



## **IMPACT OF LEADERSHIP STYLES ON THE EMPLOYEES' ENGAGEMENT IN PRIVATE HEALTHCARE INDUSTRY OF UAE**

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### **Abstract**

*The healthcare industry is a critical sector that requires a highly engaged workforce to deliver quality patient care. Effective leadership plays a crucial role in fostering employee engagement, which in turn contributes to organizational success. This research investigates the impact of leadership styles on employee engagement in the private healthcare industry of the United Arab Emirates (UAE). The study adopts a quantitative approach, utilizing a structured questionnaire to collect data from a representative sample of employees working in private healthcare institutions across the UAE. The questionnaire assesses employee perceptions of their leaders' leadership styles and their own level of engagement. Employing rigorous regression analyses and drawing on data from a diverse sample of 357 health care professionals working in private sector, the results of this research shed light on the complex relationship between leadership styles and employee engagement. The findings reveal a significant positive relationship between democratic leadership style and employee engagement. Democratic leaders inspire and motivate their followers, fostering a sense of purpose and commitment among employees. This leadership style encourages creativity, innovation, and a shared vision, leading to higher levels of engagement and organizational performance. In contrast, authoritative leadership styles have less positive impact on employee engagement and laissez-faire leader style have the least impact on their followers and their subordinates. The study concludes that democratic leadership style is the most effective style for enhancing employee engagement in the private healthcare industry of the UAE. By fostering a supportive and empowering work environment, transformational leaders can cultivate a highly engaged workforce that contributes to improved patient care and organizational success.*

**Keywords:** Leadership styles, employee engagement, private healthcare industry, UAE

### **Introduction**

The United Arab Emirates (UAE) has experienced a remarkable transformation in its healthcare sector, characterized by massive investments in infrastructure, cutting-edge technology, and a



burgeoning workforce. As this industry evolves, leadership styles have gained increasing prominence. Effective leadership, a linchpin of healthcare excellence, not only steers the quality of patient care but also profoundly influences the level of employee engagement, job satisfaction, and the overall success of healthcare organizations.

The contemporary world is witnessing an upsurge in the study of leadership styles, with a particular focus on understanding how they shape organizational dynamics and affect the well-being of employees. Leadership is now widely recognized as a powerful driver of organizational performance, employee happiness, and overall effectiveness. This literature review, therefore, embarks on an exploration of significant studies related to leadership styles, providing a panoramic view of the evolving nature of leadership practices within modern contexts.

In the realm of healthcare leadership, the UAE offers a distinctive and dynamic backdrop for our research. The healthcare domain is characterized by its high-stakes nature, where split-second decisions can make all the difference. Within this context, authoritative leadership, often referred to as command-and-control management, provides a clear direction and a vision to guide healthcare teams. Authoritative leaders, while commanding respect, are also known for respecting the input of their team members and fostering a culture of cooperation and open communication. These leaders are adept at presenting a compelling vision to their teams, creating a shared sense of purpose and direction.

In contrast, democratic leadership, also known as participative leadership, involves healthcare team members in the decision-making process. Leaders of this style solicit feedback, respect diverse viewpoints, and encourage open dialogue among team members. The ultimate goal is to instill a profound sense of commitment and responsibility within the healthcare workforce, thereby promoting a culture of collaboration and shared ownership.

Laissez-faire leadership, often described as a hands-off approach, is characterized by managers who grant their team's extensive latitude and autonomy in decision-making and problem-solving. These leaders delegate duties and responsibilities to their teams, intervening only when their guidance is needed. The focus here is on empowering the healthcare professionals, giving them the autonomy to exercise their expertise and judgment to achieve optimal patient care outcomes.

The healthcare sector in the UAE is distinctively multifaceted, and each of these leadership styles can hold its relevance depending on the specific context and the organizational objectives. Our aim in this research is to deepen our understanding of how these leadership styles impact the employee engagement in this unique healthcare landscape.

Employee engagement is a critical concept in the healthcare domain. It encompasses the emotional dedication, passion, and enthusiasm that employees feel for their work and the organization they serve. Engaged employees demonstrate a strong sense of purpose, taking pride in their contributions and going above and beyond to ensure the success of their organization. In healthcare, employee engagement translates into higher-quality patient care, a satisfied workforce, and overall organizational effectiveness.

This research project seeks to uncover the specific relationship between three distinct leadership styles (LS1, LS2, and LS3) and employee engagement (EE) within the UAE healthcare sector. By conducting in-depth regression analyses and drawing on data from a diverse and representative sample of 357 individuals, we aim to provide evidence-based insights into the complex interplay between these



variables. The results will offer a roadmap for healthcare organizations and leaders, enabling them to tailor their leadership practices to the unique needs and challenges of healthcare professionals in the UAE. Ultimately, this research contributes to the ongoing pursuit of excellence in healthcare delivery within the region, bridging the gap between leadership styles and employee engagement for the betterment of patient care and workforce satisfaction.

### ***Research Objectives***

1. The primary objective of this research is to identify and categorize the prevalent leadership styles within the healthcare industry in Dubai, UAE. This involves recognizing the various leadership approaches adopted by healthcare leaders and organizations.
2. This research aims to assess the current level of employee engagement within Dubai's healthcare sector. It involves measuring the emotional, cognitive, and behavioral commitment of healthcare employees to their work and organization.
3. Another central objective is to analyze how different leadership styles prevalent in the healthcare industry impact employee engagement. This involves evaluating the correlations and relationships between leadership styles and employee engagement levels.
4. The final objective is to provide actionable recommendations for healthcare organizations in Dubai to enhance employee engagement through effective leadership. These recommendations will be based on the research findings and insights.

