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Are there Differences in Leadership Styles among Hospital Supervisors based on Demographic Characteristics?

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Abstract: **The purpose of the study was to examine differences in leadership styles among hospital supervisors based on their demographic characteristics of age, gender, educational level, and years of experience. A total of (*N* = 240) randomly selected supervisors, ages 20 – 70 years, from four randomly selected hospitals in the southern region of the United States voluntarily participated in the study. Hersey's perspective of Situational Leadership® was used as a conceptual framework for this study. The Leadership Effectiveness Adaptability Descriptor (LEAD) was used to collect data on leadership styles, while demographic data was collected using demographic survey designed by the researcher. The results of the one-way analysis of variance (ANOVA) failed to reveal any significant differences in leadership styles among supervisors based on demographic characteristics of age, gender, educational level, and experience in years.**

Keywords**: Situational Leadership Style, Demographics, Hospital, Supervisor.**

I. INTRODUCTION

Supervisor leadership styles are very critical to the operational success of any organization, including hospitals. Hospital supervisors are expected to make informed and effective decisions that are helpful to the planning, execution, and implementation of organizational strategies. Carefully planned and implemented strategies may eventually lead to the operational success in hospitals (Zuckerman, 2014)[31]. Charanjit (2017)[6] suggested that for leadership to be effective, that leadership must be built on a solid foundation that outlines a clear mission and vision for the hospital, and sets a culture that is success oriented and success driven. In other for a leader to achieve this success, that leader must possess certain characteristics, learned or inherent, the extent to which may be impacted by age, gender, experience on the job, and educational level.

Over the last several decades, there has been a misconception that an effective leader should be well educated, with several years of experience on the job, and of a notable age. Many studies regarding this subject have yielded mixed results. Specifically, studies regarding the link between age, gender, level of education, and experience in years on the job, and leadership styles or behaviour (Hana, & Kirkhaug, 2014[16]; Jabeen, & Saeed, 2013[19]; Nash, Davies, & Moore, 2017)[23], have yet to provide a conclusive position on the subject. There still remains a gap in the literature on the subject of demographic characteristics and leadership styles, especially among hospital supervisors.

In this study, the researcher examined the link between demographic characteristics of age, gender, education, and experience in years on the job and the leadership styles of various hospital supervisors within the southern region of the United States, using Hersey's perspective of the Situational Leadership® was used as a conceptual framework. The researcher hoped that the findings of this study would contribute to scientific knowledge, and also help to bridge the gap in the literature on leadership styles. Students, teachers, administrators, and researchers may find this material useful in their various disciplines.

Purpose of the Study:

The goal of this study was to critically examine differences in leadership styles among hospital supervisors based on their demographic characteristics of age, gender, educational level, and years of experience on the job. The findings of this study may help hospital administrators and managers in their human capital resource management and scheduling efforts.

Research Questions:

The main research question was "Does leadership styles among hospital supervisors within the southern region of the United States differ based on demographic characteristics of age, gender, educational level, and years of experience on the job? This question was expanded further to address each demographic in relation to Situational Leadership® Style. The subsequent research questions were:

Research Question 1

Does leadership styles among hospital supervisors differ based on age?

Hypothesis 1

$H1_a$: There is a significant difference in leadership styles among supervisors based age.

$H1_o$: There is no significant difference in leadership styles among supervisors based age.

Research Question 2

Does leadership styles among hospital supervisors differ based on gender?

Hypothesis 2

$H2_a$: There is a significant difference in leadership styles among supervisors based gender.

$H2_o$: There is no significant difference in leadership styles among supervisors based gender.

Research Question 3

Does leadership styles among hospital supervisors differ based on educational level?

Hypothesis 3

$H3_a$: There is a significant difference in leadership styles among supervisors based on educational level.

$H3_o$: There is no significant difference in leadership styles among supervisors based educational level.

Research Question 4

Does leadership styles among hospital supervisors differ based on experience on the job?

Hypothesis 4

$H4_a$: There is a significant difference in leadership styles among supervisors based on experience on the job.

$H4_o$: There is a significant difference in leadership styles among supervisors based on experience on the job.

II. THEORETICAL FRAMEWORK AND LITERATURE REVIEW

Theoretical Framework:

The researcher deployed Hersey's perspective of the Situational Leadership ® as a conceptual framework for this investigation. The basic premise of the Situational leadership® theory is that no one leadership style is superior to the other in influencing employees. Rather, the degree of readiness of the employee to be influenced plays a significant role. Since various employees are at different readiness levels in completing a given task at any one point in time, many experts believed that effective leaders are those who are flexible and versatile along the performance matrix (Hersey, et al. 2013)[17].

