their study, revealed that laissez-faire leadership ($r = 0.113$, $n = 156$, $p < 0.01$) have a positive relationship, a significant and high correlation to performance. Though literature has heightened the use of other leadership behaviour and their significance with job satisfaction, laissez-fair leadership behaviour when used appropriately would increase employees' satisfaction and boost performance.

The review has made it clear that particular leadership behaviour at a given point in time may possibly have a positive impact on the employees and organization but might not be applicable in other contexts. Hence, it is necessary to adopt different leadership behaviour that best fit a particular situation. In view of this, this study examines leadership behaviours and their influence on employees' job satisfaction.

2.3 Perceived Leadership behaviours and employees job satisfaction

Job satisfaction is one of the multifaceted issues leaders encounter when managing employees' in an organization. Employees' are valuable resources and the key influence in goal achievements in the Training Institutions (Al-Hawary, Al-Qudah, Abutayeh, Abutayeh, & Al-Zyadat, 2013) and when employees are satisfied with their job, they show high levels of commitment to their jobs in order to achieve set goals, whereas, dissatisfaction among employees might lead to low institutional performance (Loganathan, 2013). The success and sustainability of an organization depends on leadership ability to boost the human resource coupled with the crucial role of employees' commitment to achieving goals of the organization (Asrar-ul-Haq & Kuchinke, 2016; Paracha, Qamar, Mirza, & Waqas, 2012; Top, Tarcan, Tekingunduz, & Hikmet, 2013).

According to Sattigeri and Kulkarni (2017), job satisfaction is the extent to which a person likes (satisfied) or dislikes (dissatisfaction) the work. Similarly, Zhu (2012) describes job satisfaction as a state of positive emotional response that develops when an individual evaluate their experience gathered from the work. The job is evaluated by the employees and the outcome could be positive, negative or neutral which can have influence on job satisfaction or dissatisfaction. Employees' job satisfaction and effective leadership behaviour are elements considered as an essential requirement aimed for institutions' achievements (Gorfie & Pradesh, 2017).

There are a number of factors contributing to employees' satisfaction and these include remunerations, rewards, working conditions, accomplishment, acknowledgment, autonomy, job significance, workplace flexibility, relationship with work colleagues, the level of professionalism, and organizational climate, the perceived reputation of the respectable organization, leadership support, job security, team setting and biological factors (Godfrey, 2014; Rad & Yarmohammadian, 2006).

There are numerous studies that have examined the impact of leadership behaviours on employees' job satisfaction. Findings reveal that leadership behaviours has both either positive and negative influence on employees and institutions (Alonderiene & Majauskaite, 2016; Mahadevamangalam, 2015; Salman, Khan, Javaid, & Din, 2016). When employees are satisfied with their job they show high levels of commitment to their jobs in order to achieve set goals, whereas dissatisfaction among employees might lead to low institutional performance (Loganathan, 2013). Diverse leadership behaviours have either negative or positive consequences on the employees and organizational outcomes (Haruni & Mafwimbo, 2014).

For example, a quantitative study by Salman et al. (2016) among faculty members of schools, colleges, and universities Punjab, Lahore, Pakistan. The sample size consisted of 500 employees, the study revealed a strong correlation between participative leadership behaviour and employee performance, it was also revealed that participative leadership behaviour does influence job satisfaction among faculty whereas; authoritative and laissez-faire leadership behaviours have been considered to be barriers to faculty's job satisfaction. The review has shown the impact leadership behaviours have on job satisfaction, it, therefore, means that leaders have to practise leadership behaviours that support employees' job satisfaction which would lead to increase committed and performance.

A similar study by Chen, Beck, and Amos (2005) examined the impact of leadership behaviours on faculty job satisfaction in Taiwan using the Multifactor Leadership Questionnaire and Minnesota Satisfaction Questionnaire and a sample size of 286 faculty members at a response rate of 73.0%. The results showed that leaders exhibited transformational more than transactional leadership. The faculty members were much satisfied with leaders who practise the transactional leadership behaviour (contingent reward) than those who practice the transformational leadership behaviour particularly

(individualized consideration). However, passive management by exception leadership behaviour had a negative effect. The result shows that leadership behaviours have a positive correlation with job satisfaction among employees. However, supportive (transformational) leadership behaviour was mostly used as compared to others.

Additionally, a quantitative study by Alonderiene and Majauskaite (2016) studied 82 employees on the impact of leadership behaviour on employees' job satisfaction in higher educational institutions at Lithuanian Public and Private Universities. The empirical study has shown that leaders who adopt servant leadership behaviour had a significant positive impact faculty job satisfaction while, autocratic (controlling) leadership behaviour has negative impact on faculty job satisfaction.

Moreover, in a quantitative study by Kebede and Demeke (2017) on the influence of leadership behaviours on employees' job satisfaction in Ethiopian public universities, involving 382 faculty, it was found that transformational leadership had a positive impact on faculty job satisfaction. This implies that transformational leadership behaviour promotes employees' job satisfaction which can lead to an increase in performance. Studies have also shown that employees who are satisfied with their job are more committed focusing on activities that would promote organizational performance as compared to dissatisfied employees (Blanz, 2017; Kebede & Demeke, 2017).

2.4 Respondents factors that predict job satisfaction

The concept of job satisfaction is complex to comprehend since there are numerous elements identified as factors that predict both positive and negative outcomes on job satisfaction among employees. Khan, Khan, Khan, Nawaz, and Bakht Yar (2013) refer to socio-demographic characteristics as the biographical elements of a sample in the population, for example age, gender, educational qualification, marital status, date of birth among others. This implies that demographic characteristics are the personal attributes of an

individual that define a person such as name, age, race, marital status, and educational qualification among others. The socio-demographics characteristics of subordinates investigated by the study are gender, place of work (institution), educational qualification and years of working experience.

Earlier studies conducted discovered that personal characteristics such as age, gender, profession, level of education, marital status among others of subordinates have an influence on job satisfaction (Chirchir, 2016; Duong, Chi, & City, 2014; Tabatabaei, Ghaneh, Mohaddes, & Mehran, 2013). For example, Tabatabaei, Ghaneh, Mohaddes and Mehran (2013) studied the relationship between demographic variables and job satisfaction among 120 employees in Pars Ceram Factory, Iran. The study discovered some demographic characteristics had an influence on job satisfaction among employees.

Similarity, Buker and Dolu (2011) researched on the impact of demographics on job satisfaction among the Police in Turkey. The findings of the study have showed a significant correlation between job satisfaction and demographics. Suresh, Kodikal, and Kar (2015) measured the impact of demographics on job satisfaction among medical doctors in teaching hospitals in India and results indicate that age and gender have a significant correlation with job satisfaction.

Also, Chirchir (2016) researched on the relationship between job satisfaction and demographic variables among teachers in Kenya Public schools. The finding found no significant impact of gender on job satisfaction but found that age and experience have a positive significant impact on teachers' job satisfaction. This suggests that age and one's experience could have a role on an individual's level of job satisfaction.

Contrary to the above studies, Agebure (2014) studied the relationship between demographic characteristics and job satisfaction among sixty-six (66) teachers in Senior High School in the Bolgatanga Municipality of Ghana. The study revealed that teacher

demographic characteristics, such as age, level of education, and years of teaching experience, had no correlation with job satisfaction. Likewise, Sakiru, Bin Ismail, Samah, and Busayo (2018) studied the impact of demographic factors on job satisfaction among academicians in Public Universities in Malaysia. The study results found no correlation between demographics and employees job satisfaction. Though studies have shown that demographics has impact on job satisfaction of subordinates, there are mixed study findings which could be attributed to the variation in study settings and sample for that matter, this study sought to find out factors that predict job satisfaction among employees.

2.5 Task characteristics and job satisfaction

Task characteristics are strongly merged with the organizational structure and that affects every part of the organization. House and Dessler (1974) defined task characteristic as the degree to which a job is well defined or uncertain. The nature of a task will determine which leadership behaviour to use. Unstructured task would need a direction and guidance to execute the task as compare to a well-structured task. According to Tungkiatsilp (2013), task characteristics are the manner in which each task is designed such that it enhances motivation and job satisfaction. Studies have shown that task characteristics have both positive and negative effect on the employees' job satisfaction (Andrew, Haris, Zakariah, Athirah, & Zekaria, 2016; Kassem & Sarhan, 2013; Malik, 2013).

Hackman & Oldham (1976) identified five core elements on job characteristics to include skill variety, job autonomy, task significance, task identity, and job feedback that would serve as motivators to enhance employee satisfaction leading to increase in job performance. Task identity is the level at which a job requires the employees to be involved with the task and complete work and not just a part of it. Jobs with high task identity provides stages to which an employee follow complete the whole job, it makes the employee understands and appreciate the job than when accountable for minor parts of the

job. Job autonomy is the amount of freedom or independence given to a person to determine the procedures for work performance. Skill variety is the use of different talents or skills by an employee to perform a particular job. Task significance specifies the significant impact of a job on the individual or group. Feedback is the extent to which employees are given clear information about the outcome on the perform task (Hackman & Oldham, 1976).

Many of these studies have emphasized that job designs such as task identity, task significance and employees' autonomy contribute to employees' job satisfaction. To illustrate this, a quantitative descriptive cross-sectional study by Malik (2013) in Pakistan with the use of questionnaire found a significant correlation between situational factors (locus of control, task structure, role ambiguity, stress, and job autonomy) with subordinates' job satisfaction. This implies that job (task) characteristics have an influence on job satisfaction. Ones' job structure can determine job satisfaction and performance. For that matter, jobs should be clearly defined for easier completion of the job to improve performance.

Another quantitative study by Na-Nan and Pukkeeree (2013) examined the direct and indirect influences of factors of job characteristics, personality characteristic, and job satisfaction with work adjustment of new graduates in Thailand. The study recognises that task characteristics had a positive outcome on work adjustment and job satisfaction. Andrew, Haris, Zakariah, Athirah, and Zekaria (2016) examined task characteristics and job satisfaction among employees, and study found a significant correlation between job characteristics and job satisfaction. Tasks that are ambiguous may have an impact on newly or unskilled employees, the leader should explain the task when necessary to enhance employee professional development and satisfaction. In view of this, the current study examined the relationship between job characteristics and job satisfaction.

A comparative study between temporary and permanent employees by Galup, Klein, and Jiang (2008) on the impacts of task characteristics on employees' satisfaction found employees linked organisational support to satisfaction. However, temporary employees related task interdependence to satisfaction, and permanent employees related job involvement to satisfaction. This means that job characteristics have an influence on job satisfaction among employees. Employees who are highly skilled on the job might not need a leader to direct them on the job, however, employees who have no experience would need a leader to direct them on the job.

Additionally, Ozturk, Hancer, and Im (2014) examined the impact of job characteristics, job satisfaction, and organizational commitment on hotel workers in Turkey. They studied 252 hotel workers and the results revealed that job characteristics had a significant influence on job satisfaction. The review indicates that job characteristics are crucial for the success of staff and the organization. This implies that the nature of a task can have both positive and negative influence on job satisfaction of employees.

2.6 Summary

Seventy-four articles were review for this section and out of these, thirty-five studies were reviwed from high income countries and thirt-nine from middle and low income countries. However, sixteen are from Sub-saharan Africa and five out of the sixteen are from Ghana. The literature has shown that, leadership behaviours have varied influence on employee and organizational outcomes however, the preferred leadership behaviours are participative (democratic) and transformational (supportive) leadership behaviours. The review also, indicates that participative and supportive leadership behaviours have a positive impact on job satisfaction as compared to the other leadership behaviours. Though this might be true, a lot of the studies were conducted in high-income countries where task-

oriented, autocratic and laissez-faire leadership behaviours are not practised due to their advancement in leadership training and practices.

Polston-Murdoch (2013) agree that, adopting different leadership behaviour is more efficient as leaders are in the best position to select the ideal behaviour that suit the situation. Leadership is evolving and not static, which suggest that there is no ideal leadership behaviour suitable in all circumstances. A leader should not practise specific leadership behaviour but rather identify which one to use at a particular point in time It, therefore, means that good and efficient leaders have to modify their leadership behaviour depending on the situation at hand for desired effects.

The review has also shown that task characteristic has a significant influence on job satisfaction. It is revealed that tasks that are clearly defined are more likely to increase job satisfaction as compared to those that are not clearly defined. However, an attempt to use directive leadership in that instance would lead to dissatisfaction, supportive leadership behaviours are preferred.

Studies have suggested that understanding employees job satisfaction and committed to their job would eventually lead to increase in job performance. This indicates that employees who are satisfied with their job would be more innovative, creative and committed would focus on tasks that would benefit the institution as to those who are dissatisfied. Employee job satisfaction is one critical area since it has influence on the institution.

Furthermore, literature has revealed that few studies have been conducted in Africa on leadership behaviours that best suit the HTIs. This creates a gap in literature given the fact that leadership behaviours have an impact on employees' job satisfaction. Therefore, this study seeks to explore the leadership behaviours that are being practised by Nurse Leaders in the HTIs. Also, the study examines the relationship between leadership behaviours and job satisfaction among employees. Additionally, the study sought to investigate factors that

predict job satisfaction and determine the relationship between task characteristics and job satisfaction. Finally, to investigate the moderating role of task characteristics on the relationship between the independent variables (leadership behaviours and respondents characteristics) and the outcome variable (job satisfaction) among the seven HTIs in the Upper West Region of Ghana.

The following hypotheses are formulated to address the study objectives.

H₁: There would be a significant relationship between perceived leadership behaviours and employees' job satisfaction.

H₂: Respondents characteristics would significantly predict job satisfaction

H₃: Leadership behaviours would significantly predict job satisfaction

H₄: There would be a significant relationship between task characteristics and job satisfaction

H₅: Task characteristics would significantly moderate the relationship between leadership behaviours and job satisfaction.

H₆: There would be a significant moderating effect of respondents' demographic characteristics on the relationship between leadership behaviours and job satisfaction.

CHAPTER THREE

METHODS

3.0 Introduction

The study explores the leadership behaviour of nurse leaders and its influence on employees' job satisfaction. This chapter presents the study design, population, sample size and sampling technique used, study setting, sample, the data collection procedure, data analysis, and ethical consideration.