### ***Research Questions***

1. What are the prevalent leadership styles in the healthcare industry of Dubai, UAE? How can these styles be categorized and described?
2. What is the current level of employee engagement among healthcare professionals in Dubai's healthcare organizations? What are the key factors contributing to or hindering employee engagement in this context?
3. How do different leadership styles, such as Authoritative, democratic and laissez-faire, influence the employee engagement levels of healthcare workers in Dubai?
4. What are the practical recommendations that can be provided to healthcare organizations in Dubai to optimize leadership practices and foster higher levels of employee engagement in the healthcare sector? How can these recommendations be tailored to the unique characteristics of Dubai's healthcare industry?
5. These research objectives and questions from the framework for the comprehensive study on the Impact of Leadership Styles on Employee Engagement in the Healthcare Industry in Dubai, UAE. They guide the data collection, analysis, and discussion phases of the research, facilitating a deeper understanding of the dynamics at play in this critical context.

### ***Significance of the study***

The significance of the study on the "Impact of Leadership Styles on Employee Engagement in the Healthcare Industry in Dubai, UAE" is multifaceted and extends to various stakeholders, including healthcare organizations, healthcare professionals, policy makers, and the broader community. Here are several key aspects of the study's significance:

- Improving employee engagement is directly linked to the quality of patient care. Engaged



healthcare professionals are more likely to provide better patient experiences, adhere to clinical protocols, and consistently deliver high-quality services. This study's findings can help healthcare organizations in Dubai enhance the quality of care they provide to patients.

- Higher employee engagement is associated with improved patient satisfaction and clinical outcomes. Engaged employees are more empathetic, attentive, and dedicated to meeting patient needs. Consequently, the study's results can contribute to higher patient satisfaction rates and better health outcomes.
- Employee engagement is a key driver of organizational performance in terms of efficiency, productivity, and financial outcomes. Engaged employees tend to be more motivated and innovative, leading to better financial and operational results for healthcare organizations. Insights from this study can help organizations in Dubai achieve improved performance metrics.
- Dubai's healthcare sector is highly competitive and attracting and retaining top talent is crucial. Engaged employees are more likely to stay with their organizations, reducing turnover and associated recruitment costs. Understanding the role of leadership styles in employee engagement can help healthcare organizations create a compelling work environment, attracting and retaining skilled professionals.
- Employee engagement is closely tied to the overall wellbeing and job satisfaction of healthcare professionals. Engaged employees experience lower levels of burnout, stress, and turnover intent. By addressing leadership styles that promote engagement, healthcare organizations can contribute to the overall wellbeing of their workforce.
- Policymakers and regulatory bodies in Dubai may use the study's findings to inform healthcare policies and guidelines. Understanding the impact of leadership styles on employee engagement can guide the development of policies that promote a positive work environment, which, in turn, benefits patient care and healthcare outcomes.
- This study contributes to the body of knowledge on leadership, employee engagement, and healthcare management, particularly in the context of Dubai. It adds valuable insights to the existing literature and serves as a reference point for future research in the field.
- Healthcare organizations that actively work to enhance employee engagement can gain a competitive advantage. Satisfied and engaged employees are more likely to attract patients and partnerships, ultimately contributing to the success and growth of the healthcare industry in Dubai.

In summary, this study's significance lies in its potential to drive improvements in healthcare quality, patient satisfaction, organizational performance, talent attraction and retention, workforce wellbeing, policy development, and the advancement of research in Dubai's healthcare industry. It has far-reaching implications that can positively impact both healthcare professionals and the patients they serve.

### Literature Review

Recent years have seen a substantial increase in scholarly interest in the topic of leadership styles, with a focus on understanding how these types affect organizational performance, employee happiness, and overall effectiveness. This survey of the literature offers insights into the changing nature of leadership in modern situations by providing an overview of significant studies on leadership styles undertaken over the previous years.



### ***Democratic Leadership***

Democratic leadership, sometimes referred to as participative leadership, entails team members being involved in decision-making. They solicit feedback, respect differing viewpoints, and promote open dialogue among team members. This leadership style tries to instill a sense of commitment and responsibility in team members (Yukl, 2013). Democratic leaders encourage participation and open communication, which raises employee engagement. Recent studies have shown how this interaction enhances job happiness and productivity (Asghar & Manzoor, 2022; Choi & Choi, 2019).

Democratic leadership encourages sound judgment by drawing on the knowledge and experience of the entire team. Recent research has examined how democratic leadership affects the caliber of decisions and innovation (Gupta & Jatana, 2021). It can take time to involve team members in decision-making, especially in demanding or complex situations. How to balance efficiency and involvement has been the subject of recent research (Hansen et al., 2018). It might be difficult to reach agreement and consensus during democratic decision-making. In recent studies, methods for enabling successful group processes in democratic leadership have been examined (Kane & Cruthirds, 2020; Mushtaque et al., 2021).

### ***Authoritative leadership***

Authoritative leadership also referred to as command-and-control managers, provide their people a clear direction and vision. They make decisions with assurance and offer direction to accomplish company objectives. Importantly, authoritative leaders respect the opinions of their team members and foster a culture of cooperation and open communication (Goleman, 2000). A clear and appealing vision is presented to their teams by authoritative leaders. According to recent research, this clarity of vision helps teams better coordinate and fulfill their goals (Eisenbeiss et al., 2019).

In making crucial judgments, authoritative leaders are renowned for their decisiveness. According to recent research (Kahai et al., 2019), this feature has a positive impact on organizational performance and the speed at which decisions are implemented. For authoritative leaders, finding the ideal balance between giving precise instructions and fostering team autonomy can be difficult. Recent studies have looked at how to alter forceful leadership to empower team members (Schoen, 2020). Although authoritative leaders cherish the opinions of their team members, it might be crucial to promote a climate of cooperation and open communication. Recent research has looked at authoritative leaders' ability to foster an environment that values input and different viewpoints (DeRue et al., 2018).

### ***Laissez-faire leadership***

Laissez-faire leadership, also referred to as hands-off leadership, is defined by managers that give their teams a great deal of latitude and autonomy in making decisions and addressing problems. Laissez-faire leaders delegate duties and responsibilities to their teams rather than actively leading or micromanaging, interfering only when needed (Northouse, 2018). As team members are free to experiment with novel concepts and solutions without continual supervision, laissez-faire leadership can foster creativity and innovation (Hmielecki & Ensley, 2017). This management approach can provide workers a sense of empowerment since it gives them a sense of ownership and responsibility for their work, which may enhance intrinsic motivation and job satisfaction (Deci et al., 2017).