The Situational leadership theory was developed by Hersey and Blanchard in 1969. The authors originally referred to the theory as "Life Cycle Theory of Leadership." They later changed the name to Situational Leadership Theory in the early

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1970s. The two authors worked on the theory for some years and in the late 1970s and early 1980s, they individually developed their own perspectives of the theory. Hersey developed the Situational Leadership® model, and Blanchard developed the Situational Leadership II®. Hersey's perspective of the model was considered in this study.

Situational Leadership® is categorized into telling (S1), selling (S2), participating (S3), and delegating (4) leadership dimensions in relation to their corresponding Employee Readiness - R1 (Unable or insecure or Unwilling), R2 (Unable but confident or willing), R3 (Able but insecure or unwilling), and R4 (Able, confident and willing). See figure 1 below.

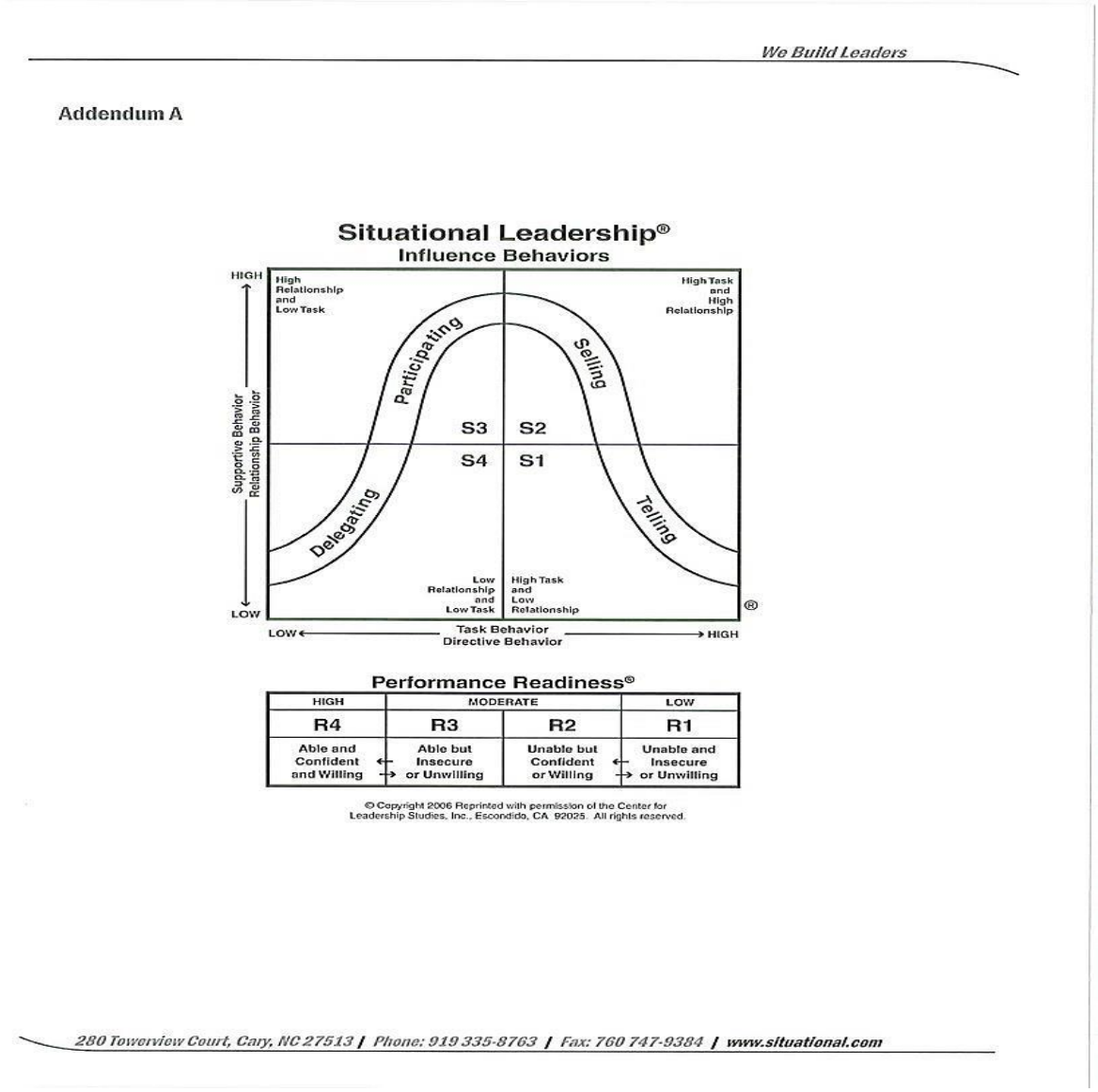

Figure 1: The Situational Leadership® Model. Adapted from Blanchard, K. H., Hersey, P., Johnson, D., E. (2013). Management of organizational behaviour: Leading Human Resources. (10th ed.). Englewood Cliffs, NJ: Prentice-Hall.