3.1 Research design

The study utilized a quantitative approach using cross-sectional design to collect data from employees' perspective on their Nurse Leaders leadership behaviours and how those perceived behaviours influence job satisfaction. A quantitative approach used for this study arises from the fact that human phenomena can be studied objectively using statistical, mathematical or computational techniques (McLiesh, Rasmussen, & Schultz, 2018). Also, this approach enables the use of large sample size in a study and hypotheses are tested to make it possible for the generalization of findings (Polit & Beck, 2013).

A cross-sectional design describes the characteristics of the sample (Omair, 2015). A descriptive cross-sectional design was chosen because it helps the researcher to collect primary data on the impact of leadership behaviours of the Nurse Leaders on employees' satisfaction at a particular point in time (snapshot) of the study (Polit & Beck, 2013). The design is relatively economical and comparatively convenient for the researcher to obtain accurate data for generalizations of findings to the population of interest.

3.2 Research setting

The study was conducted in seven (7) HTIs which made up of Nursing and Midwifery Training Institutions in the Upper West Region of Ghana. The Upper West Region now has four (4) municipality comprising Wa, Jirapa, Lawra and Sissala East, (Tumu) with seven (7) administrative districts, which are Daffiama- Bussie- Issa (DBI), Lambussie, Nadowli – Kaleo, Nandom, Sissala West, Wa East, and Wa West (Ghana Health Service, 2017). The region has an estimated population of 849,123 million people. The Region is situated in the North-Western part of Ghana lies between longitude 10 25' W and 20 45 W and latitudes 90 30' N and 110N. It is bordered to the south by the Northern region, to the north and west by Burkina Faso and to the east by the Upper East region. With an area of 18,476 km², the region's population density stands at 40 persons per square kilometre with a total of eleven (Ghana Health Service, 2017).

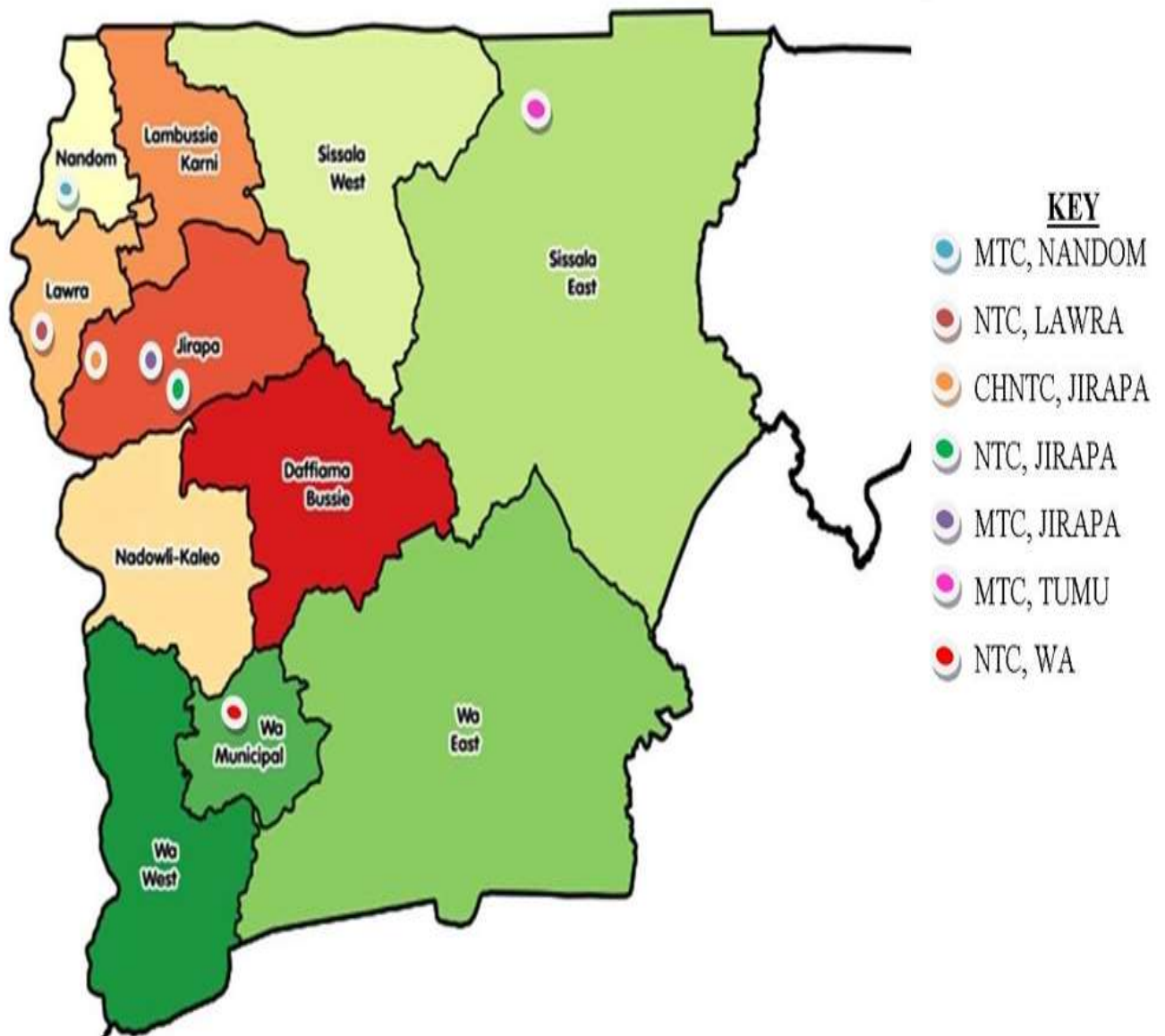
These seven (7) Training Institutions in the region are being managed by Nurse Leaders (principals). All seven (7) institutions in the region were included in the study because there are anecdotal issues concerning the leadership behaviours of the Heads of the various institutions. Secondly, all the institutions are included because of the quantitative nature of the study. The study also engaged all the employees of the institutions because they are under the supervision of the Nurse Leader and their perspective of the Nurse Leader is equally important. The seven (7) institutions are follows:

1. Nursing Training College, Wa: The college is situated within the Wa municipality at Kperisi along the Wa-Bolga road. Nursing Training College, Wa has a staff population of 42. The school trains both Registered General Nursing (RGN-Diploma) and Nursing Assistant Clinical (NAC-Certificate) programmes. The institution is included in the study because it is the only Nursing Training College in the regional capital.

2. Nursing Training College- Lawra: The institution is situated at the Lawra municipality with a staff population of 30. The school trains both Registered General Nursing (RGN-Diploma) and Nursing Assistant Clinical (NAC-Certificate). The institution is included in the study because it is the only nursing training college in the municipality.
3. Nursing Training College, Jirapa: The institution is located in the Jirapa municipality with a staff population of 42. The school trains only Registered General Nursing (RGN-Diploma). The institution is included in the study because it is the oldest and the only Nursing Training College in the municipality.
4. Midwifery Training College, Jirapa. The institution is also located in the Jirapa municipality with a staff population of 44. The school trains two programmes: Registered Midwifery (Diploma) and Post (NAC/NAP) Midwifery (certificate). The institution is included in the study because it is the oldest and the only Midwifery Training College in the municipality.
5. Community Health Training College, Jirapa. It is located within the Jirapa municipality with a staff population of 33. The school trains both Certificate and Registered Community Health Nursing programmes. The institution is included in the study because it is the oldest and the only Community Health Training College in the municipality.
6. Midwifery Training College, Nandom: The institution is located in Nandom district capital, Nandom and has a staff population of 45. The school trains two programmes Registered Midwifery (Diploma) and Post (NAC/NAP) Midwifery (certificate). The institution is included in the study because it is the only Midwifery Training College in the district.
7. Midwifery Training College, Tumu. The institution is situated in Sissala- East municipality, Tumu with a staff population 39. The school also trains two programmes Registered Midwifery (Diploma) and Post (NAC/NAP) Midwifery (certificate). The

institution is included in the study because it is the only Midwifery Training College in the municipality.

Figure 3.1 Map of Upper West indicating the seven Health Training Institutions



Source: GHS, Report 2017: UW/R.

In summary, out of the eleven (11) administrative areas of the region, only five (5) have HTIs. Out of these, five (5), Jirapa has three (3) HTIs, Wa have one (1), Nandom have one (1) and Sissala East (Tumu) have one (1).

3.3 Study population

A research population generally is the collection of people, individuals or a total quantity of things (objects) or cases which are the subject of a study (Martínez-Mesa, González-Chica, Duquia, Bonamigo, & Bastos, 2016). The target population for the study included all employees' (both teaching and non-teaching) working in the seven HTIs in the Upper West Region.

3.4 Inclusion Criteria

The study considered the following as inclusion criteria

1. Respondents should be full-time employees.
2. Respondents should either be teaching or non- teaching staff under the supervision of the Nurse Leader.
3. Respondents should have at least worked for six months.

Respondents who met all the criteria and were available at the time of the study were included.

3.5 Exclusion Criteria

The following were the exclusion criteria for the study.

1. Part-time staff or internship employees
2. Employees who have worked for less than six months under the supervision of the Nurse Leader
3. Nurse Leaders.

3.6 Sample size determination

The HTIs which are seven (7) in number have a total staff population of 274. The total staff population in HTIs were used with a confidence level of 95% and a constant of 1. The Yamane (1967) formula was used to calculate sample size, as described below:

Table 3.1 Quota of the institutions

No	Name of Institution	Population	%	Quota
1	Nursing Training College-Wa	42	15.3	27
2	Nursing Training College- Lawra	30	10.9	20
3	Nursing Training College, Jirapa	42	15.3	27
4	Midwifery Training College, Jirapa	44	16	29
5	Community Health Nursing Training College, Jirapa	33	12	22
6	Midwifery Training College, Nandom	45	16.3	29
7	Midwifery Training College, Tumu	39	14.2	25
Total		275	100.0	179

$$n = \frac{N}{1+N(e)^2}$$

Where:

n = required sample size

l= constant

N= Accessible population

e= alpha level or significance level

$$\text{Thus: } n = \frac{N}{1+N(0.05)^2}$$

$$n = \frac{275}{1 + 275(0.05)^2}$$

n=163

The sample size calculated for the study was 163 however, 10% was added to cater for non-response,

outliers and possible bias. Therefore, the total sample size was 179.

3.7 Sampling technique

The researcher used quota sampling technique to recruit respondents for the study. Quota sampling is an example of non-probability sampling where the respondents were selected in proportions based on the population (Yang & Banamah, 2014). Each Training Institution was given a quota based on the employees' population and a simple random sampling technique was used to recruit the study respondents who met the inclusion criteria. The simple random technique gives an equal chance for all respondents who will be selected to take part in this study (Martínez-Mesa et al., 2016). This technique was appropriate, cost-

effective and less time consuming considering the timing one month for data collection (Mohsin, 2016).

3.8 Data collection tool

A structured questionnaire was used in the collection of data. The questionnaire was grouped into four (4) sections. Section A covers socio-demographic characteristics of the respondents, Section B consist of two scales on leadership behaviours dimension, Section C: consists of job diagnostic scale that measures job characteristics and section D: consists of the Minnesota Satisfaction Questionnaire used to measure the outcome variable (job satisfaction). Detailed descriptions of the tools are as follow:

Section A: this section collected data on the socio-demographic characteristics of the respondents. The items in this section include age, gender, educational background, profession, and years of work experience, place of work. It also included an item on how long a subordinate had worked with the Nurse Leader.

Section B: It consists of a modified six (6) leadership characteristics, five (5) from path-goal leadership questionnaire developed by House (1971) and laissez-faire leadership questionnaire adopted from the Multifactor leadership questionnaire (MLQ 5x-short) by Avolio and Bass (2004). The Path-Goal leadership instrument consisted of twenty (20) items, five (5) questions each that measures leadership behaviours (directive, participative, supportive and achievement-oriented) on a five-point Likert rating scale using the following numerical scale: 1 = not at all, 2= once in a while, 3 = sometimes, 4 = fairly often, and 5 = frequently, if not always. The modifications of the questionnaire were mainly the use of the terms ‘Nurse Leader’ in place of ‘the leader’ in line with the objectives and methodology of this study. High score means that particular behaviour is frequently used while low score means that particular leadership behaviour is the least used.

However, the Path-Goal leadership questionnaire did not include laissez-faire leadership items. As a result, the researcher included it to ascertain the general scope of leadership behaviours based on a broader literature review. The laissez-faire leadership questionnaire was adopted from the Multifactor leadership questionnaire (MLQ 5x-short) by Avolio and Bass (2004). The questionnaire consists of four (4) items on laissez-faire leadership behaviours to measure the leadership behaviours of Nurse Leaders. The tool is a five-point Likert rating scale using the following numerical scale: 1 = not at all, 2= once in a while, 3 = sometimes, 4 = fairly often, and 5 = frequently, if not always. The modifications of the questionnaire were mainly the use of the terms 'Nurse Leader' in place of the leader in line with the study objectives and the methodology. Higher score means that particular behaviour is frequently used while lower score means that particular leadership behaviour is the least used.

Section C: It consists of job diagnostic scale that measures on five (5) core job characteristics. The job diagnostic scale was developed by Hackman and Oldham (1976) to examine the relationship between job characteristics and job satisfaction, as well to determine moderating role on the relationship between leadership behaviours and job satisfaction. The tool is consists of eleven (11) items, two (2) items each is measuring skill variety, task identity, task significance and job autonomy, while three (3) items are measuring job feedback. The tool is scored on a 5-Likert scale: 1= Inaccurate, 2= Mostly Inaccurate, 3= Accurate, 4= Mostly Accurate, 5= Very Accurate. The modifications of the questionnaire were mainly the use of the terms 'task' in place of 'job' in line with the study objectives and the methodology.

Section D: This section collects data about outcomes variable (job satisfaction). The Minnesota Satisfaction Questionnaires (MSQ short-form) developed by (Spector 1985) was used to measure the job satisfaction of the respondents. The tool consists of twenty (20)

items, 12 items measures intrinsic and eight measures extrinsic. The tool is in a five-point Likert rating scale using the following numerical scale: 1=Not Satisfied, 2=Somewhat Satisfied, 3= Satisfied, 4=Very Satisfied, 5=Extremely Satisfied. The modifications of the questionnaire included the use of a school in place of a company. Higher score means that employees exhibited high level of job satisfaction and lower score means that employees have low level of job satisfaction.