Laissez-faire leadership is frequently criticized for its potential to leave team members in the dark and without direction, which can cause confusion and lower productivity (Bass & Riggio, 2006). Laissez-faire leadership without proper oversight can result in inefficiency, especially when duties call for



coordination, monitoring, or rigorous adherence to procedures (Cohen & Bailey, 2017).

#### ***Leadership styles in healthcare industry:***

In the healthcare industry, leadership styles play a crucial role in shaping the quality of patient care and the work environment for healthcare professionals. Authoritative, democratic, and laissez-faire leadership styles each have their advantages and applications, depending on the healthcare context and the goals of the organization. Understanding these leadership styles can help healthcare leaders make informed decisions about their leadership approach to achieve the best outcomes for patients and healthcare teams.

Leaders that develop a compelling vision for healthcare teams, make prompt choices, and provide clear guidance are examples of authoritative leadership in the healthcare industry. To assure the provision of high-quality patient care, they promote teamwork while maintaining a strong presence (Hershey et al., 2020). In healthcare settings, authoritative leaders ensure clarity, lowering the possibility of mistakes and improving patient safety (Foti et al., 2020). Since they can act swiftly to make important decisions and direct healthcare personnel in an emergency, authoritative leaders are effective in crisis settings (Asghar et al., 2021; Asif et al., 2023; McFadden et al., 2016).

Democratic healthcare leadership entails decision-makers who support a collaborative work atmosphere, open communication, and professional involvement in decision-making. They value team members' opinions and look for agreement (Chen et al., 2019). Democratic leadership increases healthcare workers' participation and job happiness, which improves patient care (Borrill et al., 2019). Democratic leadership encourages patient-centered care by including medical professionals in choices about patient treatment and care plans (Asghar et al., 2021; Sfantou et al., 2017).

Laissez-faire leadership in healthcare comprises leaders adopting a hands-off stance, giving autonomy to healthcare workers, and letting them decide on their own how to treat patients. Leaders rarely intervene directly until it's absolutely necessary (Hansen & Gentry, 2019). According to Abdul and Boitor (2018), laissez-faire leadership can enable nurses to exercise clinical autonomy, which is essential for nursing practice and patient care. Laissez-faire leadership can promote innovation and creativity among healthcare workers in specific healthcare contexts, improving patient outcomes (Anderson et al., 2017; Asif & Shaheen, 2022).

#### ***Employees' engagement***

Employee engagement is the term used to describe the emotional dedication, passion, and enthusiasm that employees feel for their jobs and the company they work for (Saks, 2006). Employees that are truly engaged in their work have a strong sense of purpose in their work and are driven to go above and beyond in it. Employees that are emotionally connected to their company are more engaged. They take great pride in what they do and are committed to helping the business succeed (Macey & Schneider, 2008). Employees who are intrinsically motivated to succeed in their jobs are engaged. They are motivated to work hard because they feel personal fulfillment and fulfillment in their work (Kahn, 1990). Employee engagement is greatly aided by a helpful and encouraging work environment. This involves transparent communication, confidence in the ability of the leadership, and a work environment that values and appreciates its staff (Saks, 2006).

Employees that are engaged frequently look for chances for professional advancement. Teams tend to be more engaged in organizations that invest in employee training and career development



(Robinson et al., 2004). Maintaining engagement requires regular employee feedback and appreciation of their efforts. According to Harter et al. (2002), motivated employees are more likely to remain interested in their work. Employees who are engaged are aware of and support the organization's values. They can see how their efforts advance the company's overall objective (Saks, 2006). Work-life balance initiatives likely to result in more engaged employees. Overall well-being and engagement are boosted by striking a balance between personal and professional obligations (Grzywacz & Bass, 2003; Ishfaq et al., 2022). Employee engagement can be raised by giving them a say in decision-making and actively incorporating them in problem-solving procedures (Asif & Sandhu, 2023; Macey & Schneider, 2008).

Jobs that are engaging often turn out to be hard and meaningful. They enable staff members to make use of their knowledge, imagination, and problem-solving capabilities (Bakker & Demerouti, 2007). Employee engagement is still a dynamic and developing idea, and as firms become more aware of the enormous advantages it offers in terms of performance, innovation, and employee retention, its value in the modern workplace keeps growing.

### ***Employee engagement in healthcare industry***

Patient care quality, employee satisfaction, and organizational success are all directly impacted by employee engagement in the healthcare sector. Compassionate care, fewer medical errors, and an improved patient experience are all more likely among engaged healthcare workers. Engaged healthcare professionals are more likely to put the patient's wants and preferences first, prioritizing patient-centered care (Laschinger et al., 2015).

The beneficial effects of employee involvement on patient satisfaction and therapeutic outcomes are highlighted by research by Haas and Shier (2015). For high-quality care, healthcare teams must effectively communicate and collaborate. According to Milliken et al. (2018), motivated workers are more likely to collaborate well, communicate honestly, and exchange information. Higher levels of employee engagement were linked to greater teamwork and communication in healthcare settings, according to a 2016 study by Mache et al. The healthcare sector is renowned for having high rates of turnover and burnout. According to Hall et al. (2016), engaged workers are more resilient and less likely to burn out. Shanafelt et al.'s (2015) study emphasizes the link between physician engagement and decreased burnout.

Healthcare professionals who are actively engaged are more likely to actively participate in continuous improvement projects and are frequently more responsive to quality improvement initiatives (Aiken et al., 2011). According to a study by Wagner et al. (2019), engaged nurses were key to advancing quality care in hospitals. In healthcare businesses, a culture of safety is related to employee engagement. According to Huang et al. (2016), engaged personnel are more likely to follow safety procedures and report safety issues.