Hersey's Situational Leadership® Model is based on the relationship between the leader and the follower, based on the situation presented at a specific time. In other words, the model depicts task behaviour, relationship behaviour, and the readiness level of the follower in performing a specific task. The model above depicts various designations explained below:

S1 designates leaders who define the roles and task of followers and supervise, direct and guide followers very closely. These leaders make all the decisions, and authority is from top to bottom. In other words, such leaders are referred to as "telling leaders." The model recommends the application of this type of leadership style be applied to subordinates with low competence but with high commitment level (Readiness level 1: R1).

S2 designates leaders who still define, explain, and persuade followers to do their roles and task, but remains open to ideas and suggestions from followers. Such leaders encourage two-way communications, but the decision remains the prerogative of the leader. Some experts refer to such leaders as "selling leaders." The model proposes the use of the selling type of leadership style for subordinates with some competence but low commitment (Readiness level 2: R2).

S3 designates participating or supporting leaders who relay day-to-day decisions to followers. Such a leader encourages, facilitates and takes part the problem-solving process and decisions, but control lies in the hands of the followers. The S3 type of leadership style is appropriate for subordinate with high competence, but with variant commitment levels (Readiness level 3: R3). This type of leadership, the subordinate participates in the decision-making process guided by the leader.

S4 refers to delegating leaders who are still involved in the decision-making and problem-solving process but relinquishes control of individual task with the followers. The leader is mainly concerned with monitoring, observing, and evaluating. The SL model recommends the S4 type of leadership style for subordinates with high competence and high commitment level (Readiness level 4: R4).

Literature Review:

In this study, employee readiness was not assessed. The two main parameters considered here are demographic characteristics of age, gender, educational level, and years of experience on the job of supervisors and Situational Leadership® dimensions including telling, selling, participating, and delegating leadership styles.

The researcher reviewed relevant articles addressing the relationship between leadership styles and demographic characteristics, with the goal of presenting a balanced perspective on the subject of leadership.

Age:

Studies on the link between age and leadership style have produced mixed results. While many people go with the notion that older adults are normally effective leaders because of the many years of experience they have, yet results of studies in this area have not been definitive. However, Bhargava and Anbazhagan (2014)[5] reported that the age of a leader does impact that leader's leadership styles. The authors suggested that older leaders may behave differently from younger leaders given a similar situation. Greaves (2011)[12] studied the relationship between age and wisdom among older leaders relative to their leadership skills. The researchers considered wisdom to be a combination of relevant knowledge, understanding of context, tolerance for different views and values, and the ability to effectively deal with the inevitable uncertainties of life. The results of the study indicated that leaders who were perceived to have these wisdom traits were also seen as being the most effective leaders. Likewise, those who were adept at handling uncertainty were also considered effective.

However, despite the correlation between wisdom and effective leadership, the study found no link between age and wisdom or between age and leadership skills. Some older leaders demonstrated higher levels of wisdom and more effective leadership skills, while others did not. In addition, the study did not provide support for the idea that leaders become wiser with age, neither did it provide support for a relationship between age and leadership, but did find associations between wisdom and leadership. Zacher, Rosing, and Frese (2015)[30] affirmed that age may not have an effect on leadership styles per se, but there are tendencies that certain moderating factors such as legacy belief may create an association between leadership styles and age.

Gender:

Like age, the link between gender and leadership styles has also been a center of controversy among researchers. While some researchers believed that gender does not matter when it comes to leadership (Cliff, 2005)[7]; Kent & Schuele, 2010[22]; Zacher, Rosing, & Frese, 2015[30]*)*, others (Hudson Group, n.d[18].; American Psychological Association, n.d[1]; Burke, & Collins, 2001[4]) do believe a link exists between the gender of a supervisor and their leadership styles. A study conducted by Pew Research Center (2015)[25] involving gender and leadership, revealed that both men and women agreed on certain traits, but also differ on other traits. For example, the results indicated that nearly equal shares of each gender indicated that honesty, intelligence, organization, and decisiveness are absolutely essential in leadership. However, women placed more importance on intelligence and honesty than do men. Conversely, larger gender gaps were reported

relating to less important traits such as compassion. Results indicated that 66 percent of women are much more likely than men 47 percent to say that being compassionate is absolutely essential in a leader. These perceptions play a significant role in the leadership behavior of both genders.

