

Effect of Nurse's Supervisor's Leadership Style on Nurse's Job Satisfaction.

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ABSTRACT

Aim: To explore the impact of nurse managers leadership styles on nurse job satisfaction in the Kind Saud University Medical City, Riyadh, Saudi Arabia. **Background:** Leadership style is perceived to be an important factor in hiring, retention and job satisfaction for nursing staff in healthcare facilities. **Methods:** Quantitative descriptive design was used. Bivariate correlations between leadership styles and job satisfaction were examined. Fifty supervisors and department heads and 220 staff nurses were recruited to participate in this study, which was conducted during the first quarter of 2014. **Results:** The results of this study indicate that managers or supervisors explore and utilize various leadership styles and combinations that would create a positive impact on nursing staff 'on-the-Job' attitudes and Performance. **Conclusion:** The leadership styles of the managers had little influence on the overall satisfaction of nurses in this setting. However the nurse managers were instrumental and successful in shaping the nurse's work ethic.

Keywords: Health care, Nursing, Nurses, Leadership, Satisfaction, Saudi Arabia, Supervisor, manager

INTRODUCTION

Various leadership styles have been advanced and have provided leaders with choices concerning what they feel would match their needs, those of their followers and those of the organization as a whole. The Full Range Leadership Model developed by Avolio and Bass in 1991 presents behaviors that can be used by managers/supervisors/leaders in leading their followers to attain the unit level and organizational goals. The model consists of three umbrella leadership styles: transformational, transactional and laissez-faire leadership (Antonakis et al. 2003). Transformational leadership has been associated with job satisfaction among nurses (Abualrub et al. 2012). Studies linking leadership styles as perceived by the leaders, with job satisfaction as perceived by followers, appeared to be scarce in the Kingdom of Saudi Arabia (KSA). Hence, this study aimed to explore the influence of leadership style, as perceived by supervisors, based on the Full Range Leadership Model on job satisfaction, as perceived by nurses in a university medical city in Saudi Arabia.

BACKGROUND

In healthcare organizations; leadership effectiveness is assessed in terms of its outcomes in patient care (Wong et al. 2013), patient safety, patient satisfaction, quality of hospital

care and more importantly, staff job satisfaction (Aiken et al. 2012). In view of the shortage of nurses in various parts of the world (WHO 2006), job satisfaction among nurses is an important issue to be studied because it can impact both turnover and retention of nursing staff, as well as patient care outcomes (Hunt 2009).

In Saudi Arabia, the shortage of nurses is brought about by the following factors: increasing population and healthcare service needs (MOH-KSA 2013); preference by Saudi nursing graduates to work with other high (or higher) paying jobs; job dissatisfaction and burnout among nurses; insufficient number of Saudi nursing graduates to meet the national health care needs and turnover of nurses due to migration (Al-Homayan et al. 2013). Hunt (2009) asserts that turnover is costly and stressful not only to the organization, but to the remaining staff as well. Hence, improving the management of nurses after they are hired may prevent unnecessary turnover (Hunt 2009). In view of the prevailing shortage of nurses in Saudi Arabia, it is important that current nurse population be trained, motivated and retained in the healthcare system, because turnover is costly. This study explored the correlation between leadership styles of nurse managers/supervisors and job satisfaction of staff nurses in this large tertiary hospital in Riyadh, Saudi Arabia.

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LITERATURE REVIEW

Full Range Leadership Model and job satisfaction of nurses

Negussie and Demissie, (2013) examined the relationship between leadership styles using the MLQ Rater Form (5x-Short) and job satisfaction of 175 registered nurses from the Jimma University Specialized Hospital, Ethiopia, using the Minnesota Satisfaction Questionnaire [MSQ] (Short). Nurses rated the leadership styles of their nurse managers.