Sexton et al. (2006) conducted research that emphasizes the influence of collaboration and involvement on patient safety. Employee engagement in the healthcare industry depends on strong management and leadership. Employees can be inspired and given power by effective leadership (Laschinger et al., 2015). The importance of leadership in nursing engagement is emphasized in a study by Spence Laschinger et al. (2012). Engagement of healthcare workers depends on giving them opportunities for skill development and career growth (Jackson et al., 2018). Aiken et al.'s (2011) study demonstrates the beneficial effects of education and training on nurse engagement. According to Van Bogaert et al. (2014), thanking and recognizing healthcare workers for their efforts can increase their job



satisfaction and engagement. The significance of recognition programs in healthcare is highlighted by studies by Milliken et al. (2018) and Oates et al. (2017).

### ***Relationship between leadership styles and health care industry***

Healthcare leadership styles have a significant impact on the caliber of patient care, employee engagement, and overall organizational effectiveness. In this setting, authoritative leadership, democratic leadership, and laissez-faire leadership are three important leadership philosophies that are frequently addressed. Each of these approaches has certain traits and effects on healthcare environments. When making quick judgments in healthcare, such as during emergencies or medical procedures, authoritative leadership can be beneficial (Cummings et al., 2018). It is related to accountability and decision-making with clarity. In healthcare settings, democratic leadership promotes an atmosphere of diversity, shared accountability, and cooperation. According to Chaudhry et al. (2018), it is linked to improved levels of patient safety, job satisfaction, and employee engagement.

The decision of a leadership style can affect the results of patients. Democratic leadership encourages a patient-centered culture and collaborative treatment, yet authoritative leadership may be useful in urgent situations. Depending on the skill and drive of healthcare workers, laissez-faire leadership may have a variety of outcomes (Cummings et al., 2018). Leadership philosophies have a big impact on how engaged employees are in healthcare. Democratic administrations frequently have higher rates of employee engagement and work satisfaction. When followers accept the leader's knowledge, authoritative leadership may result in engagement, whereas laissez-faire leadership may produce a variety of employee experiences (Chaudhry et al., 2018; Riaz et al., 2023).

Making good decisions is crucial in the healthcare industry. While democratic leaders incorporate healthcare specialists in the decision-making process, which can result in more thorough and educated conclusions, authoritative leaders may excel at making swift decisions in emergencies. When healthcare practitioners are highly trained and self-directed, laissez-faire leadership may be effective (Cummings et al., 2018).

Patient safety is impacted by leadership styles. While democratic leaders foster a culture where people are encouraged to report safety concerns and participate in safety improvements, authoritative leaders may establish explicit safety standards and expectations. Depending on the situation, laissez-faire leadership can either enable experts to take the initiative in safety matters or result in neglect (Cummings et al., 2018). Healthcare organizations' cultures are shaped by their leaders' philosophies. Democratic leadership promotes an inclusive, trustworthy, and collaborative culture, whereas authoritative leadership can develop a culture of accountability and discipline. According to Bass and Riggio (2006), laissez-faire leadership can result in either a culture of autonomy or confusion and disengagement.

### ***Relationship between leadership styles and employees' engagement in healthcare industry***

In the healthcare sector, principles of leadership are crucial in determining employee engagement, which in turn affects patient care quality and overall organizational performance. Understanding how different leadership philosophies, such as authoritarian, democratic, and laissez-faire styles, affect employee engagement in healthcare settings has become a developing area of study.

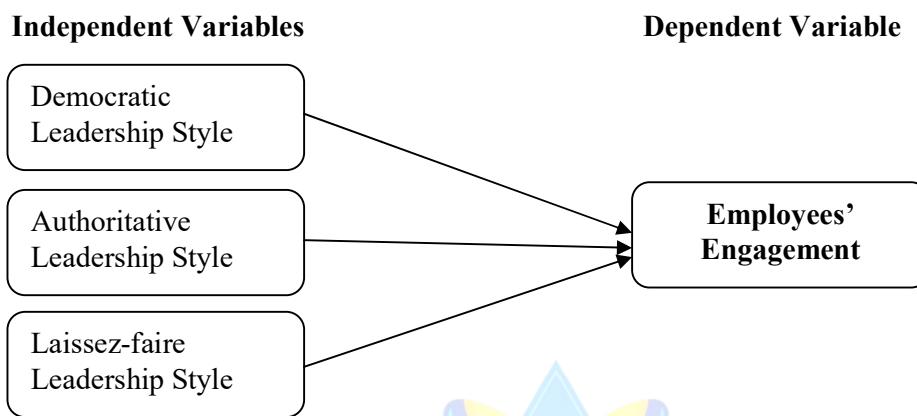
### ***Theoretical framework***

In the current study we are developing three hypotheses and we have three independent variables and one dependent variable. Here's a theoretical framework for the relationship between



leadership styles (Democratic, Authoritative, and Laissez-Faire) as independent variables and employee engagement as the dependent variable. Engaged employees are enthusiastic, committed, and willing to invest discretionary effort in their roles, leading to increased productivity, job satisfaction, and overall organizational performance (Saks, 2006). As result of foregoing discussions, theoretical framework of the current study is as follows:

**Figure 1**  
*Theoretical Framework*



### **Hypotheses**

Following are the hypotheses which are going to be tested through rigorous data analysis on the basis of collected data.

**H1:** Democratic leadership styles have significant positive impact on employees' engagement in private healthcare industry of UAE.

**H2:** The UAE's private healthcare sector has seen an increase in employees' engagement under authoritative leadership styles.

**H3:** Laissez-faire leadership philosophies enhance employees' engagement in the UAE's private healthcare sector.

### **Research Methodology**

A cross sectional design was employed in this study since it is more practicable for the current examination. The data for this investigation were collected at a single point.

### **Research method**

In order to analyze the effect of leadership styles on employee engagement in the healthcare industry, this study used a quantitative research approach.

### **Population**

Total 357 doctors, nurses, and administrative staff working at private hospitals in the United Arab Emirates make up the study's research population.