In another study, Appelbaum, Audet, and Joanne (2003)[3] examined gender relative to leadership effectiveness among male and female leaders. The authors found out that leadership effectiveness is not exclusive to any gender and that although male and female leaders may have different leadership styles, they can learn from each other. However, the authors reported that the masculinity of the male plays a significant role in the male preference for leadership than the female. In contradiction to the Appelbaum, Audet, and Joanne's findings, multiple studies have claimed no significant differences in leadership styles among leaders based on gender. Andersen and Hansson (2011)[2] conducted a study to determine if there were significant differences in leadership behaviors based on gender among public office managers. They specifically examined the impact of decision-making styles and motivation profiles of these public office managers.

Although the researchers identified differences in decision-making styles, it was not at a level of significance. These findings were consistent with Kent and Schuele (2010)[22] *who* studied transformational leadership behavior among male and female leaders among some business leaders in Germany. Again, the authors found no significant differences in leadership style among these leaders based on their gender. With many studies resulting in such findings, Walker (2017)[29] concluded more women should be encouraged into leadership roles.

Educational Level:

Education is an integral ingredient for a leader, but does a leader's educational level impact his/her leadership styles? This topic has yielded a lot of controversies in social science and very little information exist to provide a definitive position on the subject (Green, Chavez, Lopez, Debra & Gonzalez, 2011)[15]. While many scholars believe a leader's educational level impacts his/her leadership style and effectiveness, others have seen results of studies contrary to the contrary. Carnes and Lupu (2016)[8] found little evidence of any link between education and leadership style and suggested that the relationship between the two variables is more complex than many scholars imagined. The authors found that in terms of governance, the uneducated politicians tend to do no better than the educated ones. However, Green, Chavez, Lopez, Debra, and Gonzalez (2011)[15] reported that education as a predictor variable, predicts job attitudes and entrepreneurial success, which are very much related to leadership effective leadership. Greene, et al's finding was also supported by Ng and Feldman (2010)[24]. Ng and Feldman conducted a meta-analysis of 800 articles regarding education and leadership and reported that educational level was a positive predictor of job attitudes and success. Kearney and Gerbert (2008)[20] also found that a team leader with Master degree in a multi-national pharmaceutical company was rated higher on emphasizing team performance, than those with a bachelor or less. Xirasagar, Samuels, and Curtin (2006)[26] also found those physician leaders who held an MBA were rated higher on transformational leadership than those without an MBA. On the other hand, Turner, Barling, and Epitropaki (2002)[28] found an inverse relationship between education and transactional leadership. Stout-Stewart (2005)[32] found a positive relationship between education and all five Exemplary Leadership Practices measured on the Leadership Practices Inventory. Reports have yielded varying results over the years.

Experience on the Job:

Results of studies regarding experience and leadership have been mixed. Several studies have found no relationship between leadership experience, ratings, or length of time on the job. For example, Laurent and Bradney (2007)[21] found no relationship between leadership experience and any of the five measures of the Leadership Practices Inventory (LPI). These five measures include: model the way, inspire a shared vision, challenge the process, enable others to act, and encourage the heart. Laurent and Bradney found this inventory to be highly related to leadership behavior. Likewise, Eren and Kurt (2011[10]) found no relationship between the experiences of 870 elementary school principals and their technological leadership behaviors. However, other studies found limited relationships between experience and leadership. Ejaz, Rehman and Zaheer (2009)[9] surveyed 93 respondents from the Pakistani banking system and found that experience was positively related to the leadership dimensions of developing others, developing self, supporting team, pursuit of excellence and accountability, but was not related to the leader's ability to identify follower pain, business acumen, commitment or interpersonal skills.

The researcher hopes that the results of this study may help bridge the gap in the literature and contribute to resolving the controversies or may open up another dimension to the phenomenon that may warrant further investigation.

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III. METHODOLOGY

A. Procedure and instruments:

A descriptive research strategy guided by a positivist paradigm was deployed by the researcher to answer the research question in this study. The sampling process targeted (N=408) supervisors randomly selected from four randomly selected hospitals within the southern region of the United States. The sample size selected was done by G*Power analysis. Out of the (N= 408) supervisors, a total of (N= 240) participants were accepted for analysis with a questionnaire return rate of 58.8%. Participation was voluntary and all responses were treated with anonymity.

Two types of instruments were used in the study: The Leadership Effectiveness and Adaptability Description (LEAD-Self) questionnaire, which measured supervisor's perception of their leadership style and subordinate's perception of supervisor's leadership style, and (b) Demographic questionnaires designed by the researcher used to collect demographic information. Supervisors received both the LEAD – Self-questionnaires and the demographic questionnaires.

