Cross-sectional study

Authentic leadership influences work-life coping in new nurses

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Commentary on: Laschinger HK, Borgogni L, Consiglio C, et al. The effects of authentic leadership, six areas of worklife, and occupational coping self-efficacy on new graduate nurses' burnout and mental health: a cross-sectional study. Int J Nurs Stud 2015;52:1080-89.

Implications for practice and research

- The introduction of new graduates into clinical teams requires careful attention. Authentic leadership characteristics are essential to create and support healthy work environments that support new graduates.
- Future research should focus on longitudinal study designs that carefully test more comprehensive models and associations at various levels. These studies can extend cross-sectional findings as well as evaluate certain interventions or dynamics in hospitals and clinical teams.

Context

Clinical teams are prone to various negative factors that can undermine their capacity to perform their daily tasks well and to meet complex patients' needs as well as organisational goals. Referring to practice experiences and learning from a number of studies, nurse practice environments are complex to understand and it is not always clear how to support clinical teams effectively. The introduction of new graduates in clinical teams requires careful attention because their transition to professional practice can be stressful, leading to early career burnout and decreased emotional well-being. Laschinger and colleagues' study offer insights into new graduates' feelings about burnout and mental health status.

Methods

The study tested a model linking authentic supervisor leadership with areas of work life and occupational coping efficacy, predicting burnout and mental health of new nursing graduates. Moreover, the study introduced interpersonal strain as a third component of burnout alongside emotional exhaustion and cynicism. Nurses with <3 years of experience, randomly selected from a professional registry database of 10 Canadian provinces, were invited to complete a questionnaire. A convenience sample of 1009 new graduate nurses surveyed was included in the study (response rate of 27%).

Findings

The proposed model fit the study sample and all associations were significant. Authentic leadership was measured as the extent to which new graduates evaluated their leaders as self-aware and transparent, as well as by acting through moral-ethical perspective and through balanced processes. Areas of work life were measured as the extent to which respondents experienced workload, control, rewards, community and fairness, and valued congruence. Authentic leadership had a positive effect on areas of work life and the latter, in turn, had a positive effect on occupational coping self-efficacy, resulting in lower burnout, such as lower levels of emotional exhaustion and cynicism as well as less interpersonal strain, which ultimately was associated with favourable new mental health of graduates.

Commentary

This study adds to previous studies around authentic leadership to support nurses' psychosocial and practice environment in the capacity to achieve excellent care as well as professional well-being. Although the authors used sound methodology based on robust measures, the results must be interpreted with caution. The model was developed with either composite constructs, or second-order latent variables based on various dimensions or first-order variables (eg, three dimensions of authentic leadership, six dimensions of areas of work life and three dimensions of burnout). Therefore, the model showed associations at the level of these composite constructs but the underlying associations between these firstorder latent variables stayed unknown. Studies of more complex models with comparable first-order latent variables identify associations of these dimensions and their effect directly and/or indirectly on outcomes. ¹

Nurses experience longer working hours as well as frequent direct, personal and emotional contact with a large number of patients in comparison with other health professionals. Besides, the necessary attention for the more soft variables such as community, fairness and values congruence through authentic leadership characteristics, and more insight and knowledge of the hard variables such as workload, seems essential. Research on cognitive and physical workloads and work demands of staff nurses can guide interventions to improve care environments, achieving better general health of the nursing workforce, as well as better quality and safety of care.2

The survey was organised without a link to hospitals or clinical teams, and therefore lacked the opportunity to perform multilevel analyses at the clinical team or hospital level. Future research should focus on longitudinal study design, carefully testing more comprehensive models and associations at various levels. These studies can extend crosssectional findings as well as evaluate certain interventions or dynamics in hospitals and clinical teams.

Competing interests None declared.





References

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