### **Sample method**

For the purpose of this study, data were gathered from the UAE's private health care sectors using simple probability sampling. The current study's population size is 357, thus the researcher employed GS



& Morgan (1979) in this regard. As a result, the sample for this study is 357 from the 15,000 population.

### **Instruments**

Section A asks a total of 7 questions on demographics, Section B asks 18 questions about leadership, and Section C asks 7 questions about employee engagement.

**Table 1**

#### *Research Tool*

| <b>Variable</b>       | <b>Source</b>   | <b>No. of Items</b> | <b>Scale</b>  |
|-----------------------|---|---------------------|---------------|
| Demographic           | NA  | 7                   | Nominal       |
| Leadership Styles     | Northouse, P. G. (2009).                                | 18                  | Ordinal (1-5) |
| Employees' Engagement | May, D. R., Gilson, R. L., & amp; Harter, L. M. (2004). | 6                   | Ordinal (1-5) |

### **Data Analysis**

The study's purpose was explanatory quantitative research, and the data was gathered using a Microsoft Forms survey approach with a correlational study design. Employees of the 15 private hospitals in Dubai made up the study's sample. Out of the 500 people I sent a Microsoft form to, there were a total of 5000 employees. Only 357 members responded to my request. The SPSS software was used to determine the sample size, which was N=357 personnel (male and female), and the simple random sampling approach of probability sampling was employed to gather the data. Age, gender, education, work experience, and the total number of employees in the business were the demographic characteristics used to collect data from private hospital personnel.

The table 2 presents statistics for a dataset of 357 individuals, with information on gender, education, experience, and age. There are 63 missing values for years of experience (NOE).

**Table 2**

#### *Gender analysis*

| <b>Gender</b> | <b>Frequency</b> | <b>Percentage</b> | <b>Cumulative Percentage</b> |
|---------------|------------------|-------------------|------------------------------|
| Male          | 201              | 56.3              | 56.3                         |
| Female        | 156              | 43.7              | 100                          |
| Total         | 357              | 100               |                              |

The table 2 shows the frequency distribution of gender in a dataset of 357 individuals. It indicates that 201 (56.3%) are in category 1 (e.g., male), while 156 (43.7%) are in category 2 (e.g., female).

**Table 3**

#### *Education Analysis*

| <b>Education</b> | <b>Frequency</b> | <b>Percentage</b> | <b>Cumulative Percentage</b> |
|------------------|------------------|-------------------|------------------------------|
| Inter or below   | 3                | .8                | .8                           |
| Bachelors        | 141              | 39.5              | 40.3                         |
| Masters          | 132              | 37.0              | 77.3                         |
| MS & PhD         | 81               | 22.7              | 100.0                        |
| <b>Total</b>     | <b>357</b>       | <b>100.0</b>      |                              |



The table 3 displays the frequency distribution of education levels for 357 individuals. It shows that 141 (39.5%) have a Bachelor's degree, 132 (37.0%) have a Master's degree, and 81 (22.7%) have either a Master's or a PhD, while only 3 (.8%) have an education level classified as "Inter or below."

**Table 4**
*Experience Analysis*

| <b>Experience</b> | <b>Frequency</b> | <b>Percent</b> | <b>Cumulative Percent</b> |
|-------------------|------------------|----------------|---------------------------|
| 0-5               | 81               | 22.7           | 22.7                      |
| 06-10             | 75               | 21.0           | 43.7                      |
| 11-15             | 93               | 26.1           | 69.7                      |
| 16-20             | 78               | 21.8           | 91.6                      |
| above 20          | 30               | 8.4            | 100.0                     |
| <b>Total</b>      | <b>357</b>       | <b>100.0</b>   |                           |

The table 4 represents the frequency distribution of individuals' years of experience. It shows that 22.7% have 0-5 years of experience, 21.0% have 6-10 years, 26.1% have 11-15 years, 21.8% have 16-20 years, and 8.4% have over 20 years of experience among the 357 individuals.

**Table 5**
*Experience Analysis*

| <b>Age</b>   | <b>Frequency</b> | <b>Percent</b> | <b>Cumulative Percent</b> |
|--------------|------------------|----------------|---------------------------|
| 20-25        | 30               | 8.4            | 8.4                       |
| 26-30        | 72               | 20.2           | 28.6                      |
| 31-35        | 75               | 21.0           | 49.6                      |
| 36-40        | 63               | 17.6           | 67.2                      |
| 41-45        | 39               | 10.9           | 78.2                      |
| 46 & above   | 78               | 21.8           | 100.0                     |
| <b>Total</b> | <b>357</b>       | <b>100.0</b>   |                           |

The table 5 displays the frequency distribution of individuals' ages in a dataset of 357 people. It shows that the majorities are in the age groups of 26-30 (20.2%) and 31-35 (21.0%), while a smaller percentage fall into the 46 & above group (21.0%).

**Table 6**
*Descriptive Analysis*

|                             | <b>Mean</b> | <b>Std. Deviation</b> | <b>N</b> |
|-----------------------------|-------------|-----------------------|----------|
| Democratic Leadership Style | 3.6168      | .64852                | 357      |
| Employees' Engagement       | 3.7092      | .69507                | 357      |

The table 6 provides descriptive statistics for two variables: Democratic Leadership Style and EE. The mean (average) for Democratic Leadership Style is approximately 3.6168 with a standard deviation of about 0.64852, based on a sample size of 357. For EE, the mean is approximately 3.7092 with a standard deviation of about 0.69507, also from a sample size of 357.

**Table 7**
*Correlation Analysis*

| <b>Variable</b>       | <b>Democratic Leadership</b> | <b>Employees' Engagement</b> |
|-----------------------|------------------------------|------------------------------|
| Democratic Leadership | Pearson's Correlation        | 1 .484**                     |



|                       |                       |        |
|-----------------------|-----------------------|--------|
|                       | Sig (2-tailed)        | .000   |
|                       | N                     | 357    |
| Employees' Engagement | Pearson's Correlation | .484** |
|                       | Sig (2-tailed)        | .000   |
|                       | N                     | 357    |

\*\*. Correlation is significant at the 0.01 level (2-tailed).