The LEAD instrument described 12 situations in which the leaders would identify from among four options their behaviour in a given scenario. The results obtained from calculations put the leader into one of the four quadrants S1 – S4, identifying the leadership style exhibited by the leader. The primary leadership style was calculated by the creation of a composite score for each of the four leadership styles and adding the number of responses in each category. Evidently, the style with the most responses or scores is considered to be the participant's primary leadership style.

The researcher designed the demographic survey questionnaire to solicit demographic information such as age, educational level, years of experience, and gender, which was used for descriptive purposes, and to provide a better insight into the research question. The survey was administered in a paper and pencil format to willing participants after consultations with the Human resources department and managers supervising participants in the four hospitals. Multiple visits were made to these facilities to secure approval for the study and informed consent from participants. The researcher made sure all ethical considerations were covered and addressed all concerns of the participants. Surveys, with a self-addressed return, envelops were distributed to participants via the human resources department. Participants were asked to return completed surveys directly via post or via the human resources offices of their respective hospitals. Participants were given two weeks to complete surveys.

B. Data Analysis:

After receipt of survey packets, out of 500 surveys, 320 were received and 240 were considered complete for analysis resulting in a 64 percent return rate. Out of the 320 surveys received, 240 were accepted as complete for analysis. Two types of analysis were done: Descriptive analysis and hypothesis testing. The descriptive analysis was performed to provide more insight into the study, and it yielded the following results: TABLE 1 shows the distribution of demographic characteristics of supervisors starting with age distribution. The age group (31 – 41) had more participants 96/240 (40%), followed by age group (42 – 52) years 64/240 (26.7%). The age group 64 –74 had the least number of participants 4/240 (1.7%) compared to all other age groups. The age group (20 – 30) years had 61/240 (25.4%) of the participants, while the age group (53 – 63) had 15/240 (6.2 %).

The next demographic variable was gender. There were more female respondents 142/240 (59.2%) than males 98/240 (40.8%). With regard to the educational level, 79.2 % of the participants had high school diplomas or had earned an Associate Degree. Out of the 20.8% remaining, 17.1% had a bachelor degree, 3.3% had a master degree, and 0.4% had a doctorate degree. With regard to experience on the job, 77.9% had at least 10 years of experience on the job, 19.2% had at least 11 years on the job, and 2.5% had at least 25 years on the job.

TABLE 1: Number and Percentages of Supervisors Demographic Characteristics (n = 240)

Demographics characteristics	n	%
Age		
20 – 30	61	25.4
31 – 40	96	40.0
41 – 50	64	26.7
51 – 60	15	6.2

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61 – 70	4	1.7
Gender		
Male	98	40.8
Female	142	59.2
Educational level		
High school	100	41.7
Associates	90	37.5
Bachelors	41	17.1
Masters	8	3.3
Doctorate	1	0.4
Experience in years		
1 – 5	105	43.8
6 – 10	85	35.4
11 – 15	35	14.6
16 – 20	11	4.6
21 – 25	6	2.5

Table 2 presents a distribution of leadership style perceptions of supervisors. It is clear that the selling 149/240 (66.2%) was the dominant leadership style practiced by supervisors followed by participating style as a secondary style. Telling and delegating styles were seldom used resulting in 4.2% and 5.8% for telling and delegating leadership styles respectively.

TABLE 2: Distribution of Supervisor Leadership Style Perceptions

Supervisor leadership style	*f*	%
Telling	10	4.2
Selling	149	66.2
Participating	67	94.2
Delegating	14	5.8
Total	240	100.0

C. Hypothesis Testing:

Before any hypothesis testing was done, the researcher performed exploratory data analysis which consisted of three tests: test for reliability, test for outliers, and test for normality. The researcher performed a reliability analysis test of the LEAD instrument and obtained calculated Cronbach's alpha (α) of 0.88 for the LEAD instrument. This value was above the acceptable level of $\alpha \geq .70$ (Gliem & Gliem, 2003)[11]. The test of Outliers was evaluated by the use of boxplots to get rid of any undue influence on the results in hypothesis testing, but the records were retained because of lack of significant differences in the data. The researcher evaluated the distribution of variables for normality using the Kolmogoroff-Smirnov (K-S) test. The results showed that the *p*-value is less than .05, which meant that the variables were normally distributed.

D. Results and Findings:

Once exploratory data analysis was concluded, the researcher performed hypothesis testing. A one-way Analysis of Variance (ANOVA) was used to measure the mean differences in leadership styles based on the demographic characteristics of the supervisors. The significance level for the study was $\alpha = 0.05$, and the research results were significant when the p-value was less than the alpha value. Test values are highly significant when the *p*-values are less than 0.01 (Greenland, Senn, Rothman, Carlin, Poole, Goodman, & Altman, 2016)[13], which shows that sufficient evidence exists to support the alternative hypothesis.