3.9 Data collection procedure

Data was collected within a period of one (1) month. Prior to data collection, an introductory letter was taken from the University of Ghana School of Nursing and Midwifery, was sent to Health Training Secretariat in Accra seeking entry into the Health Training Institutions.

Approval letters from the Health Training Secretariat with the ethical clearance from the Institutional Review Board of the Noguchi Memorial Institute for Medical Research (NMIMR-IRB) were sent to the Administrative Heads of all the HTIs and permission was granted. The researcher selected and trained one person each from the institutions as research assistant to assist with data collection. Employees' who met the inclusion criteria for the study and gave consent to participate in the study were educated on the purpose and objectives of the study.

Respondents were given a written consent form to approve their engagement in the study which was followed by questionnaire distribution. Filled questionnaire were later collected. The researcher used a month for data collection and within that period, the researcher continually visited the institutions during the data collection process. One hundred and seventy-nine questionnaires (179) were distributed and all were returned, accounting for 100% response rate.

3.10 Data management

Data management described how the researcher was able to organise, document, disseminates and how the data is been stored. Data management enhances research effectiveness, increases the authenticity of data, guarantees confidentiality and allows research continuity through secondary data use (Borghi, Abrams, Lowenberg, Simms, & Chodacki, 2018).

Data collected by the researcher and research assistants were scrutinized carefully for completeness and consistency of responses. This approach aided in ensuring that questions were not left unanswered and that respondents answered questions with clarity. Each questionnaire was numbered, coded manually, the data was then manually cleaned and entered into excel to further clean and subsequently transported into SPSS version 22 for analysis. In addition, data was backup and storage by email for safe-keeping.

3.11 Data analysis

The data was analysed using the Statistical Package for Social Sciences (IBM SPSS) version 22. A sample size of one hundred and seventy-nine (179) was obtained for the data analysis. Questionnaires were coded and descriptive statistics measured the central tendency as in mean, standard deviation, frequencies and percentages and results presented in Tables.

The demographic characteristics (educational qualification, place of work/ institution and years of work experience) of respondents were recorded in two levels in order to perform a regression analysis to determine if demographics characteristics predict job satisfaction among respondents. The recoding was necessitated given that some of the categories had fewer respondents. The recoding increased the sample size for the analysis. The variables were recoded example, educational qualification was recoded into levels; respondents with first and master's degree were recoded as higher qualification whiles

respondents with a diploma and others were recoded as lower qualification (lower qualification = 0 and higher qualification =1). Place of work/institution was recoded into Nursing and Midwifery training college (Midwifery training colleges = 0 and Nursing and training colleges =1). Years of work experience recoded into two levels: 10 years above as 0 and 6 months to 10years as 1.

Pearson product-moment correlation analysis was used to establish the strength and direction of the relationships between the variables under study (leadership behaviours, job characteristics, and employees' job satisfaction). The Pearson correlation analysis is useful in determining the relationships between two or more variables with coefficients (r) ranged between ± 1 (Mukaka, 2012). Independent samples t test was used to compare the means of two unrelated groups to determine there is statistical difference between the two groups. The variables under study are assumed to be linearly correlated and are measured on an interval scale.

Hierarchical multiple regression analysis was used to determine the relationships between employees' demographic characteristics and employees' job satisfaction and also to test the predictive strength between the independent variables (demographic characteristics and leadership behaviours) on the dependent variables (job satisfaction) (Chen, Li, Wu, & Liang, 2013; Hanley, 2016).

Moderation was done to establish the strength of effect between the leadership behaviours and the outcomes. Moderation analysis was carried out with Process Macro model by Hayes (2013). The data met the basic assumptions for parametric analysis, and also, dependent and independent variables were measured on an interval scale. A (p) value of <0.05 was used to determine the level of statistical significance.

3.12 Validity and Reliability

Validity is the magnitude at which a concept measures the accuracy in a quantitative study (Heale & Twycross, 2015; Thatcher, 2010). The questionnaire should address the entire variable or construct it is intended to study. Face validity is the indication that a tool should superficially appear to test what it is intended to test while content validity is the notion that a tool should sample the range of behaviour represented by the theoretical concept being tested.

To ensure the accuracy of the face and content validity, standardized tools were adapted for the study. The instrument was chosen based on its known credibility (Asamani et al., 2015; Malik, 2013; Silverthorne, 2001). The researcher conducted a comprehensive literature review to include the concepts of the study. The questionnaire was also examined by supervisor and peers, and it was pre-tested to validate the clarity of the instrument. Feedback received was used to improve the tool.

Reliability of questionnaire is the consistency of a measure (Heale & Twycross, 2015) or the extent to which a research instrument consistently has the same results if it is used in the same situation on repeated occasions. Thus, repeated use of the questionnaire would yield the same results. To ensure reliability, the questionnaire was piloted using 10% of the sample size of the total population and the outcome was used to strengthen the tool for data collection. A Cronbach's α coefficient was used to determine the internal consistency of the instrument.

Previous internal reliability of path-goal leadership questionnaire in literature had a Cronbach's alpha of 0.71- 0.86 (Silverthorne, 2001), laissez-fair scale had a Cronbach's alpha score of 0.61 (Gorfie & Pradesh, 2017), job satisfaction scale was established as Cronbach 0.91 (Spector 1985), job diagnostic survey scale with a Cronbach's alpha ranging 0.56 - 0.88 (Hackamn and Oldham, 1976). According to Gliem and Gliem (2003),

Cronbach’s alpha reliability coefficient ranges typically between 0 and 1. However, there is no lower limit to the coefficient. The closer Cronbach’s alpha coefficient is to 1.0 the more reliable the generated scale is.

The pilot study was done at two Health Training Institutions in the Upper East Region. The pilot study showed a Cronbach’s alpha coefficient of reliability of the overall instrument as 0.82. The subscales range from 0.69 to 0.92 for the variables tested whereas the overall Cronbach’s alpha for the main study was 0.907. According to Hair, Babin, Black and Anderson (2010), any variable with Cronbach’s alpha less than 0.60 is not good enough and any variable with Cronbach’s alpha of 0.70 is acceptable and if greater than 0.80 it is very good. From the results, it can be observed that the questionnaire was reliable for use in carrying out the study. Table 3.2 summarizes the reliability of the instrument for pilot and main work.

Table 3.1 Reliability Analysis

Variables	N		Items		Reliability	
	Pilot	Main	Pilot	Main	Pilot	Main
Path goal Leadership	20	179	20	20	0.832	0.851
Laissez-faire leadership	20	179	4	4	0.812	0.860
Job Satisfaction	20	179	20	20	0.920	0.896
Task characteristics	20	179	11	11	0.720	0.737

Source: Field data, 2019

3.13 Ethical considerations

Ethical consideration in research implies protecting respondents from any form of injury that may come from events and result linked to the study (Warrell & Jacobsen, 2014). It gives the researcher the responsibility to safeguard his/her research respondents from

harm, maintain the privacy of respondents and consent should be obtained before recruiting them in the study.

Ethical clearance was obtained from the Institutional Review Board of the Noguchi Memorial Institute for Medical Research (NMIMR) with an introductory letter from the School of Nursing and Midwifery and Health Training Secretariat, Accra. The introductory letters and the approved letter from NMIMR were submitted to the Administrative Heads of the institutions for approval for the commencement of data collection in their institutions.

The researcher had permission from the Administrative Heads of the various institutions. Respondents were informed about the nature and purposes of the study. The consent form also had a summary of the nature and purposes of the study and respondents gave their consent either by signing or fingerprinting prior to their inclusion in the study.

The questionnaire administered bears no name(s) of respondents and participation was completely voluntary. Respondents had the freedom to drop out of the study at any point in time. All responses were kept confidential and anonymous. The study findings and completed questionnaires are kept confidential under a password and will not be accessible to external use apart from the research team.

3.14 Summary

The study used a quantitative cross-sectional design. The study included one hundred and seventy-nine (179) employees from the seven (7) HTIs in Upper West Region. A quota sampling was used in selecting the respondents based on each of the institutions' population and simple random sampling was used to recruit respondents who met the criterion. Standard tools were adopted and modified in order to address the study objectives.

Prior to data collection, introductory letters obtained from the School of Nursing and Midwifery, University of Ghana, Health Training Secretariat, Accra with the ethical

clearance from the Institutional Review Board of the Noguchi Memorial Institute for Medical Research (NMIMR-IRB) were given to the Administrative Heads of all the HTIs in the Region. Permission was granted and the researcher selected and trained seven persons as research assistants to assist in data collection, the purpose and objectives of the study were explained to respondents and their concern seek. Participation was voluntarily, the rights, anonymity and confidentiality of respondents were protected. The data was collected within the time schedule. The data was analysed using the Statistical Package for Social Sciences (IBM SPSS) version 22. Descriptive statistics and inferential statistics were used considering the statistical assumptions in order to draw a valid conclusion from the data.

CHAPTER FOUR

FINDINGS

4.0 Introduction

The chapter presents the finding of the study. The chapter is in sections, the first section reports the demographic characteristics of participants. The rest of the sections present the results according to the objectives of the study.

4.1 Socio-demographic characteristics of respondents

Table 4.1 shows that the respondents mean age was 36.11($SD = 1.23$) with 34 being the modal age. Majority of the respondents (32.4%) were between the ages of 31-35years. Most of the respondents were males (59.2%). Additionally, majority of the respondents were teaching staff (61.5%). Most of the respondents (65.4%) have a first degree as academic qualification. Furthermore, 39.7% of the respondents have between 6-10 years' of work experience. Only 1.7% have worked for more than 20 years whereas 38% have worked between 1-2 years with the Nurse Leader.

Table 4.1 Socio-demographic characteristics of respondents

Variables	Frequency	Percentage %
Type of institution		
NTC	96	53.6
MTC	83	46.4
Total	179	100.0
Age of Respondents		
20-25 years	4	2.2
26-30 years	27	15.1
31-35 years	58	32.4
36-40 years	56	31.3
41-45 years	14	7.8
>45 years	20	11.2
Total	179	100.0
Gender		
Males	106	59.2
Females	73	40.8
Total	179	100.0
Area of expertise		
Teaching staff	110	61.5
Non- teaching staff	69	38.5
Total	179	100.0
Qualification		
Master's degree	17	9.5
First degree	117	65.4
Diploma	45	25.1
Total	179	100.0
Duration of work		
6 months	11	6.1
1-5 years	70	39.1
6-10 years	71	39.7
11-15 years	20	11.2
16-20 years	4	2.2
>20 years	3	1.7
Total	179	100.0
Duration of work with NL's		
6 months	23	12.8
1-2 years	68	38.0
3-5 years	47	26.3
6-7 years	16	8.9
>7 years	25	14.0
Total	179	100.0

N= 179 Source: Field data, 2019

4.2: Perceived leadership behaviours of Nurse Leaders

The first objective of this study is to describe the perceived leadership behaviours used by Nurse Leaders in the HTIs. A descriptive statistics in Table 4.2 shows that directive leadership behaviour has overall mean score of 3.12, ($SD = 0.84$). Respondents rated high on the item the ‘Nurse Leader explains the level of performance that is expected of subordinates’ (34.1%) while 7 (3.9%) respondents rated low on ‘the Nurse Leader asks subordinates to follow standard rules and regulations’. It was followed by achievement-oriented leadership behaviour with an overall mean score of 2.97, ($SD = 0.78$), 34.6% of respondents gave a high rate for ‘the Nurse Leader encourages continual improvement in subordinates’ performance’ while 6.7% of respondents said ‘the Nurse Leader does not encourage continual improvement in subordinates’ performance’ while 12 respondents (6.7%) also said ‘the Nurse Leader consistently set challenging goals for subordinates to attain’.

The next is supportive leadership behaviour ($M = 0.82$, $SD = 0.71$), a high rating of 63 (35.2%) was given to the item ‘the Nurse Leader does little things to make it pleasant to be a member of the group’ whilst, ‘the Nurse Leader helps subordinates overcome problems that halt them from carrying out their tasks’ is rated low (4.5%). There was not much difference between the use of achievement-oriented and supportive leadership behaviours.

Furthermore, the Nurse Leaders also moderately used participative leadership behaviour ($M = 2.73$, $SD = 0.81$). 60 respondents representing 33.5% rated high ‘the Nurse Leader sometimes asks for suggestions from subordinates concerning how to carry out assignments’ while 13 respondents (7.3%) rated low for ‘the Nurse Leader asks for suggestions from subordinates concerning how to carry out assignments’. while laissez-faire leadership behaviour was the least practise with an overall mean score of 2.32, ($SD = 1.02$), 75 respondents representing 41.9% gave high rates on ‘the Nurse Leader does avoids making

decisions'. The result indicates that Nurse Leaders in the HTIs often used directive (autocratic) leadership behaviour compared to the other leadership behaviours. In addition, the Nurse Leaders in these institutions practised all the five (5) leadership behaviours as and when the situation depends, but more inclined to the directive leadership behaviour. Detailed results in Table 4.2

Table 4.2 Perceived Leadership behaviour of Nurse Leaders

VARIABLES	Not at all Freq. (%)	Once in a while Freq. (%)	Sometimes Freq. (%)	Fairly often Freq. (%)	Frequently Freq. (%)	Mean	SD.
Directive leadership						3.12	.84
The Nurse Leader lets subordinates know what is expected of them	13 (7.3)	31 (17.3)	57 (31.8)	50 (27.9)	28 (15.6)	3.27	1.14
The Nurse Leader informs subordinates about what needs to be done and how it needs to be done.	22 (12.3)	34 (19.0)	58 (32.4)	35 (19.6)	30 (16.8)	3.09	1.24
The Nurse Leader asks subordinates to follow standard rules and regulations.	7 (3.9)	32 (17.9)	53 (29.6)	49 (27.4)	38 (21.2)	3.44	1.13
The Nurse Leader explains the level of performance that is expected of subordinates.	15 (8.4)	44 (24.6)	61 (34.1)	41 (22.9)	18 (10.1)	3.02	1.10
The Nurse Leader gives vague explanations of what is expected of subordinates on the job.	34 (19.0)	40 (22.3)	50 (27.9)	43 (24.0)	12 (6.7)	2.77	1.20
Supportive leadership						2.82	.71
The Nurse Leader maintains a friendly working relationship with subordinates.	19 (10.6)	38 (21.2)	53 (29.6)	36 (20.1)	33 (18.4)	3.15	1.25
The Nurse Leader does little things to make it pleasant to be a member of the group.	27 (15.1)	49 (27.4)	63 (35.2)	30 (16.8)	10 (5.6)	2.70	1.09
The Nurse Leader says things that hurt subordinates' personal feelings.	28 (15.6)	47 (26.3)	52 (29.1)	29 (16.2)	23 (12.8)	2.84	1.24
The Nurse Leader helps subordinates overcome problems that halt them from carrying out their tasks.	38 (21.2)	40 (22.3)	58 (32.4)	35 (19.6)	8 (4.5)	2.64	1.15
The Nurse Leader behaves in a manner that is thoughtful of subordinates' personal needs.	32 (17.9)	42 (23.5)	57 (31.8)	32 (17.9)	16 (8.9)	2.77	1.20
Participative Level							