The results of the regression analysis indicated that IIA, IIB, IM, IS and IC have significant, positive and moderate to strong association with intrinsic (r range between 0.29 and 0.49; $p < 0.01$) and extrinsic job satisfaction (r range between 0.17 and 0.42; $p < 0.05$ and $p < 0.01$). CR had positive weak (r 0.15, $p < 0.01$) association with intrinsic job satisfaction and with positive and moderate (r 0.39, $p < 0.01$) association with extrinsic job satisfaction. MBEA had a weak positive association with both intrinsic (r 0.06, $p < 0.05$) and extrinsic (r 0.08, $p < 0.05$) job satisfaction. MBEP had weak negative (r -0.05, $p < 0.05$) and weak positive (r 0.07, $p < 0.05$) association with intrinsic and extrinsic job satisfaction respectively. Laissez-faire has weak negative correlations with both intrinsic (r -0.19, $p < 0.05$) and extrinsic (r -0.15, $p < 0.05$) job satisfaction. Nurses in this study preferred their leaders to demonstrate transformational rather than transactional leadership style. Overall, nurses had moderate intrinsic job satisfaction and low extrinsic job satisfaction (Negussie et al. 2013).

In this study, it appeared that the various leadership behaviors in the Full Range Leadership Model were demonstrated by the nurse managers. Transformational Leadership behaviors appear to contribute to a better nursing staff job satisfaction. It also appeared from the results that IS had the strongest association with both intrinsic and extrinsic job satisfaction of the nurses. In another study, the relationship between leadership styles and psychosocial work environment of 122 registered nurses were examined by Malloy and Penprase (2010) using MLQ (5x-Short) and Copenhagen Psychosocial Work Environment Questionnaire (COSOQ). Nurses rated the leadership styles of their managers. IIA, IIB, IM, IC, IS, CR, were found to have significant, positive and moderate to strong correlations with job satisfaction (r range between 0.39 and 0.48; $p < 0.01$). MBEA, MBEP, LF showed significant, negative and moderate to strong correlations with job satisfaction (r range between -0.21 and -0.53; between $p < 0.05$ and $p < 0.01$).

The results of this study suggest that leaders using the components of transformational leadership more likely contribute to a positive work environment, increased job satisfaction, commitment and motivation (Malloy et al. 2010). The results apparently indicated that the various leadership behaviors of the FRLM were demonstrated by the managers. Leadership behaviors under the transformational leadership model contributed significantly not only to the job satisfaction of the nurses, but also contributed to a positive work environment, commitment and motivation.

Leadership and job satisfaction studies in Saudi Arabia

Abualrub and Alghamdi (2012) examined the impact of leadership styles of nurse managers on Saudi nurses' job satisfaction and intention to stay on the job. The results indicated that Saudi nurses perceived their managers as transformational rather than transactional leaders. The results further showed that transformational leadership was

associated with job satisfaction. Transactional leadership on the other hand was found to be associated with job dissatisfaction. Nurses who were satisfied with their jobs intended to stay longer. The hierarchical regression analysis indicated that background variables, transformational leadership and transactional leadership styles explained 32% of the variance in job satisfaction. The hierarchical regression analysis also indicated that background variables, transformational leadership and transactional leadership styles explained 5% of the variance in nurses' intention to stay.

Bahnassy et al. (2014) determined the overall job satisfaction of nurses in a tertiary hospital in Riyadh. The results indicated that there were no statistically significant differences found in job satisfaction of nurses when grouped according to age group, gender, nationality, marital status and years of experience ($p > 0.05$). This suggests that the participants were more or less similar in their perceived job satisfaction. Statistically significant differences in job satisfaction were found in position, place of work, educational attainment, a country where the educational degree was obtained and salary. Those who have a rank of staff nurse 2, were assigned in women's hospitals, were non-PhD degree holders, had obtained an education in Australia and had high salaries had higher satisfaction scores. Salary had a statistically significant positive association with job satisfaction, meaning, the higher the salary, the more satisfied was the nurse.

Al-Dossary et al. (2012) measured the job satisfaction of nurses in a teaching hospital. The findings indicated that pay, supervision, contingent rewards, co-workers, nature of work and on-the-job communication had statistically significant and strong positive correlations with job satisfaction. Promotions, operating conditions and fringe benefits had statistically significant and moderate positive correlations with job satisfaction. More years of experience were associated with better job satisfaction. No statistically significant differences were found in job satisfaction when grouped according to age group, gender, number of assigned patients, position level and education level ($p > 0.05$).