The table 7 displays the Pearson correlation between two variables, Democratic Leadership Style and EE. There is a statistically significant positive correlation of .484\*\* ( $p < 0.01$ , two-tailed) between the two variables, based on a sample size of 357, indicating a moderate positive relationship between Democratic Leadership Style and Employees' Engagement.

**Table 8**

*Descriptive Analysis*

| Variable                       | Mean   | Std. Deviation | N   |
|--------------------------------|--------|----------------|-----|
| Authoritative Leadership Style | 3.8277 | .73149         | 357 |
| Employees' Engagement          | 3.7092 | .69507         | 357 |

The table 8 presents descriptive statistics for two variables: Authoritative Leadership Style and Employees' Engagement. The mean for Authoritative Leadership Style is approximately 3.8277 with a standard deviation of about 0.73149, based on a sample size of 357. The variable Employees' Engagement also has a mean of 3.7092 and a standard deviation of 0.69507, from the same sample size.

**Table 9**

*Correlation Analysis*

| Variable                 |                       | Authoritative Leadership | Employees' Engagement |
|--------------------------|-----------------------|--------------------------|-----------------------|
| Authoritative Leadership | Pearson's Correlation | 1                        | .554**                |
|                          | Sig (2-tailed)        |                          | .000                  |
|                          | N                     | 357                      | 357                   |
| Employees' Engagement    | Pearson's Correlation | .554**                   | 1                     |
|                          | Sig (2-tailed)        | .000                     |                       |
|                          | N                     | 357                      | 357                   |

\*\*. Correlation is significant at the 0.01 level (2-tailed).

The table 9 displays the Pearson correlation between two variables, Authoritative Leadership Style and Employees' Engagement. It shows a statistically significant positive correlation of .554\*\* ( $p < 0.01$ , two-tailed) between the two variables, based on a sample size of 357, indicating a moderately strong positive relationship between Authoritative Leadership Style and Employees' Engagement.

**Table 10**

*Descriptive Analysis*

|                                | Mean   | Std. Deviation | N   |
|--------------------------------|--------|----------------|-----|
| Laissez-faire Leadership Style | 3.2965 | 1.01077        | 357 |
| Employees' Engagement          | 3.7092 | .69507         | 357 |

The table 10 provides descriptive statistics for two variables: Laissez-faire Leadership Style and Employees' Engagement. The mean for Laissez-faire Leadership Style is approximately 3.2965 with a



standard deviation of about 1.01077, based on a sample size of the variable Employees' Engagement has a mean of 3.7092 and a standard deviation of 0.69507, derived from the same sample size

**Table 11**  
*Correlation Analysis*

| Variable                 |                       | Laissez-faire Leadership | Employees' Engagement |
|--------------------------|-----------------------|--------------------------|-----------------------|
| Laissez-faire Leadership | Pearson's Correlation | 1                        | .238**                |
|                          | Sig (2-tailed)        |                          | .000                  |
|                          | N                     | 357                      | 357                   |
| Employees' Engagement    | Pearson's Correlation | .238**                   | 1                     |
|                          | Sig (2-tailed)        | .000                     |                       |
|                          | N                     | 357                      | 357                   |

The table 11 displays the Pearson correlation between two variables, Laissez-faire Leadership Style and Employees' Engagement. It reveals a statistically significant positive correlation of .238\*\* ( $p < 0.01$ , two-tailed) between the two variables, based on a sample size of 357, indicating a relatively weaker positive relationship between Laissez-faire Leadership Style and Employees' Engagement compared to the previous variables.

**Table 12**  
*Regression Analysis*

| Model | Model Summary     |                |                         |                   |                       |          | Change Statistics |     |               |  |
|-------|-------------------|----------------|-------------------------|-------------------|-----------------------|----------|-------------------|-----|---------------|--|
|       | R                 | R <sup>2</sup> | Adjusted R <sup>2</sup> | Error of Estimate | R <sup>2</sup> Change | F Change | Df1               | Df2 | Sig. F Change |  |
| 1     | .484 <sup>a</sup> | .234           | .232                    | .60908            | .234                  | 108.621  | 1                 | 355 | .000          |  |

The table 12 summarizes a regression model. It indicates that the model, with Leadership Styles as the predictor, explains 23.4% of the variance in the dependent variable (Employees' Engagement), with an F-statistic of 108.621 ( $p < 0.001$ ), suggesting the model is statistically significant.

**Table 13**  
*ANOVA*

| ANOVA <sup>a</sup> |                |                |            |             |         |                   |
|--------------------|----------------|----------------|------------|-------------|---------|-------------------|
| Model              | Sum of Squares |                | df         | Mean Square | F       | Sig. <sup>b</sup> |
| 1                  | Regression     | 40.296         | 1          | 40.296      | 108.621 | .000              |
|                    | Residual       | 131.697        | 355        | .371        |         |                   |
|                    | <b>Total</b>   | <b>171.993</b> | <b>356</b> |             |         |                   |

a. Dependent Variable: Employees' Engagement

b. Predictors: (Constant), Leadership Styles

**Table 14**  
*Coefficients Analysis*

| Model | Coefficients <sup>a</sup>   |      |                           |      |                           |          |  |
|-------|-----------------------------|------|---------------------------|------|---------------------------|----------|--|
|       | Unstandardized Coefficients |      | Standardized Coefficients |      | 95.0% Confidence Interval |          |  |
| B     | Error                       | Beta | t                         | Sig. | L. Bound                  | U. Bound |  |
|       |                             |      |                           |      |                           |          |  |



|                             |       |      |      |        |      |       |       |
|-----------------------------|-------|------|------|--------|------|-------|-------|
| (Constant)                  | 1.833 | .183 |      | 10.022 | .000 | 1.473 | 2.193 |
| Democratic Leadership Style | .519  | .050 | .484 | 10.422 | .000 | .421  | .617  |

a. Dependent Variable: Employees' Engagement

The ANOVA table 13 shows the results of a regression model, indicating that the model, with Democratic Leadership Style as a predictor, is statistically significant ( $p < 0.001$ ). The coefficients table provides the intercept and slope values for the regression model, with Democratic Leadership Style having a significant positive relationship with the dependent variable Employees' Engagement (Beta = 0.484,  $p < 0.001$ ) model, with Democratic Leadership Style having a significant positive relationship with the dependent variable Employees' Engagement (Beta = 0.484,  $p < 0.001$ ).