Participative Leadership						2.73	.81
The Nurse Leader consults with subordinates when facing a problem.	32 (17.9)	49 (27.4)	49 (27.4)	34 (19.0)	15 (8.4)	2.73	1.20
The Nurse Leader listens receptively to subordinates ideas and suggestions.	29 (16.2)	52 (29.1)	45 (25.1)	35 (19.6)	18 (10.1)	2.78	1.22
The Nurse Leader act without consulting his/she subordinates.	30 (16.8)	50 (27.9)	49 (27.4)	33 (18.4)	17 (9.5)	2.76	1.21
The Nurse Leader asks for suggestions from subordinates concerning how to carry out assignments.	31 (17.3)	40 (22.3)	60 (33.5)	35 (19.6)	13 (7.3)	2.77	1.17
The Nurse Leader asks subordinates for suggestions on what assignments should be made	39 (21.8)	44 (24.6)	59 (33.0)	23 (12.8)	14 (7.8)	2.60	1.19
Achievement-oriented leadership						2.96	.78
The Nurse Leader let subordinates know that he/her expects them to perform at their highest level.	18 (10.1)	39 (21.8)	36 (20.1)	47 (26.3)	39 (21.8)	3.28	1.30
The Nurse Leader set goals for subordinates' performance that are quite challenging.	25 (14.0)	54 (30.2)	47 (26.3)	37 (20.7)	16 (8.9)	2.80	1.18
The Nurse Leader encourages continual improvement in subordinates' performance.	12 (6.7)	40 (22.3)	62 (34.6)	38 (21.2)	27 (15.1)	3.16	1.14
The Nurse Leader shows doubts about subordinates' ability to meet most objectives	31 (17.3)	37 (20.7)	56 (31.3)	37 (20.7)	18 (10.1)	2.85	1.22
The Nurse Leader consistently set challenging goals for subordinates to attain.	40 (22.3)	31 (17.3)	57 (31.8)	39 (21.8)	12 (6.7)	2.73	1.22
Laissez-faire leadership						2.32	1.02
The Nurse Leader avoids getting involved when important issues arise	64 (35.8)	45 (25.1)	32 (17.9)	19 (10.6)	19 (10.6)	2.35	1.34
The Nurse Leader is absent when needed.	63 (34.2)	48 (26.8)	36 (20.1)	17 (9.59)	15 (8.4)	2.29	1.26
The Nurse Leader avoids making decisions.	75 (41.9)	36 (20.1)	42 (23.5)	15 (8.4)	11 (6.1)	2.16	1.23
The Nurse Leader delays in responding to urgent questions.	52 (29.1)	38 (21.2)	53 (29.6)	23 (12.8)	13 (7.3)	2.48	1.23

N= 179 Source: Field data, 2019

4.3: Perceived Nurse Leaders' Leadership Behaviour and Employees Job Satisfaction

The study measured job satisfaction levels of respondents and examined the relationship between Nurse Leader's leadership behaviours and job satisfaction among respondents. Descriptive statistics shows that the overall mean score for respondents job satisfaction is average ($M = 3.00$, $SD = 0.64$). However, the item 'being able to keep busy on the job all the time' have a higher score ($M = 3.39$, $SD = 0.94$), whereas, the item on working conditions had the least score ($M = 2.31$, $SD = 1.20$).

The objective two sought to investigate the relationship that exists between leadership behaviours and job satisfaction among employees. Hypothesis H₁: states that there would be a significant relationship between leadership behaviours and respondents job satisfaction. Independent samples t test and Pearson movement correlation was conducted to test the hypothesis. Independent samples t test was conducted first before correlation. The means of two unrelated (teaching and non- teaching) groups of respondents were compared to determine whether there is significant differences on how each group perceived the nurse leadership behaviours, as well as satisfaction with job. The result indicates that, there were no statistical significant differences between the two groups. Additionally, the results indicate that respondents with Nursing and Midwifery background had no statistical significant differences with non- nursing background. Table 4.3 and 4.4 presents the detailed results.

Table 4.3: Independent Samples t Test: Relationship between leadership behaviours and employees' job satisfaction

Variables	Teaching staff (N= 110)		Non-Teaching staff (N= 69)		<i>t-value</i>	<i>p-value</i>
	<i>Mean</i>	<i>SD</i>	<i>Mean</i>	<i>SD</i>		
Directive	3.14	.88	3.09	.79	.410	.682
Supportive	2.81	.68	2.80	.75	.414	.680
Participative	2.71	.84	2.75	.78	-.33	.745
Achievement-oriented	3.00	.82	2.90	.72	.95	.344
Laissez-faire	2.38	1.08	2.23	.91	.98	.327
Job satisfaction	3.00	.64	3.00	.63	-0.01	.989

Table 4.4: Independent Samples t Test: Relationship between leadership behaviours and employees' job satisfaction

Variables	Nurses and Midwives'(N = 103)		Non –Nurses and Midwives' (N = 76)		<i>t-value</i>	<i>p- value</i>
	<i>Mean</i>	<i>SD</i>	<i>Mean</i>	<i>SD</i>		
Directive	3.15	.89	3.08	.768	.591	.556
Supportive	2.87	.66	2.75	.77	1.12	.264
Participative	2.75	.82	2.73	.80	-0.04	.965
Achievement	3.03	.81	2.87	.73	1.40	.165
Laissez-faire	2.34	1.06	2.22	.95	1.16	.249
Job satisfaction	3.02	.64	2.98	.64	.47	.642

The results of Pearson product-movement correlation indicated a significant positive correlation ($r = 0.48, p < .001$) between directive leadership behaviour and respondents job satisfaction. Supportive leadership behaviour shows a significant strong positive correlation ($r = 0.50, p < .001$) with respondents job satisfaction. Similarly, participative leadership behaviour shows a positive significant but moderate correlation with job satisfaction ($r = 0.46, p < .001$). Achievement-oriented leadership behaviour shows a fairly significant positive correlation ($r = 0.37, p < .001$) with respondents job satisfaction.

This suggests that when Nurse Leaders practise directive, supportive, achievement-oriented and participative leadership behaviours, respondents are significantly more likely to be satisfied. The study found no correlation between ($r = -0.09, p = 0.23$) laissez-faire leadership behaviour and job satisfaction. This shows that when Nurse Leaders practise laissez-fair leadership behaviour it has no influence on job satisfaction among respondents.

The study found a significant relationship between (directive, participative, supportive and achievement-oriented) leadership behaviours and respondents job satisfaction, however, there was no correlation ($r = -.09, p = 0.23$) between laissez-faire leadership behaviour and respondents job satisfaction. Hence, the hypothesis is partially accepted. The results are presented in Table 4.5.

Table 4.5 : Relationship between leadership behaviours and employees' job satisfaction

VARIABLES	EMPLOYEES' JOB SATISFACTION	
	<i>r</i>	<i>p-value (2-tailed)</i>
Directive	0.48	<0.001
Supportive	0.50	<0.001
Participative	0.46	<0.001
Achievement-oriented	0.37	<0.001
Laissez-Faire	-0.09	0.23

****Criterion level: 0.01**

4.4 Predictors of job satisfaction

Objective three of the study was to determine factors that will predict job satisfaction among employees. Out of that, two hypotheses are stated as follows: demographics characteristics would significantly predict job satisfaction and leadership behaviours would significantly predict job satisfaction. Hierarchical multiple linear regression analysis was used to determine if demographic characteristics of respondents (model 1) and the leadership behaviours of Nurse Leaders (Model 2) significantly predicted the job satisfaction of respondents. Table 4.6 reveals that demographic characteristics of respondents (gender, highest qualification, institution/ place of work and years of working experience) jointly explained 9.2 % of the variance in employees' job satisfaction ($R^2 = .092$, $F_{(4, 174)} = 4.42$, $p = .002$). When the predictors were evaluated for their individual contributions to the model, gender and institution were significant predictors in the model. Suggesting that males and are less likely to be satisfied with their job, whereas employees working in Midwifery Training Institutions are more likely to be satisfied as compared to employees working at Nursing Training Institutions. The second hypothesis was partially accepted since few respondents' demographic characteristics (gender and place of work) significantly predicted job satisfaction.

Furthermore, Nurse Leaders leadership behaviours (directive, supportive, participative, achievement-oriented and laissez-faire) together significantly predicted respondents job satisfaction, which explained 38.8 % of the variance in respondents job satisfaction ($R^2 .39$, $F_{(9, 169)} = 11.90$, $p < 0.001$). The following variables contributed significantly to the model: supportive leadership behaviour ($B = 0.25$, $t_{(173)} = 3.09$, $p = .002$), participative leadership behaviour ($B = 0.16$, $t_{(173)} = 2.04$, $p = .043$) and achievement-oriented leadership behaviour ($B = 0.16$, $t_{(173)} = 2.28$, $p = .024$). The finding shows that

supportive, participative and achievement-oriented leadership behaviours predicted respondents' job satisfaction.

Table 4.6: Predictors of job satisfaction

Predictors	Adjusted R	Unstandardized Coefficients		Standardized Coefficients	t-value	p-value
		B	Std. Error	Beta		
Model 1	0.09					
Constant		3.63	.24		15.10	.000
Gender		-0.24	0.10	-0.19	-2.58	.011
Qualification		-0.23	0.11	-0.16	-2.15	.033
Institution		-0.32	0.10	-0.25	-3.35	.001
Year of work experience		0.08	0.13	0.05	0.60	.548
($R^2 = 0.11$, $F_{(4, 174)} = 5.44$, $p = .002$).						
Model 2	0.38					
Constant		1.90	0.31		6.19	.000
Gender		-0.18	0.08	-0.15	-2.39	.018
Qualification		-0.23	0.09	-0.16	-2.56	.011
Institution		-2.07	0.08	-0.16	-2.53	.012
Year of work experience		0.06	0.11	0.04	0.58	.563
Directive		0.10	0.06	0.14	1.59	.114
Supportive		0.23	0.07	0.25	3.09	.002
Participative		0.12	0.06	0.16	2.04	.043
Achievement		0.13	0.06	0.16	2.28	.024
Laissez-faire		-0.03	0.04	-0.05	-0.79	.433
($R^2 = 0.41$, $F_{(9, 169)} = 12.99$, $p < 0.001$).						

Dependent variable: job satisfaction Criterion level: 0.05

4.5: Task characteristics and job satisfaction

This study also sought to find out whether there is a relationship between task characteristics and job satisfaction. In view of this, the hypothesis formulated was that ‘there would be a significant relationship between task characteristics and job satisfaction. Table 4.6 presents a linear correlation between task characteristics (skill variety, task identity, task significance, autonomy and feedback) and job satisfaction. The results indicated a positive correlation ($r = .47, p < 0.001$) between the five (5) core task characteristics (skill variety, task identity, task significance, autonomy and feedback) with respondents job satisfaction. This shows that all five task characteristics items have an influence on the employees’ job satisfaction. The result confirms a significant relationship between task characteristics and job satisfaction, hypothesis is supported.

Table 4.7: Relationship between job characteristics and satisfaction

VARIABLES	SATISFACTION	
	<i>r</i>	<i>p-value (2-tailed)</i>
Skill variety	0.24	0.001
Task identity	0.29	<0.001
Task significance	0.26	<0.001
Autonomy	0.34	<0.001
Feedback	0.39	<0.001

****Criterion level: 0.01**

4.6: Task characteristics as moderators the relationship between leadership behaviours and job satisfaction

Furthermore, the study sought to examine whether task characteristics moderates the relationship between leadership behaviours and job satisfaction. Hypothesis was formulated

as follow: task characteristics would significantly moderate the relationship between leadership behaviours and job satisfaction. To test the hypotheses, a moderation analysis examined the interaction effect between leadership behaviours and job characteristics. For example, model 1, which consists of directive leadership behaviour, task characteristics and the interaction term is different from only constant model ($R^2 = 0.40$, $F_{(3, 175)} = 38.93$, $p < .001$) significantly moderate the relationship between directive leadership behaviour and job satisfaction. Model 2, 3, 4 and 5 was also significant. The hypothesis was supported. The results are presented in Table 4.5.

Inspection of the results shows that all but one interaction term were significant. For example, the result in model 1 indicates a significant moderator effect of task characteristics ($B = 0.20$, $t_{(175)} = 2.91$, $p = .004$) on the relationship between directive leadership behaviour and job satisfaction. This means those who rated high for task under directive, participative achievement- orient and laissez-faire leadership behaviours have the knowledge and minimal or no instructions is needed to perform a task. With them the presence or absence of leader it does not matter to them. The result in model 2 showed no significant moderator effect of task characteristics ($B = 0.09$, $t_{(175)} = 1.26$, $P = .209$) on the relationship between supportive leadership behaviour and job satisfaction. The results in model 3 showed a significant moderator effect of task characteristics ($B = 0.16$, $t_{(175)} = 2.27$, $p = .024$) on the relationship between participative leadership behaviour and job satisfaction. Findings in Model 4 indicated a significant moderator effect of task characteristics ($B = 0.16$, $t_{(175)} = 2.14$, $p = .033$) on the relationship between achievement-oriented leadership behaviour and job satisfaction. Model 5 also showed significant moderator effect of task characteristics ($B = 0.19$, $t_{(175)} = 2.94$, $p = .004$) on the relationship between laissez-faire leadership behaviour and job satisfaction. Results are presented in Table 4.8.