The first research question focuses on examining the differences in leadership style among supervisors based on their age. TABLE 3 presents a one - way between subjects ANOVA conducted to compare mean scores of leadership styles based on the age of the supervisors. Results of the ANOVA failed to show any sufficient evidence that significant differences existed for TL, SL, PL, DL, and L among supervisors by age. TL – Age [$F(4, 235) = .712$, $p = .584$]; SL – Age [$F(4, 235) = .247$. $p = .911$]; PL – Age [$F(4, 235) = .697$, $p = .595$]; DL – Age [$F(4, 235) = .944$, $p = 439$]; L – Age [$F(4, 235) = .612$, $p = .655$]. Therefore, a post hoc test was not conducted

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TABLE 3: Analysis of Variance for TL, SL, PL, DL, and L by Age

Leadership Styles	*SS*	*df*	*MS*	*F*	Sig.
		Between Subjects			
TL	30.38	4	7.59	.71	.58
SL	179.60	4	44.89	.25	.91
PL	433.85	4	108.46	.70	.59
DL	58.54	4	14.63	.94	.43
L	35.62	4	8.90	.61	.65
		Within Subjects			
TL	2506.27	235	10.66		
SL	42681.86	235	181.62		
PL	36569.88	235	156.61		
DL	3644.25	235	15.50		
L	3421.96	235	14.56		

Note: **P* significant at .05 level. *SS* = Sum of Squares, *df* = Degree of Freedom, *MS* = Mean

The second research question examines the differences in leadership styles among supervisors based on their gender. TABLE 4 presents results of a one-way between subjects ANOVA comparing mean scores of leadership dimensions of supervisors by gender. In this Study, results of the ANOVA failed to show any sufficient evidence that significant differences existed for TL, SL, PL, DL, and L among supervisors based on their gender. TL – gender [F (1, 238) = .267, *p* = .606]; SL – gender [F (1, 238) = .584. *p* = .869]; PL – gender [F (1, 238) = .028, *p* = 638]; DL – gender [F (1, 238) = .222, *p* = .638]; L – Gender [F (1, 238) = .004, *p* = .947. A post hoc test was not done since *p* > .05.

TABLE 4: Analysis of Variance for TL, SL, PL, DL, and L by Gender

Leadership Styles	*SS*	*df*	*MS*	*F*	Sig.
		Between Subjects			
TL	2.84	1	2.84	.27	.61
SL	4.91	1	4.91	.03	.87
PL	4.37	1	4.37	.03	.87
DL	3.44	1	15.54	.22	.64
L	.06	1	14.52	.00	.95
		Within Subjects			
TL	2533.80	238	10.57		
SL	42856.26	238	180.59		
PL	36999.35	238	156.39		
DL	3699.34	238	15.51		
L	3457.52	238	14.54		

Note: **P* significant at .05 level. *SS* = Sum of Squares, *df* = Degree of Freedom, *MS* = Mean Square.

The third research question examines the differences in leadership styles among supervisors based on their educational level. TABLE 5 presents results of a one-way between subjects ANOVA to compare mean scores of leadership style dimensions by educational level. In this Study, results of the ANOVA failed to show any sufficient evidence that significant differences existed for TL, SL, PL, DL, and L among employees by educational level. TL – Educational level [F (4, 235) = 1.245, *p* = .293]; SL – Educational level [F (4, 235) = .584. *p* = .674]; PL – Educational level [F (4, 235) = .401, *p* = 808]; DL – Educational level [F (4, 235) = .907, p = .461]; L – Educational level [F (4, 235) = .672, p = .612]. A post hoc test was not done since *p* > .05.

TABLE 5: Analysis of Variance for TL, SL, PL, DL, and L by Educational Level

Leadership Styles	*SS*	*df*	*MS*	*F*	Sig.
		Between Subjects			
TL	52.64	4	13.61	1.24	.29
SL	422.00	4	105.50	.58	.67
PL	250.66	4	62.66	.40	.81
DL	56.29	4	14.07	.90	.46
L	39.10	4	9.77	.67	.61

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		Within Subjects			
TL	2484.00	235	10.57		
SL	42439.18	235	180.59		
PL	36753.06	235	156.39		
DL	3646.50	235	15.51		
L	3418.48	235	14.54		

Note: **P* significant at .05 level. *SS* = Sum of Squares, *df* = Degree of Freedom, *MS* = Mean Square.