**Table 15**  
*Regression Analysis*

| Model | R                 | R <sup>2</sup> | Adjusted R <sup>2</sup> | Error of Estimate | Change Statistics     |          |     |               |
|-------|-------------------|----------------|-------------------------|-------------------|-----------------------|----------|-----|---------------|
|       |                   |                |                         |                   | R <sup>2</sup> Change | F Change | Df1 | Sig. F Change |
| 1     | .554 <sup>a</sup> | .307           | .305                    | .57954            | .307                  | 157.091  | 1   | .355 .000     |

a. Predictors: (Constant), Authoritative Leadership Style

The R-squared value of a regression model is a goodness-of-fit measure that indicates the percentage of the variance in the dependent variable that the independent variables explain collectively. In this case, the R-squared value is 0.307, which means that 30.7% of the variance in the dependent variable can be explained by the independent variable. The adjusted R-squared value is another goodness-of-fit measure that takes into account the number of predictors in the model and adjusts for it. It is useful when comparing models with different numbers of predictors. The adjusted R-squared value for this model is 0.305. The standard error of the estimate is a measure of how well the model fits the data. It represents the average distance that the observed values fall from the regression line. In this case, it is 0.57954. The F-statistic and its associated p-value are used to test whether there is a significant relationship between the independent variable and the dependent variable. In this case, the F-statistic is 157.091 with 1 and 355 degrees of freedom, and its associated p-value is less than 0.001. This indicates that there is a significant relationship between the independent variable and the dependent variable.

**Table 16**  
*ANOVA*

| ANOVA <sup>a</sup> |              |                |            |             |         |
|--------------------|--------------|----------------|------------|-------------|---------|
| Model              |              | Sum of Squares | df         | Mean Square | F       |
| 1                  | Regression   | 52.761         | 1          | 52.761      | 157.091 |
|                    | Residual     | 119.232        | 355        | .336        |         |
|                    | <b>Total</b> | <b>171.993</b> | <b>356</b> |             |         |

a. Dependent Variable: Employees' Engagement

b. Predictors: (Constant), Authoritative Leadership Style

The ANOVA table 16 shows the results of a regression model with LS2 as the predictor, indicating that the model is statistically significant ( $p < 0.001$ ). The regression explains a significant



portion of the variance in the dependent variable EE, with an F-statistic of 157.091.

**Table 17**  
*Coefficients Analysis*

| Model                          | Coefficients <sup>a</sup>   |       |                           |  | 95.0% Confidence Interval |      |          |       |
|--------------------------------|-----------------------------|-------|---------------------------|--|---------------------------|------|----------|-------|
|                                | Unstandardized Coefficients |       | Standardized Coefficients |  | t                         | Sig. | L. Bound |       |
|                                | B                           | Error | Beta                      |  |                           |      |          |       |
| (Constant)                     | 1.695                       | .164  |                           |  | 10.357                    | .000 | 1.373    | 2.017 |
| Authoritative Leadership Style | .526                        | .042  | .554                      |  | 12.534                    | .000 | .444     | .609  |

a. Dependent Variable: Employees' Engagement

The coefficients table provides the intercept and slope values for the regression model, with Authoritative Leadership Style as the predictor. It shows that Authoritative Leadership Style has a significant positive relationship with the dependent variable EE (Beta = 0.554, p < 0.001), indicating that an increase in Authoritative Leadership Style is associated with an increase in Employees' Engagement.

**Table 17**  
*Regression Analysis*

| Model | R                | R <sup>2</sup> | Adjusted R <sup>2</sup> | Error of Estimate | Model Summary         |          |     |     | Change Statistics |  |  |  |
|-------|------------------|----------------|-------------------------|-------------------|-----------------------|----------|-----|-----|-------------------|--|--|--|
|       |                  |                |                         |                   | R <sup>2</sup> Change | F Change | Df1 | Df2 | Sig. F Change     |  |  |  |
| 1     | 238 <sup>a</sup> | .057           | .054                    | .67604            | .057                  | 21.325   | 1   | 355 | .000              |  |  |  |

a. Predictors: (Constant), Laissez-faire Leadership Style

The model summary table presents the results of a regression model with Laissez-faire Leadership Style as the predictor. It explains 5.7% of the variance in the dependent variable Employees' Engagement and is statistically significant (F-statistic of 21.325, p < 0.001), but the explained variance is relatively low compared to previous models.

**Table 18**  
*ANOVA*

| Model | ANOVA <sup>a</sup> |                |             |       |                          |
|-------|--------------------|----------------|-------------|-------|--------------------------|
|       | Sum of Squares     | Df             | Mean Square | F     | Sig.                     |
| 1     | Regression         | 9.746          | 1           | 9.746 | 21.325 .000 <sup>b</sup> |
|       | Residual           | 162.247        | 355         | .457  |                          |
|       | <b>Total</b>       | <b>171.993</b> | <b>356</b>  |       |                          |

a. Dependent Variable: Employees' Engagement

b. Predictors: (Constant), Laissez-faire Leadership Style

The ANOVA table 18 displays results for a regression model with Laissez-faire Leadership Style as the predictor, indicating statistical significance (p < 0.001). However, the model explains a



relatively small portion of the variance in the dependent variable Employees' Engagement (5.7%), as indicated by the F-statistic of 21.325.