Respondents who indicated that they are satisfied with their job when the Nurse Leader uses directive and laissez-fair leadership behaviours are those who thought their jobs are well-defined (score high on task characteristics). Likewise, respondents who rated low on task characteristics are those with ambiguous task and thus preferred the use of participative and achievement- oriented leadership behaviours. Results are presented in Table 4.8.

Table 4.8: Moderator effect of task characteristics on the relationship between leadership behaviours and job satisfaction

<i>Variables</i>	<i>Beta</i>	<i>SE</i>	<i>t-value</i>	<i>p-value</i>	<i>Variables</i>	<i>Beta</i>	<i>SE</i>	<i>t-value</i>	<i>p-value</i>
Directive leadership					Supportive leadership				
Model 1					Model 2				
Constant	2.98	0.03	78.59	.000	Constant	2.10	0.04	76.92	.000
Directive	0.29	0.05	6.21	.000	Supportive	0.35	0.06	6.07	.000
Task characteristics	0.37	0.06	5.74	.000	Task characteristics	0.35	0.07	5.38	.000
Interaction	0.20	0.07	2.91	.004	Interaction	0.09	0.07	1.26	.209 *
$R^2 = 0.40, F = (3, 175) = 38.93, p < .001$					$R^2 = 0.38, F = (3, 175) = 35.07, p < .001$				
Participative leadership					Achievement –oriented leadership (ACH)				
Model 3					Model 4				
Constant	2.98	0.04	76.21	.000	Constant	2.98	0.04	71.44	.000
Participative	0.26	0.05	5.24	.000	ACH	0.19	0.06	3.38	.001
Task characteristics	0.38	0.07	5.78	.000	Task characteristics	0.40	0.07	5.78	.000
Interaction	0.16	0.07	2.27	.024	Interaction	0.16	0.08	2.14	.033
$R^2 = 0.36, F = (3, 175) = 33.42, p < .001$					$R^2 = 0.30, F = (3, 175) = 24.70, p < .001$				
Laissez-Faire leadership									
Model 5									
Constant	2.98	0.04	72.10	.000					
Laissez-fair	-0.14	0.04	-0.37	.001					
Task characteristics	0.49	0.07	7.23	.000					
Interaction	0.19	0.06	2.94	.004					
$R^2 = 0.28, F = (3, 175) = 22.79, p < .001$									

* = Not significant

4.7. Respondents demographic characteristics moderate the relationship between leadership behaviours and job satisfaction

The study also examines if respondents' demographic characteristics would moderate the relationship between leadership behaviours and job satisfaction. Hypothesis five was formulated as H₅: There would be a significant relationship moderating effect of respondents' demographic characteristics on the relationship between leadership behaviours and job satisfaction. To test the hypotheses, a moderation analysis examined the interaction term between leadership behaviours and subordinates characteristics. Subordinates characteristics used were age, educational qualification, area of expertise (teaching and non-teaching staff) and years of experience, the model containing the individual variables was statistically significant.

Probing further, demographic characteristics respondents' moderating the relationship between leadership behaviours and job satisfaction, results show that years of experience between 10years and above under supportive leadership behaviour was significant ($B = 0.63, t = 4.06, p = .001$). The results further indicated that, respondents above 10 years of work experience are likely to be satisfied when the Nurse Leader adopts supportive leadership behaviour. The rest were not significant. For speciality the study reported on the significant results. Hypotheses were partially supported. Table 4.9 presents the detailed results.

Table 4.9: Moderator effect of employee characteristics on the relationship between leadership behaviours and job satisfaction

<i>Variables</i>	<i>Beta</i>	<i>SE</i>	<i>t- value</i>	<i>P- value</i>	<i>Variables</i>	<i>Beta</i>	<i>SE</i>	<i>t- value</i>	<i>P- value</i>
Directive leadership behaviour (DLB)					Supportive leadership behaviour (SLB)				
Model 1					Model 2				
Constant	2.10	0.04	70.94	.000	Constant	2.99	0.04	72.00	.000
DLB	0.37	0.05	7.28	.000	SLB	0.46	0.06	7.84	.000
Age	0.10	0.11	0.91	.362	Age	0.13	0.11	1.18	.238
Interaction	-0.16	0.14	-1.17	.245	Interaction	-0.06	0.15	-0.36	.720
$R^2 = 0.24, F_{(3,175)} = 18.31, p < .001.$					$R^2 = 0.26, F_{(3,175)} = 20.54, p < .001.$				
Constant	3.00	.042	70.97	.000	Constant	3.00	0.04	72.12	.000
DLB	0.37	0.05	7.20	.000	SLB	0.46	0.06	7.69	.000
Area of expertise	-0.21	0.09	-0.25	.806	Area of expertise	-0.02	0.09	-0.25	.801
Interaction	-0.05	0.11	-0.51	.612	Interaction	0.03	0.12	0.23	.815
$R^2 = 0.23, F_{(3,175)} = 17.29, p < .001.$					$R^2 = 0.25, F_{(3,175)} = 19.81, p < .001.$				
Constant	3.00	0.04	71.96	.000	Constant	3.00	0.04	73.17	.000
DLB	0.36	0.05	7.18	.000	SLB	0.45	0.06	7.80	.000
Educational Background	-0.18	0.10	-1.90	.060	Educational Background	-0.18	0.09	-1.92	.057
Interaction	0.15	0.12	1.24	.218	Interaction	0.16	0.13	1.18	.241
$R^2 = 0.25, F_{(3,175)} = 19.37, p < .001.$					$R^2 = 0.27, F_{(3,175)} = 22.02, p < .001.$				
Constant	2.10	0.04	7.20	.000	Constant	3.00	0.04	76.36	.000
DLB	0.36	0.05	7.20	.000	SLB	0.45	0.06	8.13	.000
Years of experience	0.23	0.12	1.95	.053	Years of experience	0.24	0.11	2.19	.030
Interaction	0.21	0.14	1.49	.137	Interaction	0.63	0.16	4.06	.001
$R^2 = 0.25, F_{(3,175)} = 19.64, p < .001.$					$R^2 = 0.33, F_{(3,175)} = 29.20, p < .001.$				

<i>Variables</i>	<i>Beta</i>	<i>SE</i>	<i>t- value</i>	<i>P- value</i>	<i>Variables</i>	<i>Beta</i>	<i>SE</i>	<i>t- value</i>	<i>P- value</i>
Participative leadership behaviour (PLB)					Achievement- oriented leadership behaviour (AOLB)				
Model 3					Model 4				
Constant	3.00	0.04	70.23	.000	Constant	3.00	0.04	67.75	.000
PLB	0.36	0.05	6.84	.000	AOLB	0.30	0.06	5.23	.000
Age	0.02	0.11	0.15	.889	Age	0.03	0.12	0.25	.806
Interaction	-0.13	0.13	-1.04	.298	Interaction	-0.28	0.16	-1.73	.085
$R^2 = 0.21, F (3,175) = 15.71, p < .001.$					$R^2 = 0.15, F (3,175) = 10.64, p < .001.$				
Constant	3.00	0.04	70.04	.000	Constant	3.00	0.04	67.04	.000
PLB	0.36	0.05	6.79	.000	AOLB	0.31	0.06	5.28	.000
Area of expertise	0.01	0.09	0.16	.875	Area of expertise	-0.04	0.09	-0.39	.699
Interaction	-0.05	0.11	-0.47	.640	Interaction	0.02	0.12	0.15	.878
$R^2 = 0.21, F (3,175) = 15.36, p < .001.$					$R^2 = 0.14, F (3,175) = 9.51, p < .001.$				
Constant	3.00	0.04	70.88	.000	Constant	2.10	0.04	68.36	.000
PLB	0.36	0.05	6.89	.000	AOLB	0.32	0.06	5.60	.000
Educational background	-0.19	0.10	-1.91	.058	Educational background	-0.20	0.10	-1.95	.053
Interaction	0.10	0.12	0.82	.414	Interaction	0.21	0.13	1.63	.105
$R^2 = 0.23, F (3,175) = 17.08, p < .001.$					$R^2 = 0.17, F (3,175) = 12.07, p < .001.$				
Constant	2.99	0.04	69.81	.000	Constant	3.00	0.04	67.55	.000
PLB	0.33	0.05	6.27	.000	AOLB	0.30	0.06	5.03	.000
Years of experience	0.20	0.13	1.62	.107	Years of experience	0.21	0.13	1.67	.097
Interaction	0.29	0.18	1.63	.106	Interaction	0.42	0.21	0.20	.844
$R^2 = 0.23, F (3,175) = 16.96, p < .001.$					$R^2 = 0.15, F (3,175) = 10.52, p < .001.$				

<i>Variables</i>	<i>Beta</i>	<i>SE</i>	<i>t- value</i>	<i>P- value</i>
Laissez-faire leadership behaviour (LFLB)				
Model 5				
Constant	3.00	0.05	62.63	.000
LFLB	-0.05	0.05	-1.13	.262
Age	0.44	0.13	0.34	.732
Interaction	0.03	0.16	0.18	.859
$R^2 = 0.01, F (3,175) = 0.53, p = .663$				
Constant	2.10	0.05	62.42	.000
LFLB	-0.06	0.05	-1.27	.204
Area of expertise	0.01	0.10	0.54	.920
Interaction	0.06	0.10	0.54	.590
$R^2 = 0.01, F (3,175) = 0.58, p = .630$				
Constant	3.00	0.05	63.08	.000
LFLB	-0.06	0.05	-1.23	.222
Educational	-0.18	0.11	-1.63	.106
Interaction	0.04	0.12	0.32	.750
$R^2 = 0.24, F (3,175) = 1.41, p = .242$				
Constant	3.00	0.05	63.21	.000
LFLB	-0.06	0.05	-1.20	.232
Years of experience	0.24	0.13	1.81	.071
Interaction	-0.04	0.14	-0.31	.757
$R^2 = 0.03, F (3,175) = 1.62, p = .187$				

4.8 Summary of key findings

- The results indicate the use of all the five (5) leadership behaviours by Nurse Leaders in various HTIs. But are more incline to directive leadership, followed by achievement-oriented. The next was supportive leadership followed by participative and laissez-fair leadership behaviour was rated least.
- The study results also found significant a positive but moderate correlation between directive, participative and achievement-oriented leadership behaviours and respondents job satisfaction. Supportive leadership shows a strong positive significant correlation

with employees' job satisfaction, while laissez-faire shows no correlation with employees' job satisfaction. The findings partly confirm the hypothesis that leadership behaviours of Nurse Leaders have an influence on the respondents' job satisfaction.

- Gender, educational qualification and place of work or institution were the few demographic characteristics that predicted the outcome variable (job satisfaction). Supportive, participative and achievement-oriented leadership behaviours predicted job satisfaction.
- All five task characteristics (skill variety, task identity, task significance, autonomy and feedback) items have an influence on the respondents' employees' job satisfaction.
- Task characteristics moderate the relationship between leadership behaviours (directive, participative, achievement-oriented, laissez-fair) and job satisfaction. However, task characteristics moderating the relationship between supportive leadership behaviour was not significant. Hence, the hypothesis was partly supported.
- Years of experience under supportive leadership behaviour was significant, the rest was non-significant. The hypothesis was partly supported.

CHAPTER FIVE

DISCUSSION OF FINDINGS

5.0 Introduction

This chapter presents a discussion of the findings of the study. Discussions are presented based on the research objectives.

5.1 Perceived Leadership behaviours of Nurse Leaders

Leadership is fundamental for the success of any institution. The leadership behaviour of Nurse Leaders in the HTIs has varied effects on both employees and the institutional outcomes. That makes it important for Nurse Leaders in the HTIs to adopt leadership behaviours to fit both performance and employees job satisfaction in order to achieve the institutional goals. A descriptive analysis indicated that employees perceived that their Nurse Leaders used all the five (5) leadership behaviours (directive, supportive, participative, achievement-oriented and Laissez-faire). Leadership is dynamic and that explains why all the five (5) leadership behaviours were observed. The institutional objectives will further determine why a particular leadership behaviour is dominant. However, leaders should be flexible with their leadership behaviours, In effect the use of different leadership behaviours would improve institutional outcomes (Aboshaiqah et al., 2014). Directive leadership behaviour was often used followed by achievement-oriented and supportive leadership behaviours. The least used was participative leadership behaviour and laissez-faire leadership behaviour. The findings support the Path-goal leadership theory which asserts that the use of different leadership behaviours to suit different situations at hand would increase job satisfaction.

This current study found directive (autocratic) leadership behaviour as the most predominately used behaviour by the Nurse Leaders as compared to the others. The finding is in line with the findings of Wachira, Tanui, & Kalai (2015) who also found that the use of directive leadership behaviour by heads of colleges was more dominant as compared to the other leadership behaviours. The use of directive leadership behaviour suggests that there are standard rules and procedures in HTIs that employees needed to follow in order to achieve the institutional goals. Thus, Nurse Leader gives more directions and commands to employees with the focus of getting the work done to increase performance. The use of directive leadership behaviour in the HTIs could also be attributed to the fact that 77.1% of the respondents have less than 5 years of work relationship with their Nurse Leader. In that instance, directive leadership behaviour is necessary to direct and guide newly recruited employees and employees who lack the necessary skills to successfully execute their assigned task. Though, literature have critic the use of directive leadership behaviour but then when there are newly employed staff, directive leadership behaviour would be useful to ensure tasks assigned are understood to achieve institutional goals within timeline.

The current findings contradict the findings of Ofei, Sakyi, Buabeng, Mwini-Nyaledzigbor, & Atindanbila (2014) who contended that Nurse Leaders in Ghana limits the use of directive leadership behaviour. Likewise, Kiboss & Jemiryott (2014) also found a negative relationship between directive (autocratic) leadership behaviour and teachers' job satisfaction. This variation in study findings could be attributed to the study settings and the sample population.

This study also found achievement-oriented (transactional) leadership behaviour was the next leadership behaviour used by Nurse Leaders. The finding is in line with other research works that indicates transactional leadership behaviour has a positive impact on institutional outcomes (Javed, Jaffari, & Rahim, 2014; Masa'deh, Obeidat, & Tarhini, 2016).

This suggests that, Nurse Leaders in the HTIs set challenging goals with high expectation that employees will accomplish desired goals in exchange for rewards. Nurse Leaders who adopt achievement- oriented leadership behaviour will only be appreciated when the leader gives clear task and equally guide employees to successfully complete assigned task for the benefit of employees and the institution.