A study among nurses working in primary health care centers in Jazan region, Saudi Arabia, showed that male nurses were less satisfied than females. Those who were between 20 and 29 years old were less satisfied than those who were 30 years and older. Those who had tenure of four years or less, were less satisfied than those who had five years or more of tenure. Overall, nurses in this study were dissatisfied with their work life (Almalki et al. 2012). The various studies that were reviewed suggested that leadership is vital to the attainment of individual, organizational and patient care outcomes. Apparently, the attainment of various individual, organizational and patient care outcomes was made possible with the use of various combinations of leadership styles by nurse manager(s) in disposing of their responsibilities and in leading their followers.

The results of these studies seemingly suggest that managers or supervisors explore and utilize various leadership behaviors and combinations that would create positive impacts on their followers and subordinates. This would facilitate attainment of personal and organizational goals, especially given the fast-paced nature of the changes affecting healthcare organizations and patient care. The various studies indicated varying degrees of evidence concerning the extent to which leadership behaviors correlated with the job satisfaction of nurses. Taken as a whole, this author asserts that there is no single leadership style that can provide all expected outcomes. It requires a combination of leadership behaviors to result in

positive outcomes in varying situations. The various literature studies that were reviewed are very important because they provided insights that may add up to the improvement in the setting of this study.

Aim

This study aimed to explore the influence of leadership style perceived by supervisors/heads of departments, as measured using the MLQ Leader Form (5x-Short), on job satisfaction as perceived by the staff nurses, measured using the MSQ Short.

CONCEPTUAL FRAMEWORK

The conceptual framework (Figure 1) examines the supervisors' perceived leadership styles and its influence towards the perceived job satisfaction of the nurses. The unidirectional arrow linking supervisors' leadership styles suggests that the influence of the leadership style is one-way. This indicates that the staff nurses have no idea that the supervisors conducted self-appraisal of their own leadership styles. Hence, the perceived job satisfaction of the nursing staff should in no way be considered an offshoot of the potential staff nurses' biases that they may have with their supervisors. According to Burns (1979, P. 294), 'leadership is exercised when persons with certain motives and purposes mobilize, in competition or conflict with others, institutional, political, psychological and other resources so as to arouse, engage and satisfy the motives of followers'.

This concept is used in this study in interpreting the conceptual framework. Supervisors have responsibilities to the organization, co-workers, followers and to themselves. In this study, supervisors are tasked to lead their followers in attaining the organization's goals by using organizational resources. Supervisors are given a free hand to employ leadership styles to arouse, engage and satisfy the motives of the followers. An inferred motive of the followers (nursing staff) is job satisfaction. In this study, transformational leadership, transactional leadership and laissez-faire leadership styles were assumed to be used by the supervisors and were expected to influence the job satisfaction of their staff nurses.

METHODOLOGY

Design

This study employed a quantitative descriptive design. Bivariate correlations between the independent variable (leadership styles) and the dependent variable (job satisfaction) were examined.

Sample and Participants

Fifty supervisors and department heads and 220 staff nurses from KSUMC were recruited to participate in this study that was conducted during the first quarter of 2014. The non-probability, convenience sampling method was used to select the participants in the present study. Inclusion criteria included those who were employed full time at KSUMC. Nursing students and nursing interns were excluded from this study.

Research instrument

Two instruments were used in this study. The Multifactor Leadership Questionnaire (MLQ) Leader Form (5x-Short) by

Avolio and Bass (1995) was used with permission (communication from Mind Garden, 01 December 2013). The 36 items that measure leadership behaviors as perceived by the supervisors and/or heads of the department (self-evaluation) were used. The supervisors/department heads rated their perceived leadership style by choosing a response from a 5-point Likert-type scale that were coded from '0' for 'not at all' - '4' for 'frequently, if not always'. The scores were aggregated and the mean score was interpreted according to the leadership style that was perceived to be used. The MLQ (5x-Short) underwent rigorous validation studies and has been found to have satisfactory discriminate validity (Avolio et al. 1999). The inter-item correlation coefficient (Cronbach's alpha) of the subscales ranged between 0.64 and 0.92 and overall, 0.70 suggesting that the reliabilities were consistent over time (Avolio et al. 1999).

