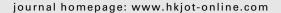


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ORIGINAL ARTICLE

Leadership Style Preference of Undergraduate Occupational Therapy Students in Australia



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KEYWORDS

leadership; occupational therapy; students; education **Summary** *Background*: Occupational therapy graduates are expected to assume leadership roles in a variety of contexts and capacities.

Objective: To investigate the leadership styles of undergraduate occupational therapy students. *Methods*: First, second, third, and fourth year undergraduate occupational therapy students from one Australian university were asked to complete the What's My Leadership Style (WMLS) questionnaire.

Results: The total sample response rate was 86.3% (n=182/211). Overall there was a statistically significant difference in students' preference for the leadership styles (p<.001). The two most preferred leadership styles were the Considerate and Spirited styles while the two least preferred were the Direct and Systematic leadership styles. There were no statistically significant differences in preference for any of the four leadership styles based on students' sex, age, or year level of study. Conclusion: The Considerate leadership style is characterised by creating comfortable working environments, following established procedures, and creating an easy work pace, while the Spirited leadership style is about inspiring people, generating excitement, turning work into play, and rallying people. It is recommended that leadership be integrated into occupational therapy curricula so as to adequately equip students for future professional practice.

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Introduction

The ability to lead is a key trait that many managers and practitioners need in order to be successful in the healthcare sector, including the allied health professions. Leadership, personality traits, and leadership style have been extensively researched in the corporate world (Bono & Judge, 2004), comparatively, however, there has been much less empirical leadership literature in the occupational therapy field and about occupational therapy students (Braveman, 2006). Several doctoral theses have been completed that examined the leadership styles of occupational therapy managers (Alexander, 2006; Luebben, 1997; Reiss, 2000; Wilson, 2004). In addition, the importance of effective and strategic leadership for the occupational therapy profession has been offered (Moyers, 2007; Rodger, 2011), and an occupation based model of leadership has been proposed called the Leadership in Enabling Occupation (LEO) Model (Townsend, Polatajko, Craik, & von Zweck, 2011). The leadership qualities of occupational therapy department programme directors have also been investigated to a limited extent (Dudek-Shriber, 1997; Snodgrass, Douthitt, Ellis, Wade, & Plemons, 2008). However, very little research has been undertaken to investigate the leadership traits of occupational therapy students and novice practitioners.

Leadership style "is the manner and approach of providing direction, implementing plans, and motivating people" (Clark, 2010, p. 1). Three main leadership styles have been identified: authoritarian or autocratic; participative or democratic; delegative or free reign (Newstrom & Davis, 1993). Two other leadership styles have been identified as well, those being laissez-faire and paternalistic (Foster, 2002). Typically, effective leaders will use all five styles, with one or two normally being dominant. Ineffective leaders usually stick to one leadership style and do not exhibit flexibility or adaptability depending on the situational demands (Martindale, 2011).

Healthcare organisations are heavily influenced by political agendas, economic climate, changing policies and procedures, decreased reimbursement, increased competition, and a more informed, assertive clientele (Braveman, 2006). Therefore organisations in the healthcare sector have to constantly adapt to these pressures. These external influences impact both upper administrative levels and lower levels of the healthcare managerial hierarchy (Nugus, Greenfield, Travaglia, Westbrook, & Braithwaite, 2010). Ultimately, students and new graduate therapists may find themselves in both formal and informal leadership roles sooner than anticipated or desired (Swearingen, 2009). Furthermore, managers hold high expectations for therapists they supervise to problem solve creatively and work as efficient members of multidisciplinary teams. Working within a team itself requires leadership skills as both the team leader (which is often a rotating and/or shared role) and as the representative of their profession within that team (Rowe, 1996). The same could be said for other sectors (e.g., education, early intervention, aged care, vocational rehabilitation, public health, private industry), where new occupational therapy graduates may seek employment. New graduates may also be called upon to assume leadership positions outside of the work setting such as membership of the management board of a community agency or membership of the local executive of the professional association.

Effective leadership affords collaboration, cooperation, conflict management, a united and shared vision/goal, empowerment, innovations, advocacy for the profession, enhanced individual knowledge, trust, and personal power (Barker, 2001; Day, 2000; Levey, Hill, & Greene, 2002). It has been hypothesised and highly researched that the ability of an individual to obtain/encompass these traits correlates with certain personality types (Best, 2010; Bono & Judge, 2004). There are several well-established personality inventories that assess traits that pertain to leadership styles. The most widely used personality test is the Myers and McCaulley (1985) Myers-Briggs Type Indicator (Schneider & Smith, 2004). Similar to this, the What's My Leadership Style Questionnaire is based on the work of psychological theorists Carl Jung and William Moultan Marston (HRDQ, 2003) to associate personality traits with dominant leadership styles.

Given that the occupational therapy profession is female dominated with only about 5% of all practitioners being male (Grant, Robinson, & Muir, 2004; Service and Workforce Planning Branch, Department of Human Services, State of Victoria, 2008), this may also impact on the leadership styles that occupational therapists exhibit. Several studies have been completed that compared the leadership characteristics of female and male managers. For example, in a year-long study conducted by Caliper (2005), a Princeton, New Jersey-based management consulting firm, 59 women leaders from large companies in the United Kingdom and the United States completed in-depth interviews and a personality inventory. The study focused on the personality qualities and motivational factors of female leaders and identified a number of traits that distinguished women leaders from their male counterparts when it came to leadership. The findings can be summarised into four statements about women's leadership styles: (a) women leaders were more persuasive than their male counterparts; (b) when dealing with controversy and rejection, women leaders learned from adversity and carried on with an "I'll show you" attitude; (c) women leaders demonstrate an inclusive, team-building leadership style of problem solving and decision making; and (d) women leaders were more likely to ignore rules and take risks. According to Riggio (2010), "using the theory of transformational leadership as an indicator of successful leadership (transformational leaders are inspirational, positive role models, concerned about followers, empowering, and push followers to be creative and take chances), research shows that women, as a group, have more transformational qualities than men" (p. 1). A study by Catalyst (2005) concluded that in the workplace where there are leaders and followers (subordinates), "women leaders take care, men leaders take charge" (p. 1).

There has been very little published literature that explores the leadership styles of occupational therapy students (Brown, 1989; Landa-Gonzalez, 2008). Therefore, the aim of this study was to investigate the leadership styles of undergraduate occupational therapy students by completing a leadership style questionnaire and examining if there was a difference in leadership styles between the

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