Additionally, supportive and participative leadership behaviours were also moderately practised by Nurse Leaders. This finding is in line with other studies (Odubaker, 2016; Sirisookslip, Ariratana, & Ngang, 2015) who also found a positive relationship between supportive and participative leadership behaviours and employees outcomes. This suggests that Nurse Leaders who are perceived to adopt supportive and participative leadership behaviours are likely to improve employees' job satisfaction. This could also be attributed to the fact that some employees have higher educational qualification and are experienced, and as such, supportive leadership behaviour is ideal for leading them. Leadership is dynamic for effective leadership Nurse Leaders in the HTIs should adopt more of supportive and participative leadership behaviours by creating a friendly atmosphere that supports job satisfaction among employees. Gorfie and Pradesh (2017) also contented that Nurse Leaders should adopt supportive and participative leadership which encourages employees to take part in decisions of the institution so as to boost maximum results.

Furthermore, laissez-faire leadership behaviour was the least practiced in this study. This finding is consistent with the findings of Bateh (2014) who found that laissez-faire leadership behaviour was the least used behaviours. This suggests that employees perceived limited use of laissez-faire leadership behaviour by Nurse Leaders in HTIs. This means that Nurse Leaders in HTIs always avail themselves in decisions making, to give support to employees in order to achieve the institutional goals. It will be inappropriate for leaders in HTIs to adopt laissez-faire leadership behaviours since majority of their subordinates need

some form of support and guidance to effectively work. However, employees who have knowledge and expertise in their field the presence or absence of a leader might not affect their performance. Ofei et al. (2014) contended that employees who are competent on the job would prefer laissez-fair leadership behaviour to enable job autonomy which would boost creativity and performance in the organization.

The concept of leadership in the educational institutions is of great importance but leading a team to accomplish institutional goals and objectives is challenging and demanding. Nurse Leaders in HTIs are expected to be visionary, innovative and knowledgeable on issues that would bring transformation to the employees' and educational institutions (Arroliga, Huber, Myers, Dieckert, & Wesson, 2014). A leader needs to identify and adopt ideal leadership behaviour that is ideal for employees' job satisfaction.

The study findings show the use of different leadership behaviours by Nurse Leaders in the HTIs is consistent with the Path-goal leadership theory. Leaders have to take part in the decision making of the organization, support and guide employees who lack the necessary skills on the path of goal attainment. It will be inappropriate for Nurse Leaders in the HTIs to adopt laissez-faire leadership behaviours since many of the subordinates are new and will need to work under the supervision to acquire skills. Also, the absence of a leader in the HTIs might have a negative impact on employees and students performance, which might have a negative consequence on the training of Nurses and Midwives and that would consequently affect the quality of health in the country.

5.2 Perceived leadership behaviours and employees' job satisfaction

Job satisfaction among employees is important; therefore, Nurse Leaders have to identify the various factors that predict employees job satisfaction in order to enhance institutional performance. Research objective two sought to examine the relationship

between leadership behaviours and job satisfaction among employees. Descriptive statistics indicate a moderate job satisfaction among employees. The finding implies that employees of HTIs have moderate job satisfaction. However, employees' show higher satisfaction on the item 'being able to keep busy on the job all the time' while employees were least satisfied with their working conditions.

In Ghana, health workers are faced with many challenges at their workplaces and that includes poor working environment, poor infrastructure, and insufficient remunerations among others (Asabir, Witter, Herbst, & Dedzo, 2013; Alhassan, Beyere, Nketiah-Amponsah, & Mwini-Nyaledzigbor, 2017). This could account for the employees showed a moderate satisfaction level among employees. The working conditions at the HTIs are not totally different in other public sectors in the country which could be the reason for similar findings. The study finding is consistent with other studies conducted in Ghana and other parts of the world (Abualrub & Alghamdi, 2012; Asamani et al., 2015; Ayivi-Guédéhoussou, 2016). For example, a study by Abualrub and Alghamdi (2012) found moderate job satisfaction levels among Saudi nurses. A similar study by Ayivi-Guédéhoussou (2016) found moderate job satisfaction among health workers (48%). The findings suggest employees are less satisfied with their jobs. Therefore, Nurse Leaders should adopt diverse leadership behaviours to improve job satisfaction levels of employees. The differences in findings could be a result of the differences in study settings and the sample population.

The study compared two unrelated groups (teaching and non-teaching) employees to find if there is significant differences in how each group perceived the leadership behaviour of Nurse Leaders and its impact on their satisfaction. The results of independent samples t test show no difference with level of their job satisfaction. Likewise, employees with Nursing and Midwifery background was compared with the rest of the employees, this result as well showed no difference in their job satisfaction levels. This suggests that Nurse

Leaders in HTIs apply same leadership behaviour to all employees and none of the groups were treated differently.

In addition, Pearson correlation analysis and the results show leadership behaviours (directive, supportive, participative and achievement-oriented) have a significant influence on job satisfaction. However, the results show that laissez-fair leadership behaviour has no influence on job satisfaction. This implies that leadership behaviour of the Nurse Leaders has a significant impact in enhancing employees' job satisfaction to increase performance in educational institutions (Amin, Shah, & Tattah, 2013). This also suggests that laissez-fair leadership behaviour was least practised by Nurse Leaders as compared to others. This could be attributed to the fact that majority of the employees were newly recruited and needed some amount of guidance to effectively execute assigned task. Thus, use of laissez-fair leadership behaviour will hinder their effectiveness at work, low confidence level and job satisfaction.

The study also found moderate but significant positive correlation between directive leadership behaviour and employees' job satisfaction. This implies that increase use of directive leadership behaviour by the Nurse Leaders in HTIs would lead to a corresponding increase in employees' job satisfaction. This is possible because most of the employees are new and when the leader uses directive leadership behaviour by making their task clear through the provision of necessary guidance will enhanced employees job satisfaction. This finding affirms the assertion of Wachira et al. (2015) who argue that employees' were satisfied with the use of directive leadership behaviour by the Nurse Leaders. Malik (2013) also found a similar relationship between directive leadership behaviour and an increase in employees' job satisfaction. On the other hand, this finding contradicts the findings of Ofei (2014) and colleagues found that staff nurses in Ghana were dissatisfied with the directive (autocratic) leadership behaviour of their Nurse Leaders. Alonderiene and Majauskaitė

(2015) also found directive (autocrat) leadership behaviour has the least impact on faculty job satisfaction. The variations in study findings could be attributed to the differences in the study settings and the samples population used in these studies.

Similarly, the current study found a positive significant correlation between participative, achievement-oriented and supportive leadership behaviours and employees' job satisfaction. This means that the combination of participative, achievement-oriented and supportive leadership behaviours would promote job satisfaction among employees. This is consistent with other earlier studies that demonstrate an increased use of a single or a blend of directive, participative, supportive, and achievement-oriented leadership behaviours to improve employees' satisfaction (Cummings et al., 2018; Kiboss & Jemiryott, 2014; Konstantinou & Prezerakos, 2018; Tetteh & Brenyah, 2016; Wachira et al., 2015). The finding implies that the blend of these leadership behaviours by the Nurse Leaders has a positive impact on the employees' job satisfaction and which might enhance the performance of the employees in the organization. Nurse Leaders, therefore, need to be conversant with all the leadership behaviours so as to adequately utilize them when appropriate.

Furthermore, the study found a positive relationship between achievement-oriented leadership behaviour and employees job satisfaction. The finding is consistent with Javed et al. (2014) who found that achievement-oriented (transactional) leadership behaviour leads to employees job satisfaction. This result suggests that Nurse Leader in the HTIs who are perceived to apply achievement-oriented leadership give rewards in exchange for performance. Nurse Leaders who practised this leadership behaviour are perceived to have a corresponding increase in employees satisfaction. On the contrary, the finding contradicts the findings of Amin et al. (2013) who found a weak negative correlation between transactional (achievement-oriented) leadership behaviour and the overall job satisfaction

among faculty members. The variation in findings could be attributed to the study settings and sample population.

In addition, the study also found a positive relationship between supportive leadership and job satisfaction. This affirms the findings of Sirisookslip et al. (2015) and Tatlal & Iqbal (2013) who emphasized the use of relational leadership behaviours to enhance employees' job satisfaction, staff retention and organizational performance. This suggests that the Nurse Leaders should inspire and motivate their employees' by providing a friendly working environment to boost employees' job satisfaction and further increase performance. The path-goal theory stressed that leaders have to eliminate undesirable conditions to increase confidence and support to enhance employees effectiveness.

The results of study also show that laissez-faire leadership behaviour has no correlation with employees' job satisfaction as compared to others. This finding shows that laissez-faire leadership behaviour does not influence employees' job satisfaction. While this current study found no correlation between laissez-faire leadership behaviour and employees' job satisfaction, Asrar-ul-Haq and Kuchinke (2016) found laissez-faire leadership behaviour had a negative correlation with employee job satisfaction which this finding was also supported by the findings of Gorfie and Pradesh (2017). Meanwhile, Ali and Dahie (2015) found a positive significant correlation between laissez-faire leadership behaviour and employees' job satisfaction. This implies that depending on the situation and settings laissez-faire leadership behaviour could be used to achieve results. When employees have knowledge and expertise in their field, the use of laissez-faire might have less impact on their satisfaction and job performance. The differences in study findings could be attributed to the differences in study settings and samples used for the study. Previous studies have found supportive (transformational) and participative (democratic) leadership behaviours as the ideal or most effective for employees' effectiveness, but then leadership is

dynamic hence the use of one leadership behaviour might not constantly lead to satisfaction. As a result, it is imperative for leaders to constantly adopt leadership behaviours that would have a corresponding increase in satisfaction and institutional outcomes.

5.3 Respondents characteristics that predict job satisfaction

The objective three of this study was to investigate factors that predict job satisfaction among employees. The results of the study revealed that few employee demographics characteristics (gender, basic qualification, institution/ place of work and years of working experience) contributed significantly to the regression model. However, gender, qualification and place of work significantly predicted job satisfaction in the model. The findings is consistent with earlier studies which have shown that demographics have a predictive effect on job satisfaction (Rapti & Karaj, 2012; Suresh et al., 2015). For instance, Fatima (2015) found that age and gender can predict job satisfaction among employees. Likewise, Tabatabaei et al. (2013) found sex, age and education as affecting job satisfaction.

The study findings implies that, female are less likely to be satisfied as compared to their males colleagues in the HTIs. The frequencies on gender indicated that males are the majority 59.2% (n = 103) and female are 40.8% (n= 73) suggesting that there are more males working at the HTIs which is a field of academia compared to their females colleagues. This could also suggest that males easily adapt changes in their work environment as compared to their females counterparts. The study also found that employees working at the Nursing Training Institutions (NTC) are less likely to be satisfied. This could suggest that Nurse Leaders at NTC have not created the enabling environment to motivate employees job satisfaction as compared to their counterparts at the Midwifery Training Institutions.

Furthermore, the study also found employees who have higher educational qualification are less likely to be satisfied as compared to those with lower educational qualification. This

means that employees have acquired higher knowledge and very conversant with duties and responsibilities, the use of directive leadership behaviour and achievement-oriented leadership behaviour will not be necessary. Nurse leaders in the HTIs need to conversant with the leadership behaviours and apply leadership behaviour that is appropriate bearing in mind subordinates characteristics to enhance employees' job satisfaction and performance.

The Path-goal theory asserts that a leader can apply any of the leadership behaviour depending on two contingent factors, that environment in which the employee will perform the work and the individual characteristics. Each individual has a unique characteristic which makes it complex but then effective leaders are able to identify all possible factors that might impede employees' job satisfaction and job performance.

The findings of the current study are contrary to Duong et al. (2014) who found no predictive effects of demographics on employees job satisfaction. Sakiru and colleagues (2018) who studied the effects of demographic characteristics on job satisfaction in Malaysia had similar findings. There are differences in the outcomes of results the variations could be attributed to the different study settings and sample population.

However, holding constant demographic characteristics, supportive, participative and achievement-oriented leadership behaviours significantly contributed to the model. This implies that leadership behaviours can predict job satisfaction, this finding is consistent with Asamani et al. (2015) who also identified that leadership behaviours can predict job satisfaction. The findings suggest that an increase use of one or a blend of supportive, achievement-oriented and participative leadership behaviours would positively contribute to job satisfaction. Leadership is evolving due to factors such as technology and globalization, and sticking a particular leadership behaviour will not be ideal in all situations. Leaders have to constantly adopt leadership behaviour depending on the context for maximum results.

5.4 Task characteristics and job satisfaction

Research objective four sought to examine the relationship between task characteristics and job satisfaction. Pearson correlation analysis shows that task characteristics have an influence on the employees' job satisfaction. Other earlier studies have shown a positive relationship between task characteristics and employees' job satisfaction (Andrew et al., 2016; Hauff, Richter, & Tressin, 2015). This study results indicated a positive correlation between the five (5) core task characteristics (skill variety, task identity, task significance, job autonomy and job feedback) with employees' job satisfaction. This findings is congruent with the findings of Hamid (2017). The review of Andrew et al. (2016) also indicated that task characteristics have relation with employees job satisfaction. This suggests that Nurse Leaders in HTIs clearly defined task before the task is assign to employees it does not matter the kind leadership behaviour the leader apply afterwards but employees' with be satisfied with their job. However, employees who lack the expertise or whose task are ambiguous will need a well-defined and effective leadership behaviour to guide them towards a successfully completion of a task.

The study indicates a positive but weak correlation between task identify and job satisfaction which was supported by the findings of Hadi and Adil (2010). This implies that task identity have an influence on employees' job satisfaction. Though the result had weak correlation but then it indicated a positive correlation with job satisfaction. The result indicates that Nurse Leaders in HTIs gives chance to employees to perform task from start to the final completion of the task which lead to increase level of job satisfaction. This creates understanding and the employee will boost job satisfaction than performing the task in parts.

The study also indicates a positive but weak correlation between skill variety and task significance with job satisfaction. This finding is supported by the findings of (Ozturk et al.,

2014) who indicated that the use of different talents or skills by an employee to perform a particular and also recognising the contribution of each employee in the organization would improve job satisfaction and performance. The finding suggests that employees in the HTIs apply varied skills to successfully perform task assign to them and are recognised for their effort. Employees need to apply different skills to train nurses for the job market and Nurse Leaders in the HTIs have to support and recognize the contributions of team members. The results might help to improve and boost employees' job satisfaction and increase institutional performance.