In the current study, the inter-item correlation coefficient (Cronbach's alpha at 0.05 significance level) of the leadership styles was α 0.79. The results indicated that the MLQ (5x-Short) used in this study measured what it intended to measure. The second instrument used was the Minnesota Satisfaction Questionnaire (MSQ) short form – 1967 revision. This instrument is designed to measure an employee satisfaction with the different aspects of their work and work environment (Weiss et al. 1967).

The instrument is comprised of 20 items taken from the long-form MSQ that best represents each of the 20 scales. Participants of the study rates individual satisfaction level using a 5-point Likert-type scale, where, very dissatisfied is coded 1 and very satisfied is coded 5. Two score interpretation models were adopted in this study. One is to determine the overall satisfaction score by summing the scores in each item and converting these scores into a percentage score. Interpretation is made based on the range of scores: scores from 75 percent and above represent a high degree of satisfaction; scores between 26-74 represent an average satisfaction; and scores of 25 and lower represent a low level of satisfaction (Weiss et al. 1967).

The second interpretation model was to formulate a range of the mean ratings based on the Likert-type scale responses to enable interpretation of intrinsic, extrinsic and general job satisfaction rating. The instrument underwent extensive evaluation and was found out to have satisfactory construct validity. Three scales were identified (Weiss et al. 1967). Hoyt reliability coefficient yielded coefficients ranging between 0.84 and 0.92 for the intrinsic satisfaction scale, 0.77 and 0.82 for extrinsic satisfaction scale and 0.90 for the overall general satisfaction. Test-retest correlation of the MSQ as a whole was 0.89 over a period of one week and 0.70 over the one-year interval; this suggests that the instrument is stable and reliable over time (Weiss et al. 1967). In this study, the original three scales (intrinsic, extrinsic and general satisfaction) were adopted. The inter-item correlation coefficient of MSQ in this study is 0.76 for intrinsic satisfaction, 0.85 for extrinsic satisfaction and 0.88 for general satisfaction. The results showed that MSQ measured the satisfaction factors indicating the reliability of the instrument.

Data collection

After obtaining IRB approval and participant informed consent a pretest was done to ensure clarity of tools and time needed for filling the questionnaire. The pretest was conducted on samples not included in the final study in order not to contaminate the sample. The duration for the MLQ was between 12-15 minutes; while the duration for the MSQ was

between eight minutes and ten minutes. There were no issues raised by participants in either group. The participants were advised to drop the questionnaires in a drop box placed near their department office to facilitate gathering of returned questionnaires and ensure anonymity.

Ethical considerations

Approval from the Institutional Review Board and permissions from the Administration of KSUMC were obtained (ref # 14/3983/IRB) as well as participants' informed consent prior to conducting the study. The anonymity of identities and confidentiality of responses was assured.

Data analysis

The data were processed and analyzed using SPSS 17 (Chicago, Ill.). In determining the characteristics of the participants, perceived leadership styles of supervisors and level of satisfaction of the staff, descriptive statistics were used. The items with high satisfaction levels were ranked. To explore the presence of significant relationships between the leadership styles of the supervisors and the job satisfaction scores, bivariate analysis using the Pearson product moment correlation coefficient was used. The Spearman's rank correlation coefficient was used to analyze the presence of significant relationships between the leadership styles of supervisors and the job satisfaction ratings of staff nurses. Significant correlations were inferred if the p-value is less than 0.05.

RESULTS

Profile of the participants

The response rate for this study is 100% (50/50) among supervisors/department heads. The response rate for the nurses is 87.7% (193/220). This study includes the participation of 50 supervisors and 193 staff nurses. Most (174/193; 90.16%) of the staff nurses were female. More than half (127/193; 65.80%) were between 26-45 years old. Almost two-thirds (128/193; 66.32%) have worked with KSUMC for more than five years. The tenure structure of the staff nurses appeared to be balanced.