**Table 19**  
*Coefficients Analysis*

|                          | Coefficients <sup>a</sup>   |       |                           |        |                           |          |          |  |
|--------------------------|-----------------------------|-------|---------------------------|--------|---------------------------|----------|----------|--|
|                          | Unstandardized Coefficients |       | Standardized Coefficients |        | 95.0% Confidence Interval |          |          |  |
|                          | B                           | Error | Beta                      | t      | Sig.                      | L. Bound | U. Bound |  |
| Model                    |                             |       |                           |        |                           |          |          |  |
| (Constant)               | 3.170                       | .122  |                           | 25.936 | .000                      | 2.929    | 3.410    |  |
| Laissez-faire Leadership | .164                        | .035  | .238                      | 4.618  | .000                      | .094     | .233     |  |

a. Dependent Variable: Employees' Engagement

The coefficients table 19 provides the intercept and slope values for the regression model with Laissez-faire Leadership Style as the predictor. It shows that Laissez-faire Leadership style has a significant but relatively weak positive relationship with the dependent variable Employees' Engagement (Beta = 0.238, p < 0.001), suggesting that changes in Laissez-faire Leadership style are associated with modest changes in Employees' Engagement.

## Discussion

In this research, we conducted a series of regression analyses to investigate the impact of three different leadership styles (Democratic, Authoritative, and Laissez-faire Leadership Style) on employee engagement (EE) in the context of a sample of 357 individuals. The results revealed interesting findings about the relationships between these variables.

The first regression analysis, using Democratic Leadership Style as a predictor, demonstrated a statistically significant and positive association between Democratic Leadership Style and employee engagement. It explained 23.4% of the variance in EE, indicating that effective leadership practices, possibly encompassing transformational or inspirational leadership, contribute significantly to higher employee engagement within the healthcare industry in the UAE.

In the second regression analysis, employing Authoritative leadership style as the predictor, the model also showed a strong positive correlation with employee engagement, explaining 30.7% of the variance. This suggests that leadership styles characterized by traits such as empowerment, support, and mentorship play a pivotal role in enhancing employee engagement, fostering a motivated and committed workforce in the healthcare sector. However, in the third regression analysis, using Laissez-faire Leadership Style as the predictor, we observed a less substantial relationship between leadership style and employee engagement. Laissez-faire Leadership Style explained only 5.7% of the variance in employee engagement, indicating that this particular leadership style might have a weaker influence on employee engagement, or other unaccounted factors may be at play.

## Conclusion

In conclusion, our research underscores the significance of leadership styles in shaping employee engagement within the healthcare industry in the UAE. Leadership styles characterized by transformational and supportive qualities (democratic and authoritative leadership styles) have a more substantial impact on employee engagement. These findings are highly relevant for healthcare organizations seeking to improve employee engagement, as it can lead to higher-quality patient care,



increased job satisfaction, and organizational performance.

While Laissez-faire Leadership Style showed a positive but relatively weaker relationship with employee engagement, its specific impact should be further explored, especially in the context of the healthcare sector, to identify potential areas for improvement in leadership practices.

These results emphasize the importance of tailoring leadership approaches to the unique needs and challenges of healthcare professionals, and our study provides valuable insights for organizations and leaders in the healthcare industry in the UAE and potentially in other regions as well. Ultimately, fostering a culture of effective and supportive leadership is essential for enhancing employee engagement and, consequently, the quality of healthcare services delivered.

### **Recommendations**

The findings of this research shed light on the dynamic relationship between leadership styles and employee engagement within the UAE private healthcare sector. Based on the insights gathered from the data, several key recommendations can be made for healthcare organizations and leaders to optimize employee engagement and enhance patient care quality:

Healthcare organizations should recognize the significance of leadership styles in influencing employee engagement. Tailoring leadership approaches to the unique context and the needs of healthcare professionals can have a profound impact. While all three leadership styles (Authoritative, Democratic, and Laissez-faire leadership styles) have their own advantages and disadvantages, leaders should consider a flexible and context-specific approach.

Given the strong positive correlation between Authoritative and Democratic leadership styles and employee engagement, healthcare organizations should encourage transformational leadership practices. Leaders should work on developing a clear and compelling vision that resonates with healthcare teams. They should actively engage with team members, fostering open communication and collaboration to create a culture of shared purpose.

The Laissez-faire leadership style, characterized by granting autonomy, is essential in certain healthcare contexts. However, leaders should strike a balance between autonomy and guidance. Empowering healthcare professionals to exercise their expertise is crucial, but some level of guidance and support is needed, especially in critical healthcare situations.

Organizations should invest in leadership training and development programs to equip leaders with the skills and knowledge necessary to effectively lead healthcare teams. These programs should encompass emotional intelligence, communication skills, and the ability to adapt leadership styles based on the situation. To measure and improve leadership practices, organizations should implement regular feedback mechanisms and performance evaluations for leaders. This allows for ongoing improvement and ensures alignment with the organization's goals.

Healthcare organizations should invest in initiatives that directly target and enhance employee engagement. These initiatives might include recognition programs, wellness initiatives, mentorship opportunities, and career development pathways. Creating a work environment that supports employee well-being and growth can significantly boost engagement.

Although Laissez-faire leadership style showed a weaker correlation with employee engagement in this study, further research into the specific impact of Laissez-faire leadership in healthcare contexts is warranted. Understanding when and how this leadership style is most effective can provide valuable



insights for healthcare leaders.

Future research should consider conducting longitudinal studies to explore the evolution of leadership styles and their impact on employee engagement over time. This can help organizations adapt to changing dynamics and emerging trends in the healthcare sector.

Healthcare organizations should consider benchmarking against best practices in leadership and employee engagement from both within and outside the industry. Learning from successful case studies and incorporating best practices can lead to tangible improvements.

In conclusion, leadership styles are integral to the healthcare sector's ability to provide high-quality patient care and maintain a motivated workforce. By adopting flexible and context-specific leadership approaches, fostering transformational leadership, and investing in leadership training and employee engagement initiatives, healthcare organizations in the UAE can optimize their performance and create a positive impact on both patient outcomes and employee satisfaction.

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