Additionally, the study revealed that task autonomy and feedback have a positive but moderate correlation with job satisfaction. This findings is consistent with the findings of Zhao, Ghiselli, Law, and Ma (2016). This implies that employees in the HTIs are given some amount of freedom or independence to perform their duties and are satisfied with their job. Nurse leader in the HTIs need to provide some level of task autonomy to employees and that would give them the sense of confidence to make decisions and schedule their work consequently, they will be motivated. The result also indicated that employees in the HTIs are given feedback after task completion. Th results suggest that building effective interaction or communication systems within the HTIs is another opportunity to improve job satisfaction and effective commitment. Nurse Leaders have to effectively communicate feedbacks to employees concerning the outcomes of their task and that is fundamental to the success of the HTIs. Communication helps in building good relationship among team members to collectively attain the institutional goals and objectives. While poor communication of feedback might to lead to low satisfaction.

For the success of the HTIs, task should be well designed in a way that the employees have a right to decide work schedules or job-related problems. Thus, when tasks are been assigned to employee, and some degree of autonomy in carrying out the task, this might

make employees have active attitudes and responsibilities toward their jobs. Employees are responsible for task assign to them but then the task should be clearly defined. Effective feedback is also necessary to enhance job satisfaction and goal attainment. Effective feedback about the outcome of the perform task is importance to help improve on the next or future task.

5.5 Moderator effects of task characteristics and subordinates characteristics the relationship between leadership behaviours and job satisfaction

The fifth objective was to examine whether task characteristics and subordinates characteristics moderate the relationship between leadership behaviours and job satisfaction. Moderation analysis was performed and results revealed that task characteristics moderated the relationship between directive, participative, achievement-oriented and laissez-fair leadership behaviours and job satisfaction. This findings is in line with the findings of (Awan, Zaidi, & Bigger, 2008; House, 1971). However, there is no moderating effect of task characteristics on the relationship between supportive leadership behaviour and job satisfaction. This finding suggests that when task are explicit to employees, the use of directive, participative, achievement- oriented or laissez-faire leadership behaviours by Nurse Leaders, it will not affect their job satisfaction level or performance. This result suggested that employees who rated high for task characteristic under laissez-fair leadership behaviour are those whose task are well structured, and needed minimal or no instruction to perform their task. As a result, presence or absence of their Nurse Leaders will not affect their job satisfaction or task performance. However, employees who lack the necessary skills to perform task will need the direction of a leader. Therefore, the use of laissez-faire leadership behaviour will have a negative impact on job satisfaction and task performance. Though laissez-fair leadership behaviour is not a construct of the theory but then it shows a positive contribution to the model. This denotes that leadership is evolving hence the need

to identify and adopt a behaviour that fit for employee job satisfaction and task performance.

Contrary, to the findings of Downey, Sheridan, & Slocum (2019) who found task characteristics have no moderator effect on the relationship between leadership behaviours and job satisfaction. This variation in the study findings could be attributed to difference in study settings and the sample characteristics.

Again, the study result indicated that years of experience between above 10 years under supportive leadership behaviour was significant. However, the results further indicated that respondents above 10 years of work experience are likely to be satisfied when the Nurse Leader adopts supportive leadership behaviour. Employees with work experience of 10 years and above have exhibited some level of job satisfaction when Nurse Leader applied supportive leadership behaviour. This suggests that employees who have worked for many years might have reached the peak of their career and had enough experience at work with or without direction compared to those below 10 years of work experience. With or without the support of a leader, task will be performed and there will be minimal backlash in their interaction with their leader, such employees need some level of autonomy to be effective. Nurse leaders need to adopt different leadership behaviours to improve job satisfaction among employees.

According to Path goal theory, two contingent factors moderate the relationship between leadership behaviour and job satisfaction. The theory asserts that when tasks are clearly defined due to the repetitive nature, any attempt to use directive leadership behaviour would result in low satisfaction and in such instances, supportive leadership would be the ideal leadership behaviour to use. However, when task is dissatisfying to the subordinate, directive leadership would be effective for task achievements. Leaders will apply a particular leadership behaviour depending on the characteristics of the subordinates. Job satisfaction is

important because employees who are satisfied can perform as compare to employees who are less satisfied. Creating friendly working environment for employees to work would improve job satisfaction, organization commitment and organizational performance.

Though several studies have used Path goal theory, few have reported on the moderator variables and those few did not support the theory. These variations could be attributed to the fact that several tools are adopted to measure the variables. In these variations, there is some degree of certainty in the argument that different leadership behaviours are necessary depending on the situation (task and subordinates characteristics) to enhance employees' job satisfaction and performance.

5.6 Effectiveness of the Model Used for this study

The Path goal model have indicated the use of varied leadership behaviour considering other contingent factors needed in order to achieve maximum outcomes. The findings of this study have shown that Nurse leaders in the HTIs practise diverse leadership behaviours, but are more inclined to directive (autocratic) leadership. A Leader have to adopt a specific leadership behaviour depending on the situation and subordinates expertise for goal attainment. This current study findings found the model useful and the findings support the use of this model in other field of studies.

5.7 Summary of Discussion

The study found the use of all five leadership behaviours by Nurse Leaders but more inclined to directive leadership behaviour. Also, laissez-faire leadership behaviour was least practised. Leadership is dynamic and Nurse Leaders in the HTIs needs to be knowledge on leadership behaviour and when to apply to improve employees' job satisfaction and institutional performance. Gender, educational qualification and institution/ place of work

significantly predicted job satisfaction among employees. Task characteristics have a positive significant correlation with employees' job satisfaction. Again, task characteristics moderated the relationship between directive, participative, achievement-oriented and laissez-faire leadership behaviours and job satisfaction. Finally, years of experience moderated the relationship between supportive leadership behaviour and job satisfaction.

CHAPTER SIX

SUMMARY, IMPLICATIONS, LIMITATIONS, CONCLUSION AND RECOMMENDATIONS

6.0 Introduction

The chapter presents a summary of the study, the findings and conclusion. It also outlines the implications, limitation and recommendations for policies reforms and further research.

6.1 Summary

Nursing leadership in educational institutions has been a subject of interest over the past decades. The concept of leadership is convoluted and enveloping as the world is changing. In the wake of these changes, the leadership roles of the Nurse Leader in the HTIs have also changed significantly. The educational institutions need effective leadership to move along with the changes for the success of the employees and the institutions. This study explores the leadership behaviours of Nurse Leaders and the influence of these behaviours on employees' job satisfaction in the Health Training Institutions in the Upper West Region using the Path-goal leadership theory as the organizing framework.

The study employed a cross-sectional survey design to collect data from a sample of 179 employees in the seven HTIs in the Upper West Region of Ghana. A structured questionnaire was used for the data collection. The questionnaire was divided into four sections which cover the socio-demographic characteristics, the leadership characteristics of the Nurse Leaders, employees' job satisfaction and job characteristics. Statistical Package for Social Science (IBM SPSS) version 22 was used to analyse data. Descriptive statistics such as mean, standard deviation, frequencies and percentages was used to measure the

central tendency and the results presented in Tables. An independent samples t test results found no differences between the two unrelated groups of employees. Pearson product-moment correlation and multiple regression analysis were used to determine the extent to which Nurse Leader leadership behaviours predicted employees' job satisfaction. Moderation analysis was performed to establish the moderator effect of task characteristics and subordinates characteristics on the relationship between leadership behaviour and job satisfaction.

The findings indicate that Nurse Leaders in the HTIs used varying leadership behaviours depending on the situation. However, Nurse Leaders used more of directive (autocratic) leadership behaviour than the other leadership behaviours. This was followed by achievement-oriented (transactional) leadership behaviour, then supportive and participative leadership behaviours while laissez-faire leadership behaviour was least practised.

Employees exhibited moderate levels of job satisfaction. Employees' however, showed higher satisfaction with them being able to keep busy on the job all the time and were least satisfied with their working conditions. The study found moderate but significant positive correlation between directive, participative, achievement-oriented leadership behaviours and employees' job satisfaction. Meanwhile, supportive leadership shows a significant strong positive correlation with employees' job satisfaction. On the other hand, laissez-faire has no correlation with employees' job satisfaction.

The results of multiple regression analysis indicated gender, educational qualification and institution/ place of work significantly predicted job satisfaction among employees. Also, this current study found that leadership behaviours (supportive, participative and achievement-oriented) predicted job satisfaction. Also, the results of Person correlation indicated a positive correlation between task characteristics and employees job satisfaction.

A moderation analysis indicates a significant interaction effect between task characteristics (directive, participative laissez-faire and achievement-oriented) and leadership behaviours on job satisfaction. However, the study found non-significant moderator effect between task characteristics and supportive leadership behaviour on job satisfaction.

The study findings were discussed based on the objectives of the study. Most of the study findings were in line with previous study findings.

6.2 Implication for using the Path-goal theory

Path-Goal Leadership theory was the organising framework. The findings of this study show that Nurse Leaders practised all the leadership behaviours which are consistent with the Path-goal leadership theory. These different leadership behaviours are required for the attainment of employees' job satisfaction in the context of educational institutions.

The use of Path-goal leadership theory was useful in exploring the leadership behaviours of Nurse Leaders in the various Training Institutions and its influence on employees' job satisfaction. This current study finding backs the use of directive and achievement-oriented leadership behaviours as compared to other leadership behaviours.

6.3 Implication of the study for Nursing Administration

The results of this study have found that the use of varied leadership behaviours lead to diverse results, which suggest that no single leadership behaviour is ideal for all situations. For instance, directive, achievement-oriented, supportive and participative has a significant influence on employees' job satisfaction, which implies that these leadership behaviours have an influence on employees' job satisfaction. On the other hand, laissez-faire has no correlation with job satisfaction indicating that laissez-faire leadership has no

influence on employees' job satisfaction. Supportive, participative and achievement-oriented significantly predicts employees' job satisfaction.

These findings suggests the need for Nurse Leaders to have knowledge on leadership behaviours which will aid them to continual by modify and create a conducive working atmosphere for the organizational outcomes (job satisfaction). Though a significant number of Nurse Leaders were said to have training in leadership, they still practised directive (autocratic) leadership which is not used in other parts of the world. Hence, there is an essential need for Nurse Leaders to have leadership training prior to or immediately after their appointment in the position.

The practical implication of this study is for Nurse Leaders to focus on increasing the levels of job satisfaction of their employees by defining their role as leaders, demonstrating leadership behaviours and acquiring certain leadership behaviours. Leadership behaviours effectiveness increases when the behaviour is applied appropriately for certain situations. This means that Nurse Leaders should develop their leadership skills and adjust their leadership behaviour according to the situation and the goals they are trying to achieve.

6.4 Implication for Nursing Education

The study found leadership as an essential concept that can be taught at all levels of nursing education to prepare students into leadership along with the career. The curriculum should be regularly updated to fit the current leadership behaviour suitable in the Ghana context.

6.5 The limitations of the study

The limitations of the study include the research methodology. The study used questionnaire for data collection that was based on the rating, and it might not completely

reflect the exact views of respondents, though respondents were asked to be objective as possible in filling out the questionnaire.

The other limitation of the study is convenience sampling technique and sample size. This notwithstanding, the results of this study are congruent with other earlier findings in literature. Therefore, this study finding cannot be generalized to other HTIs.

6.6 Conclusion

The theory used for the study was able to address the study objectives. The study found the use of all five leadership behaviours by Nurse Leaders. This current study supports the use of directive and achievement leadership behaviours. Employees exhibited moderation level of job satisfaction. Gender, educational qualification and institution/ place of work significantly predicted job satisfaction among employees. Whereas, supportive, participative and achievement-oriented leadership behaviours. The study found a positive significant correlation between task characteristics and employees' job satisfaction. The study also found that task characteristics moderated the relationship between directive, participative, achievement-oriented and laissez-faire leadership behaviours and job satisfaction. Finally, years of experience moderated the relationship between supportive leadership behaviour and job satisfaction.

Nurse Leaders should adopt varied leadership behaviours that will fit both task performance and employees effectiveness. The leadership behaviours of Nurse Leaders should create an enabling environment for employees to work and together to train student nurses and achieve the institutional goals.

6.7 Recommendations

Based on the study findings, the following recommendations are made to the Health Training Secretariat, the various Health Training Institutions and Researchers.

6.7.1 Health Training Secretariat

Health Training Secretariat should;

1. Organize in-service training programmes on Management and Leadership skills
2. Review and implement the policy of employees' motivation
3. Review and improve the system for promotion and career development as a way of motivating employees.

6.7.2 Training institutions

Recommendations to the various training institutions are as follow:

1. Nurse Leaders should have knowledge on leadership behaviour and its implication to the employees and the institution.
2. Nurse Leaders should practice different leadership behaviours to improve employees' job satisfaction.
3. Nurse Leaders should get adequate training in leadership skills before assuming leadership positions in the training institutions.

6.7.3 Nurse Researchers

1. Researchers in the field of leadership, human resource and administration should consider repeating the study in other regions and sectors in Ghana to provide a holistic view on the subject using the mixed method approach.

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APPENDICES

UNIVERSITY OF GHANA
SCHOOL OF NURSING AND MIDWIFERY
RESEARCH QUESTIONNAIRE FOR EMPLOYEES OF NURSING/MIDWIFERY
TRAINING COLLEGES

Dear Respondent,

This questionnaire is for a research study about ‘The influence of leadership behaviours on employees' job satisfaction in the Health Training Institutions in the Upper West Region’. It is purely for academic purposes and your responses shall be kept in confidence. However, you can withdraw from the study even though your participation is much valued and appreciated. Kindly take time to honestly fill out this questionnaire. Thank you.