Perceived leadership styles

Most of the supervisors perceived that they used Inspirational Motivation, Individualized Consideration, Intellectual Stimulation, Contingent Reward and Idealized Influence (Behavior) frequently, if not always (range of Mean between 3.28-3.50) as shown in Table 3.1. Transformational Leadership as a whole was demonstrated frequently, if not always (mean=3.31; SD 0.46) while Transactional Leadership is used often (mean=2.28; SD 0.39). Nurses in this study rated intrinsic, extrinsic and general job satisfaction as satisfactory (MEAN=3.91, SD 0.41; MEAN=3.66, SD=0.55; MEAN=3.83, SD=0.84 respectively) as shown in (Table 3.2). Taken as a whole, the staff nurses have a high level of general satisfaction scores (MEAN=75.68, SD 8.68; range between 49 and 98). The general satisfaction score range indicates that the staff nurses are either averagely or highly satisfied in this hospital setting. The top five items that were rated either satisfied or very satisfied (range between 80.83% and 90.16%) by the staff nurses were all intrinsic satisfaction-related. Ranked number

one is 'the chance to do something that makes use of my abilities' (174/193; MEAN=4.09; SD 0.643).

Taken as a whole, it is apparent that job satisfaction varies in settings as indicated by the various findings that were presented.

DISCUSSION

The results also showed that the FRLM is practiced by the nurse managers/supervisors in the setting of this study. This finding adds to the existing body of evidence for the utilization of the various leadership behaviors in the FRLM, especially transformational and contingent reward approaches, under transactional leadership styles. Inspirational motivation is the most frequently demonstrated leadership behavior in the current study. This finding is supported by the work of (Abualrub et al. 2012) and of (Negussie et al. 2013). These studies found inspirational motivation to be the most frequently practiced leadership behavior; this leadership style was also found to be moderately associated with job satisfaction among staff nurses (Abualrub et al 2012) ; (Negussie et al. 2013). Taken as a whole, these similar findings confirm the evidence that leaders who demonstrate the leadership behaviors in the FRLM and particularly those who share personal and organizational goals clearly with conviction, inspire their followers.

The results of this study contradicted the findings of Al-Dossary, Vail and Macfarlane (2012). The results of their study indicated that nurses in one university teaching hospital in Eastern Saudi Arabia were neither satisfied nor dissatisfied. Extrinsic motivators were found to be associated with job satisfaction, namely: pay, supervision, contingent rewards, co-workers, nature of work and communication among nurses in a university teaching hospital in Eastern Saudi Arabia (Al-Dossary et al. 2012) and salary among nurses in a tertiary hospital in Riyadh (Bahnassy et al. 2014).

Correlations between nursing managers, supervisor's leadership and nursing staff job satisfaction

The method used in this study is unique, because it aimed to determine the influence of leadership style of leaders, as rated by the leaders themselves, on the job satisfaction of followers, as rated by the followers. In other studies, followers rate their leaders and rate their job satisfaction (Malloy et al. 2010); (Negussie et al. 2013). The significant correlation of idealized influence (behavior) found in the current study is supported by the findings of Malloy and Penprase, (2010) and Negussie and Demissie (2013) despite differences in the method used as discussed elsewhere in this paper.

Studies that highlighted the idealized influence component of the FRLM seemed scarce. One study examined employee trust, commitment and satisfaction as moderators of the effects of idealized influence and consideration leadership (Chen et al. 2009). The results of their study indicated that idealized leadership is a dominant antecedent of trust, but not job-related satisfaction. They asserted that the absence of a relationship between idealized leadership (operationalized as consisting of both idealized attribute and idealized behaviors) and job satisfaction is because its focus on vision lacked a motivational effect (Chen et al. 2009). Chen, Hwang and Liu's (2009) finding are contradicted by the findings of the current study wherein idealized influence (behavior) was significantly associated with job satisfaction. Despite lack of motivation in the operational definition of idealized influence (Behavior), the rallying point appeared to be the demonstration of the leader's

values, beliefs and sense of mission that are aligned with organizational goals; these are translated into acting with integrity (Avolio et al. 1999). The researcher in the current study asserts that the translation of acting with integrity in this context may be interpreted as the antecedent for trust. In the maxim 'to see is to believe', one has to show or demonstrate something before others can believe. Based on this analogy, it can be concluded that the followers in this setting may have perceived that their leaders were able to demonstrate that they can be trusted and relied upon. Hence, it contributed to their satisfaction.