The fourth research question focuses on examining the differences in leadership style among supervisors based on their experience in years on the job. TABLE 6 present a one-way between subjects ANOVA conducted to compare mean scores of leadership style dimensions by experience. Results of the ANOVA failed to show any sufficient evidence that significant differences existed for TL, SL, PL, DL, and L among employees by experience. TL - Experience [F (4, 235) = .605, p = .659]; SL – Experience [F (4, 235) = .390. p = .816]; PL – Experience [F [4, 235) = .491, p = 743]; DL – Experience [F (4, 235) = .412, p = 800]; L – Experience [F (4, 235) = .673, p = .611]. All test were significant at $\alpha = .05$. Therefore a post hoc test was not done.

TABLE 6: Analysis of Variance for TL, SL, PL, DL, and L by Experience in years on the Job

Leadership Styles	*SS*	*df*	*MS*	*F*	Sig.
		Between Subjects			
TL	25.87	4	6.46	.61	.66
SL	282.73	4	70.68	.39	.82
PL	306.56	4	76.64	.49	.74
DL	25.76	4	6.44	.41	.80
L	39.15	4	9.78	.67	.61
		Within Subjects			
TL	2510.78	235	10.84		
SL	42578.44	235	181.18		
PL	36697.16	235	156.15		
DL	3677.03	235	15.64		
L	3418.42	235	14.54		

Note: **P* significant at .05 level. *SS* = Sum of Squares, *df* = Degree of Freedom, *MS* = Mean Square.

IV. DISCUSSIONS AND CONCLUSION

Demographic characteristics play significant roles in leadership behaviour. In fact, in almost every job interview, years of experience in the specific discipline, age, and education level are taken very seriously. However, in this study, no significant differences in leadership styles was identified among supervisors based on any of the demographic characteristics. Many employers have flawed by relying on demographic determinants of age, gender, educational level, and experience on the job alone. To help minimize such flaws, the following recommendations and conclusions are advanced for employers in healthcare and other industries:

- Based on the results of the study, there were no significant differences in leadership styles among participating leaders based on their age, gender, educational level, and experience in years on the job. Instead of relying solely on demographic characteristics in their hiring process, employers may also examine a candidate's willingness level for the job. Demographic characteristics alone in this study did not produce differences in leadership style and a result may not be the sole parameter in candidate selection for leadership positions.
- Demographic characteristics may play a supporting role in assessing leadership behaviour or employability for a leadership position. In many cases, hiring very highly educated person with several years of experience may result in financial liabilities to the hospital in terms of higher pay and benefit demands from such candidates. A leader with a minimum qualification may be groomed to serve effectively in leadership roles with fewer expenses to the hospital.
- Hospital administrators and board of directors of businesses must be open in their selection of leaders, and not fall in a trap of making selections based on gender. From the study, there was no significant difference is leadership styles on gender. Therefore, females must be given opportunity to serve in leadership positions. This recommendation is consistent with the call from Walker (2017)[29] for more women in leadership positions, especially in healthcare.

- In this study, age did not seem to have any effect on leadership styles. Younger leaders should be encouraged and not overlooked. A complimentary mix of younger and older leaders should be encouraged as older and experienced leaders may mentor younger for future positions.

REFERENCES

[1] American Psychological association (n.d.). When the woman is a boss. Retrieved on April 6, 2018 from http://www.apa.org/research/action/boss.aspx

[2] Andersen, J. A.; Hansson, P. H. (2011). "At the end of the road? On differences between women and men in leadership behavior". *Leadership and Organization Development Journal*. *32* (5): 428–441. doi:10.1108/01437731111146550

[3] Appelbaum, S. & Audet, L., & Joanne, C. M. (2003). Gender and leadership? Leadership and gender? A journey through the landscape of theories. *Leadership & Organization Development Journal*. 24. 43-51. 10.1108/01437730310457320.

[4] Burke, S., & Collins, K. M. (2001) "Gender differences in leadership styles and management skills", *Women in Management Review*, *16*(5), 244 - 257, https://doi.org/10.1108/09649420110395728

[5] Bhargava, R. K., & Anbazhagan, S. (2014). The Influence of age and gender on the leadership styles. *IOSR Journal of Business and Management*, *16*(1), 2319-7668

[6] Charanjit, S. R. (2017). The importance of leadership to organizational success. Retrieved from *https://catalyst.nejm.org/importance-leadership-skills-organizational-success/*

[7] Cliff, J. E. (2005). "Walking the talk? Gendered rhetoric vs. action in small firms". *Organization Studies*, *26*(1), 63–91. doi:10.1177/0170840605046490.

[8] Carnes, N., & Lupu, N. (2016). "What good is a college degree? Education and leader quality reconsidered," *The Journal of Politics*, *78*(1), 35-49. doi: 10.1086/683027

[9] Ejaz, S., Rehman, K., & Zaheer, A (2009). Evaluating effective leadership qualities of managers in day-to-day work of banking sector in Pakistan. *International Journal of Management & Marketing Research (IJMMR)*, *2*(1), 103-111. Retrieved from EBSCOhost.

