The healthcare system is laden with immense pressure to meet higher demands, with a shrinking number of resources. The increase in patient acuity and complexity, coupled with ever-growing fiscal constraints places healthcare workers in the center of a challenging juxtaposition (Martin et al., 2018). These pressures often lead to significant changes to structure, staffing models, and patient flow; all of which may negatively impact the work environment for front line workers, particularly nursing staff (Nelson-Brantley, Park, & Bergquist-Beringer, 2018). In response to these challenges, research has shown nursing staff exhibit an increase in burnout, incidents bullying and incivility, and ultimately job turnover (Fida, Spence-Laschinger, & Leiter, 2018).

Nursing job turnover is a significant health human resources issue burdening the healthcare system, estimated to total approximately 20% annually with each incident of job turnover costing approximately $27,000 CAD (Rondeau & Wagar, 2016). Beyond the fiscal burden of the nursing turnover, it can also be detrimental to the quality of patient care, as well as leaving the remaining work-group to experience increased stress and burnout due to heavier workload, poor work-group cohesion, and lack of role clarity (Halter et al., 2017; Hayes et al., 2012; Park, Gass, & Boyle, 2016). While actualized job turnover is associated with challenging consequences, job turnover intentions, defined by one’s consideration of leaving their current position, often associated with withdrawal behaviours such as poor job performance, attendance, and effort, may also lead to unfavourable work-related outcomes (Gatling, Hee Jung, & Jungsun, 2015). Reducing job turnover intentions themselves may prove valuable for organizations in that this may address both the productivity the workforce, and future retention outcomes (Takase, 2010).

This study proposed that organizational commitment, the relationship an employee perceives between themselves and their organization, may be a mediator of the relationship between authentic leadership and job turnover intentions in nursing (Meyer & Allen, 1991). Authentic leadership has been linked to many positive work-related outcomes in nursing work-groups (Alilyyani, Wong, & Cummings, 2018). Authentic leadership is embodied through four core tenets; self-awareness, a conscious knowledge of one's own values, and beliefs, relational transparency, a presentation of one’s true self through honesty and transparency, internalized moral perspective, acting in accordance to one’s values and morals, and balanced processing, the utilization of decision making feedback from all sources in an unbiased manner (Avolio, Gardner, Walumbwa, Luthans, & May, 2004). Authentic leadership has been shown to decrease job turnover intentions in nursing indirectly through increased job satisfaction (Laschinger, 2012), and decreased bullying and burnout (Spence-Laschinger & Fida, 2014).

Organizational commitment as per Meyer and Allen (1997) is comprised of three related, but distinct, components; affective commitment, the emotional attachment to one's organization, normative commitment, a perceived obligation to remain with the organization, and continuance commitment, remaining with the organization as a result of a perceived lack of alternative employment, or high costs associated with leaving. Organizational commitment in any form has been shown to decrease job turnover intentions, though a strong manifestation of affective or normative commitment has been shown to lead to strong job performance, extra effort in the workplace, and organizational citizenship behaviours, while emphasis on continuance commitment has been linked to withdrawal behaviours including poor performance and lack of engagement (Meyer & Allen, 1997; Meyer, Stanley, Herscovitch, & Topolnytsky, 2002). Research on organizational commitment has shown that relational leadership styles may increase overall organizational commitment, affective and normative commitment, while
decreasing continuance commitment (Jackson, Meyer, & Wang, 2013; Laschinger, Finegan, & Wilk, 2009; Lin, MacLennan, Hunt, & Cox, 2015; Meyer et al., 2002).

This study used secondary analysis of data collected as a part of the Authentic Leadership for New Graduate Nurse Success (ALGN) study (Laschinger, Wong, Finegan & Fida, 2015). This study used time one data collected in 2015 from 478 experienced nurses with three or more years of experience working in front line clinical care in Ontario, Nova Scotia, and Alberta, Canada. The study applied mediation analysis techniques as outlined by Hayes (2018), to conduct a parallel mediation model analysis. The model that was tested proposed that authentic leadership would both directly, and indirectly through the mediation of affective, normative, and continuance commitment individually, predict the nurses’ job turnover intentions. The final model showed that authentic leadership, affective, normative, and continuance commitment accounted for 21% of the variance in job turnover intentions in this sample ($R^2=.21$, $F_{(4, 472)}=31.4$, $p<.001$). Findings showed that authentic leadership was a significant direct positive predictor of both affective ($B=0.499$, $t_{(475)}=9.50$, $p<.001$), and normative commitment ($B=0.437$, $t_{(475)}=7.89$, $p<.001$), while negatively predicting continuance commitment ($B=-0.160$, $t_{(475)}=-2.81$, $p<.01$). Interestingly, affective commitment was found to be the only significant direct predictor of decreased turnover intentions ($B=-0.416$, $t_{(475)}=-7.81$, $p<.001$) and affective commitment was the sole mediator of the relationship between authentic leadership and job turnover intentions in this model. Authentic leadership itself was only found to predict a decrease in nurses’ job turnover intentions ($B=-0.250$, $t_{(475)}=-5.46$, $p<.001$) before the commitment variables were added into the model as mediators, at which point authentic leadership became insignificant as a predictor in the model($B=-0.089$, $t_{(475)}=-1.92$, $p=0.055$).