The results indicated that there is a significant relationship ($p < 0.05$) between Idealized Influence (Behavior) and general satisfaction score ($r = 0.284$), intrinsic satisfaction rating ($r = 0.274$) and extrinsic satisfaction rating ($r = 0.285$). Taken as a whole, transformational leadership, transactional leadership and Laissez-faire leadership styles were not significantly correlated with the general, intrinsic and extrinsic job satisfaction of staff nurses in this study. Apparently, IIB corresponds to leading by example, which demonstrated the way for nurses in this setting to trust their leaders. This condition may explain the significant relationship between IIB and job satisfaction among staff nurses.

STUDY LIMITATIONS

This finding of this study cannot be generalized as its one of the few research that explore the relationship between nursing manager and supervisors leadership styles and nursing staff job satisfaction. Additionally, it was conducted in one hospital and in one city.

Implication of the study for nursing practice and management

There is a strong evidence linking nurse job satisfaction with better patient outcome. The findings of this study when implemented, could shape nursing managers and supervisors leadership styles. Hence, to foster nursing staff job satisfaction, decrease nurse burnout and turnover as well as to improve patient satisfaction and outcome. This study also calls for a nursing policy that should support culturally tailored leadership style. The high level of job satisfaction of nurses in the hospital studied is commendable and worthy to be emulated or modelled by other healthcare organizations. Thus, further

Studies are recommended to

- Include both quantitative and qualitative methods to explore the variables that contribute to higher job satisfaction of nurses in this organization.
- Explore other variables that were not included in the study that may have influenced higher job satisfaction of nurses in this organization.
- Use multiple research instruments to find out underlying factors that contributed to higher job satisfaction of nurses in this organization.
- Explore other variables that may influence the job satisfaction of nurses in this organization to include work conditions, work environment, job stress, role conflict and resolution, commitment, organizational support, manager's/leaders' support, colleague

support, autonomy, nurse/physician relationship among others.

CONCLUSION

Findings indicate that the supervisors/heads of departments perceived that they used transformational leadership as a whole, including all of its behavior; this included contingent reward frequently, if not always. Transactional leadership was demonstrated often and Laissez-faire leadership was not demonstrated at all. The overall satisfaction scores of the nurses in this study suggest that they are highly satisfied with their jobs. Intrinsic, extrinsic and overall satisfaction ratings indicate that the nurses are satisfied. Results further indicated Idealized Influence (Behavior) was the only leadership behavior that was significantly associated with general job satisfaction score, intrinsic and extrinsic rating.

Our findings indicate that the leadership behaviors of the supervisor/head of department based on the MultiFactor Leadership Questionnaire had little influence on the overall satisfaction of nurses in this setting. The supervisors/heads of departments were instrumental and successful in shaping the work ethic among the staff nurses in this hospital setting through leading by example, as evidenced by the significant association of Idealized Influence (Behavior) with job satisfaction of the staff nurses.

Table 3. 1. Perceived Leadership styles by supervisors (N=55)

	Mean	Median	SD	Interpretation
Inspirational Motivation	3.50	3.50	0.53	Frequently, if not always
Individualized Consideration	3.50	3.50	0.50	Frequently, if not always
Intellectual Stimulation	3.31	3.50	0.69	Frequently, if not always
Transformational Leadership	3.31	3.40	0.46	Frequently, if not always
Contingent Reward	3.29	3.25	0.50	Frequently, if not always
Idealized Influence (Behavior)	3.28	3.25	0.53	Frequently, if not always
Management-by-Exception (Active)	3.05	3.00	0.75	Fairly often
Idealized Influence (Attributed)	2.95	3.00	0.69	Fairly often
Transactional Leadership	2.28	2.25	0.39	Often
Laissez-faire Leadership	0.53	0.50	0.62	Not at all
Management-by-Exception (Passive)	0.51	0.25	0.63	Not at all

Mean range interpretation: 4.00-3.21 = Frequently, if not always; 3.20-2.41 = Fairly often; 2.40-1.61 = Sometimes; 1.60-0.81 = Once in a while; 0.80-0.0.00 = Not at all.