SECTION A: Demographic Characteristics

1. Age:

a. 20-25 years	[]	b. 26-30years	[]	c. 31-35years	[]
d. 36-40 years	[]	e. 41-45 years	[]	f. >45 years	[]
2. Gender:

a. M	[]	b. F	[]
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3. Profession:

a. Nurse	[]	b. Midwife	[]	c. Driver	[]
e. Nutrition	[]	e. Disease Control	[]	f. Administrator	[]
g. Accountant	[]	h. Account officer	[]	i. Librarian	[]
j. Cleaner	[]	k. Store keeper	[]	l. Security	[]
m. Caterer	[]	n. Info. Tech.	[]	o. Others (Specify):	
4. Qualification:

a. Masters	[]	b. First Degree	[]	c. HND	[]
d. Diploma	[]	e. WAECE	[]	f. BECE	[]
g. None	[]	h. Others (specify):			
5. Name of Institution:

a. NTC, Wa	[]	b. NTC, Lawra	[]	c. NTC, Jirapa	[]
d. MTC, Jirapa	[]	e. CNT, Jirapa	[]	f. MTC, Nandom	[]
g. MTC, Tumu	[]				
6. For how long have you being working?

a. <1 year	[]	b. 1-5 years	[]	c. 6-10 years	[]
d. 11-15 years	[]	e. 16- 20 years	[]	f. >20 years	[]
7. How long have you worked with the nurse leader?

a. < 1 year	[]	b. 1-2 years	[]	c. 3– 4 years	[]
d. 4– 5years	[]	g. 6 – 7 years	[]	h. >7years	[]
8. Educational background of your nurse leader:

a. Masters	[]	b. Degree	[]	Others (specify):
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9. Have your nurse leader had training in leadership?

a. Yes	[]	b. No	[]	c. I don't know	[]
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10. How long the leader has been in leadership position?

a. <1 year	[]	b. 1-5 years	[]	c.6-10 years	[]
d. 11-15 years	[]	e. 16- 20 years	[]	f. >20 years	[]

Section B: Leadership behaviours

Instructions: The term Nurse Leader represents the head of institution. The table provides a description of your Nurse Leader’s leadership behaviour. Kindly, tick (√) how frequently each statement fits your Nurse Leaders leadership behaviour and be objective in your responses. There is no right or wrong answers.

Key: 1 = not at all, 2 = once in a while, 3 = sometimes, 4 = fairly often, 5 = frequently, if not always. Tick the most appropriate answer

N o.	Statement	Response				
		1	2	3	4	5
	Directive					
1.	The Nurse Leader lets subordinates know what is expected of them					
2	The Nurse Leader informs subordinates about what needs to be done and how it needs to be done.					
3	The Nurse Leader asks subordinates to follow standard rules and regulations.					
4	The Nurse Leader explains the level of performance that is expected of subordinates.					
5	The Nurse Leader gives vague explanations of what is expected of subordinates on the job					
	Supportive					
6	The Nurse Leader maintains a friendly working relationship with subordinates.					
7	The Nurse Leader does little things to make it pleasant to be a member of the group.					
8	The Nurse Leader says things that hurt subordinates’ personal feelings.					
9	The Nurse Leader helps subordinates overcome problems that halt them from carrying out their tasks.					
10	The Nurse Leader behaves in a manner that is thoughtful of subordinates’ personal needs.					
	Participative					
11	The Nurse Leader consults with subordinates when facing a problem					
12	The Nurse Leader listens receptively to subordinates ideas and suggestions.					
13	The Nurse Leader act without consulting my subordinates.					
14	The Nurse Leader asks for suggestions from subordinates concerning how to carry out assignments.					
15	The Nurse Leader asks subordinates for suggestions on what assignments should be made					
	Achievement-oriented leadership behaviour					
16	The Nurse Leader let subordinates know that he/she expects them to perform at their highest level.					
17	The Nurse Leader set goals for subordinates’ performance that are quite challenging.					
18	The Nurse Leader encourages continual improvement in subordinates’ performance.					
19	The nurse leader shows doubts about subordinates’ ability to meet most objectives					
20	The Nurse Leader consistently set challenging goals for subordinates to attain.					
	Laissez-Faire leadership behaviour					
1	The Nurse Leader avoids getting involved when important issues arise					
2	The Nurse Leader is absent when needed					
3	The Nurse Leader avoids making decisions					
4	The Nurse Leader delays responding to urgent questions					

Section C: Task Characteristics

Instruction: Please, indicate by ticking (√) how best each statement best fit your job description

Key 1= Inaccurate, 2=Mostly Inaccurate, 3= Accurate, 4=Mostly Accurate, 5=Very Accurate.

Tick the most appropriate answer

NO.	Statement	1	2	3	4	5
	Skill variety					
1	The task requires using a variety of skills and talents.					
2	The task involves doing a number of different tasks					
	Task identity					
3	The task involves complete task from start to finish.					
4	The task provides the chance to completely finish the pieces of work I began.					
	Task significance					
5	The task itself is not very significant or important in the broader scheme of things.					
6	The result of my job is likely to significantly affect the lives or wellbeing of other people.					
	Autonomy					
7	The task gives me a considerable opportunity for independence and freedom in how I do the job.					
8	This task permits me to decide on my own on how to go about doing the work					
	Feedback					
9	The supervisors and co-workers on this job almost never give me any "feedback" about how well I am doing in my work.					
10	Supervisors often let me know how well they think am performing the job.					
11	The task itself provides very few clues about whether or not I am performing					

Section D: Job satisfaction

Instruction: Kindly indicate by ticking (√) in the appropriate box the extent to which each statement fit in your description.

Key: 1=Not Satisfied, 2=Somewhat Satisfied, 3= Satisfied, 4=Very Satisfied, 5 = Extremely Satisfied. Tick the most appropriate answer

No.	Statement	Response				
		1	2	3	4	5
	Intrinsic					
1	Being able to keep busy on the job all the time					
2	The chance to work alone on the job					
3	The chance to do different things from time to time					
4	The chance to be ‘somebody’ in the school					
5	Being able to do things that don’t go against my conscience					
6	The way my job provides for steady employment					
7	The chance to do things for other people					
8	The chance to tell people what to do					
9	The chance to do something that makes use of my abilities					
10	The freedom to use my own judgment					
11	The chance to try my own methods of doing my job					
12	The feeling of accomplishment I get from the job					
	Extrinsic					
13	The way my boss handles his/her workers					
14	The competence of my supervisor in making decisions					
15	The company policies are put into practice					
16	My pay and the amount of work I do					
17	The chances of advancement on the job					
18	The working conditions					
19	The way my co-workers get along with each other					
20	The praise I get for doing a good job					

THANK YOU FOR COMPLETING THE QUESTIONNAIRE



UNIVERSITY OF GHANA
DEPARTMENT OF RESEARCH, EDUCATION
AND ADMINISTRATION
SCHOOL OF NURSING

Ref. No.: SON/A.12.....

October 11, 2018

The Chairman
NMIMR - IRB
P.O. Box LG 581
Univ. of Ghana
Legon.

Dear Sir/Madam,

LETTER OF INTRODUCTION

I write to introduce to you Abu Nkacheba Amina, an MPhil second year student of the School of Nursing and Midwifery.

The Scientific Review Committee of the School has approved the thesis topic "**Leadership Behaviours of nurse Leaders in the Nursing Training Institutions and its influence on Employees' job satisfaction and productivity: A Study at the Upper West Region**".

I hope that the Institutional Review Board will consider the proposal to enable her collect data.

Counting on your usual co-operation.

Thank you.

Yours faithfully,

A handwritten signature in blue ink, appearing to read 'A. Ansah-Ofei'.

Dr. Adelaide Maria Ansah-Ofei
Head, Dept. of Research, Education and Administration

COLLEGE OF HEALTH SCIENCES

• P. O. Box LG 43, Legon, Accra, Ghana. • Telephone: +233 (0) 302 513 250 / 0289 531 213
• Email: rea.son@chs.ug.edu.gh • Website: www.nursing.ug.edu.gh



UNIVERSITY OF GHANA
DEPARTMENT OF RESEARCH, EDUCATION
AND ADMINISTRATION
SCHOOL OF NURSING

Ref. No.:.....SON/A.12.....

October 17, 2018

The Head
Health Training Institutions
Secretariat
Accra

Dear Sir/Madam,

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I shall be most grateful for any assistance to enable her collect data.

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Yours faithfully,

Dr. Adelaide Maria Ansah-Ofei
Head, Dept. of Research, Education and Administration

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NOGUCHI MEMORIAL INSTITUTE FOR MEDICAL RESEARCH
Established 1979A Constituent of the College of Health Sciences

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INSTITUTIONAL REVIEW BOARD



Post Office Box LG 581
Legon, Accra
Ghana

My Ref. No: DF.22
Your Ref. No:

7th November, 2018

ETHICAL CLEARANCE

FEDERALWIDE ASSURANCE FWA 00001824

IRB 00001276

NMIMR-IRB CPN 012/18-19

IORG 0000908

On 7th November 2018, the Noguchi Memorial Institute for Medical Research (NMIMR) Institutional Review Board (IRB) at a full board meeting reviewed and approved your protocol titled:

TITLE OF PROTOCOL : **The influence of leadership behaviour on employees' job satisfaction and productivity in the nursing training Institutions in the Upper West Region**

PRINCIPAL INVESTIGATOR : **Amina Nkacheba Abu, MPhil Cand.**

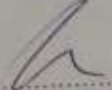
Please note that a final review report must be submitted to the Board at the completion of the study. Your research records may be audited at any time during or after the implementation.

Any modification of this research project must be submitted to the IRB for review and approval prior to implementation.

Please report all serious adverse events related to this study to NMIMR-IRB within seven days verbally and fourteen days in writing.

This certificate is valid till 6th November, 2019. You are to submit annual reports for continuing review.

Signature of Chair:


Mrs. Chris Dadzie
(NMIMR – IRB, Chair)

In case of reply the number and the date of this letter should be quoted

Our Ref: *MOH/HRHD/HTUA/18/18/001*
Serial No:
Your Ref: HTI-A-18-18001-HHTI



Republic of Ghana

MINISTRY OF HEALTH
P.O. BOX M-44
ACCRA
TELEFAX +233-0302-684250
www.ghanahrhobservatory.org
info@ghanahrhobservatory.org
Date: 14th November 2018

ALL PRINCIPALS
HEALTH TRAINING INSTITUTIONS
UPPER WEST REGION

**LETTER OF INTRODUCTION OF A SECOND YEAR MASTER OF PHILOSOPHY
STUDENT RESEARCHER FROM THE SCHOOL OF NURSING AND MIDWIFERY,
UNIVERSITY OF GHANA**

The Health Training Institutions Unit, Ministry of Health has given approval for Abu Nkacheba Aminna, a second year Master of Philosophy (MPhil) Student from the School of Nursing, University of Ghana to conduct a research on "**Leadership Behaviours of Nurse Leaders in the Nursing Training Institutions and its Influence on Employee Job Satisfaction and Productivity: A Study at the Upper West Region**" as part of her project work.

Whilst the outcome of the research is the property of the School of Nursing – University of Ghana, the researcher is requested to submit a report on the findings and recommendation to the Health Training Institutions Unit, Ministry of Health to help us improve on our leadership skills.

Kindly give her the needed assistance.

KWESI ASABIR (PhD)
HEAD, HTIU
for: **MINISTER FOR HEALTH**

Cc:

The Honourable Minister
The Honourable Deputy Minister
The Chief Director
The Director, Human Resource for Health Directorate
Dr A. M. Ansah-Ofei, Head, Dept of Research, Education and Administration, SoN, UG
Abu Nkacheba Aminna

CONSENT FORM

Title: The influence of leadership behaviours on employees' job satisfaction in the Health Training Institutions in the Upper West Region.

Principal Investigator: Amina Nkacheba Abu

Address: School of Nursing and Midwifery

P.O. Box LG43

University of Ghana, Legon

General Information about Research

I am a second year MPhil. Nursing student at the University of Ghana-Legon and conducting a study on leadership behaviours of Nurse Leaders in the Nursing Training Institutions and its influence on employees' job satisfaction. It is basically for academic purposes, information gathered will help identify the challenges of leadership, employees' job satisfaction and productivity and how to address these challenges in order to improve employees' performance.

You have been selected to take part in the study. However, your participation is voluntary.

If you agree to participate, you will sign two copies of this consent form to confirm your participation and answer questions regarding the study which will take about 20-30 minutes of your time.

Possible Risks and Discomforts

The study may involve minimal risk. However, if you encounter any discomfort during the time of consenting and data collection, you are free to take a break and continue later or drop from the study.

Possible Benefits

You will not receive a direct benefit from the study. However, the findings from the study will help to create opportunities to attract and retain employees by developing and strengthening the leadership behaviour to effectively leader followers to achieve the desired outcomes.

Confidentiality

In order to ensure that no body identifies you through the information provided, your name will not be recorded. The consent form will be given code, all information you provides will not be known to anyone rather than the research team (researcher, supervisor and research assistance). After the study data will be safely kept in the researcher's office for a period of five years under a password. The information provided will be destroyed after five years.

Compensation

You will be given a medium of jotter and a pen as an appreciation of the time spent in the study. These items will be provided at the end of data collection.

Voluntary Participation and Right to Leave the Research

Participation in the study is voluntary and you are free to drop out of the study at any time. You will not lose anything and your information will be kept confidential. Kindly inform the researcher if you wish to withdraw from the study at any point in time.

Contacts for Additional Information

Kindly contact the under listed if you have any questions, clarification or in case of any challenges related to the study.

Name: Amina Nkacheba Abu

Telephone: 0246160559

Email: naabu@st.ug.edu.gh

Name of supervisor: Dr. Adelaide Maria Ansah-Ofei

Telephone: 02446553065

Email: adelaideofei@gmail.com

Your rights as a Participant

This research has been reviewed and approved by the Institutional Review Board of Noguchi Memorial Institute for Medical Research (NMIMR-IRB). If you have any questions about your rights as a research participant you can contact the IRB Office between the hours of 8am-5pm through the landline 0302916438 or email addresses:

nirb@noguchi.ug.edu.gh

VOLUNTEER AGREEMENT

The above document describing the benefits, risks and procedures for the research title (Leadership behaviours of nurse leaders in the nursing training institutions and its influence on employees' job satisfaction and productivity: a study at the Upper West Region) has been read and explained to me. I have been given an opportunity to have any questions about the research answered to my satisfaction. I agree to participate as a volunteer.

Date

Name and signature or mark of volunteer

If volunteers cannot read the form themselves, a witness must sign here:

I was present while the benefits, risks and procedures were read to the volunteer. All questions were answered and the volunteer has agreed to take part in the research.

Date

Name and signature of witness

I certify that the nature and purpose, the potential benefits, and possible risks associated with participating in this research have been explained to the above individual.

Date

Name Signature of Person Who Obtained Consent