This study’s findings support the hypothesis that authentic leaders hold the ability to influence staff nurses’ organizational commitment in such a manner that their job turnover intentions are thereby reduced. The role of authentic leaders in healthcare is further supported by these findings, suggesting that their actions may cultivate an increase in staff nurses’ emotional attachment to their organization, investment in the organization’s goals, ameliorate job performance and productively, and thereby reduce the manifestation of job turnover intentions. Further, the finding that showed authentic leaders to be associated with a decrease in nurses’ continuance commitment shows that this leadership may also reduce employees' withdrawal behaviours in the workplace. These findings contribute to the body of knowledge on the role of authentic leaders in healthcare, as well as the role of organizational commitment as a predictor of job turnover intentions and retention outcomes.

Title:
The Effects of Authentic Leadership and Organizational Commitment on Job Turnover Intentions of Experienced Nurses

Keywords:
Authentic Leadership, Job Turnover and Organizational Commitment

References:

Abstract Summary:
High levels of turnover pose a challenge to the nursing workforce amidst growing patient acuity and budget constraints. Strong nursing leadership may contribute to healthy work environments and retention outcomes. This study examined the effect of authentic leadership of managers, on organizational commitment, and ultimately job turnover intentions.

Content Outline:
Introduction

1. Background and Significance
   • Job Turnover in Nursing
   • Role of Leadership in Nursing
   • Value of Organizational Commitment

2. Purpose of Study
   • This study proposed that organizational commitment, the relationship an employee perceives between themselves and their organization, may be a mediator of the relationship between authentic leadership and job turnover intentions in nursing.

Body

1. Theoretical Framework

a) Authentic Leadership
   • Tenets: Self-Awareness, Relational Transparency, Moral/Ethical Behaviour, and Balanced Processing
   • Psychological Processes by which authentic leaders influence followers: social and personal identification, hope, trust, positive emotions, optimism

b) Organizational Commitment
   • Defining affective, normative, continuance organizational commitment
   • Relationship amongst organizational commitment, work-related outcomes (job performance, effort, attendance, engagement) and job turnover intentions,
2. Literature Review

Positive relational leadership styles have been shown to influence affective and normative organizational commitment, while protecting against the manifestation of continuance commitment

a) Gap in literature identified in examining the influence of authentic leadership with affective, normative, and continuance organizational commitment individually in nursing

Organizational commitment has been linked to a decrease in job turnover intentions in samples across a variety of disciplines

a) Relationship of authentic leadership to job turnover intentions has commonly been shown to be indirect in nature, through the influence of authentic leadership on other work-related variables. Organizational commitment may be one of such variables that mediates this relationship.

3. Findings

- Final Model

a) Authentic leadership was found to predict increased affective and normative organizational commitment, and decreased continuance commitment.

b) Affective commitment was found to be the sole subsequent predictor of decreased job turnover intentions, as well as a significant mediator in the relationship between authentic leadership and job turnover intentions

- Discussion

a) These findings support the role of authentic leaders in healthcare, suggesting that the presence of authentic leaders in nursing management may influence the manifestation of organizational commitment and job turnover intentions.

b) This study addressed a gap in the literature on the relationship amongst authentic leadership, organizational commitment, and job turnover intentions, illuminating the manner in which leadership can predict retention in experienced nursing workgroups.

Conclusion

1. Addressing job turnover rates in nursing is crucial to mitigating the associated financial burden and ensuring quality of care, this study supports that organizations may focus on quality and presence of nursing leaders as a pathway to attend to this issue.

2. Organizations may use authentic leadership theory as a framework for leadership selection, development, and evaluation, to cultivate authentic leaders in nursing. This may influence organizational commitment and retention outcomes amongst front-line nursing staff.

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