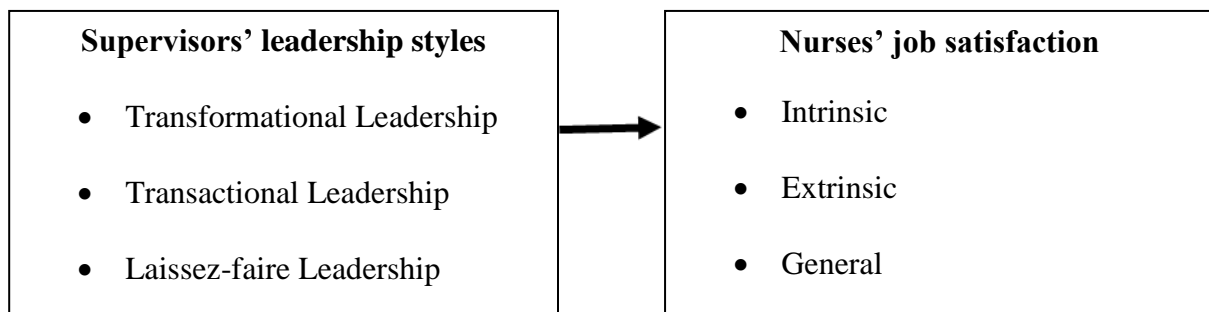


Figure 1.1 Schematic diagram of conceptual framework

Table 3.2 Top 5 items with combined satisfied and very satisfied rating (N=193)

Rank	Item	Sat.and V.Sat. (n)	% vs N	Mean Rating	SD	Mean Rating Interpretation
1	the chance to do something that makes use of my abilities	174	90.16	4.09	0.643	Satisfied
2	the chance to do things for other people	170	88.08	4.16	0.700	Satisfied
3	the way my job provides for steady employment	165	85.49	3.96	0.695	Satisfied
4	the feeling of accomplishment I get from the job	158	81.87	3.94	0.758	Satisfied
5	the chance to do different things from time to time	156	80.83	3.92	0.745	Satisfied
Intrinsic Satisfaction Rating				3.91	0.411	Satisfied
Extrinsic Satisfaction Rating				3.66	0.553	Satisfied
General Satisfaction Rating				3.83	0.838	Satisfied
General Satisfaction Score				75.68	8.689	Highly satisfied
General Satisfaction Score – Range: 49,98						

Mean rating range interpretation: 5.00-4.21 = very satisfied; 4.20-3.41 = satisfied; 3.40- 2.61 = neither; 2.60-1.81 = dissatisfied; 1.80-1.00 = very dissatisfied. Score range interpretation: 75 or higher = high degree of satisfaction; 26-74 = average satisfaction; 25 or lower = low level of satisfaction (Weiss, Dawis, England and Lofquist, 1967). Score range interpretation: 75 or higher = high degree of satisfaction; 26-74 = average satisfaction; 25 or lower = low level of satisfaction (Weiss, Dawis, England and Lofquist, 1967).

Table 3.3. Correlations (leadership behaviors N=55; job satisfaction N=193).

	General Satisfaction Score (Pearson Correlation)	General Satisfaction Rating (Spearman rho)	Intrinsic Satisfaction Rating (Spearman rho)	Extrinsic Satisfaction Rating (Spearman rho)
Idealized Influence (Attributed)	.034	.073	-0.028	.085
Idealized Influence (Behavior)	.284*	.188	.274*	.285*
Inspirational Motivation	-0.066	.002	-0.135	-0.087
Intellectual Stimulation	-0.052	-0.048	-0.110	.016
Individualized Consideration	.005	.001	-0.024	-0.018
Contingent Reward	.106	-0.058	.098	.103
MBE (Active)	.124	.114	.068	.087
MBE (Passive)	-0.051	-0.044	.080	.052
Laissez-faire Leadership	.118	.009	.015	-0.028
Transformational Leadership	-0.063	-0.044	-0.109	-0.009
Transactional Leadership	.073	.008	.097	.091

*Significant at $p < 0.05$

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