[10] Eren, E., & Kurt, A (2011). Technological leadership behaviour of elementary school principals in the process of supply and use of educational technologies. Education, 131(3), 625.

[11] Gliem, J. A, & Gliem, R. R. (2003). Calculating, interpreting, and reporting Cronbach's alpha reliability coefficient for Likert-Type scales. Retrieved from http://pioneer.netserv.chula.ac.th/~ppongsa/2013605/Cronbach.pdf

[12] Greaves, C. (2012). Do older leaders need to be wise? The relationship between age, wisdom, and leadership. Retrieved from https://espace.library.uq.edu.au/view/UQ:275711

[13] Greenland, S., Senn, S. J., Rothman, K. J., Carlin, J. B., Poole, C., Goodman, S. N., & Altman, D. G. (2016). Statistical tests, *P* values, confidence intervals, and power: a guide to misinterpretations. *European Journal of Epidemiology*, *31*, 337–350. http://doi.org/10.1007/s10654-016-0149-3

[14] Green, M. T.; Chavez, E.; Lopez, Debra M.; & Gonzalez, F. Y. (2011). "The Impact of education, gender, age and leadership experience on preferences in leadership," *Journal of Business & Leadership, Research, Practice, and Teaching*, *7*(1), 2005 – 2012.

[15] Hana, J., & Kirkhaug, R. (2014). Physicians' leadership styles in rural primary medical care: How are they perceived by staff? *Scandinavian Journal of Primary Health Care*, *32*(1), 4–10. http://doi.org/10.3109/02813432.2013.874083

[16] Hersey, P., Blanchard, K. H., & Johnson, D., E. (2013). *Management of organizational behavior: Leading Human resources.* (10th ed.). Englewood Cliffs, NJ: Prentice- Hall.

[17] Hudson Group (n.d.). The impact of gender on leadership styles. Retrieved on April 6, 2018 from http://au.hudson.com/latestthinking/infographics/impact-of-gender-on-leadership-styles

[18] Jabeen, S. & Saeed, A. M., (2013). Decision making styles of university leadership. *Dialogue (1819 – 6462). 8*(3), 273 – 284.

[19] Kearney, E., & Gebert, D. (2008). Managing diversity and enhancing team outcomes: the promise of transformational leadership. *Journal of Applied Psychology*, *94*(1), 77-89. doi: 10.1037/a0013077

[20] Laurent, T. G., & Bradney, D. A (2007). Leadership behaviors of athletic training leaders compared with leaders in other fields. *Journal of Athletic Training, 42*(1), 120-125.

[21] Kent, T. W.; Schuele, U. (2010). "Gender Differences and Transformational Leadership Behavior: Do Both German Men and Women Lead in the Same Way?" *International Journal of Leadership Studies. 6* (1): 52–66.

[22] Nash, M., Davies, A., & Moore, R. (2017). What style of leadership do women in STEMM fields perform? Findings from an international survey. *PLoS ONE 12*(10): e0185727. https://doi.org/10.1371/journal.pone.0185727

[23] Ng, T. H., & Feldman, D. C. (2010). The relationships of age with job attitudes: A meta-analysis. *Personnel Psychology*, *63*(3). https://doi.org/10.1111/j.1744-6570.2010.01184.x

[24] Pew Research Center (2015). Women and leadership. Chapter 2: What makes a good leader, and does gender matter? Retrieved from http://www.pewsocialtrends.org/2015/01/14/chapter-2-what-makes-a-good-leader-and-does-gender-matter/

[25] Xirasagar, S., Samuels, M. E., & Curtin, T. F. (2006). Management training of physician executives, their leadership style, and care management performance: An empirical study. The *American Journal of Managed Care*, *12* (2), 101-108.

[26] Turner, N., Barling, J., Epitropaki, O. (2002). Transformational leadership and moral reasoning. *Journal of Applied Psychology*, *87*(2), 304-311.

[27] Walker, T. (2017). More female leadership: A different kind of healthcare reform. Retrieved on April 8, 2018 from https://www.statnews.com/2017/07/10/female-leadership-health-care-reform/

[28] Zacher, H., Rosing, K. & Frese, M. (2015). Age and Leadership: The moderating role of legacy beliefs. Retrieved from http://bschool.nus.edu/departments/ManagementNOrganization/publication/MichaelFrese Journal/398.pdf

[29] Zuckerman, A. M. (2012). Healthcare strategic planning (3rd). Chicago, IL: HAP

[30] Stout-Stewart, S. (2005). Female community college presidents: Effective leadership patterns and behaviors. Community College Journal of Research and Practice, 29, 303-315.