Arabian Gulf Journal
Humanities and Social Studies

Leadership style of the nursing director in achieving professional nursing competence among nurses working in government hospitals in the Gaza governorates

نمط قيادة مدير التمريض في تحقيق الكفاءة التمريضية المهنية لدى الممرضين العاملين في المستشفيات الحكومية في محافظات غزة

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Arabian Gulf Journal
Humanities and Social Studies

Abstract:

Background: Leadership style is one of the critical issues in stimulating professionalism behavior and prepare it to meet the new changes in the working environment or the implementation of roles and tasks according to the standards of quality and excellence.

Objective: To assess role of nursing manager leadership style in achieving the nursing professionalism among nurses working at governmental hospitals in Palestine

Methods: This study used a cross-sectional, descriptive, analytical design and was conducted between Jun. 2022 and Apr. 23. After getting ethical approvals, study targeted the nurses in major governmental hospitals, where target population is classified into two groups: the first group was Nursing Manager (NM) which included head nurses and nursing supervisors and the second group was subordinate nurse (SN). All NM were included in the study (263) and random sample was selected for the SN group (378). The response rate for NM was 91.3% and for the SN it was 92.6%. The researcher developed questionnaire for both NM and SN to reflect the reality of leadership Style for NM and their impact in achieving the professionalism for SN. The questionnaire included: socio-demographic variable, organizational variable and study domains.

Results: Most of the sample were Male, they were representing 67.3% of male and 32.7% were female. the age group up to 30 years about 46.6% in SN, but in NM most of the age group more than 31 years. About 88.30% of respondents were married, highest participation from Gaza Governorate, while lowest participation from Rafah governorate. Regarding academic qualifications about 68.6% from SN were getting bachelor degree. While NM that most of them from bachelor 63.3% and 33.3% have postgraduate. According to the years of experience the majority of SN 62.3% had work experience less than 10 years, while NM about 54.1% of the supervisors were having experience from 11-20 years and 35.5% of them had experience more than 21 years. The prevalent leadership style practice by nursing supervisors and head nurse is the" Transactional leadership" with a weighted mean of 74.5%. the relationship between nursing manager leadership style and nursing professionalism, the research used liner regression. Results showed that the independent variables (Transformational leadership, Transactional leadership, Participatory Leadership) have a significant impact on nursing professionalism, (P-Value<0.05), and the coefficient of determination is equal to 0.827, which means that 82.7% of the change in the nursing professionalism can be explained by the change in nursing manager leadership style. The relationship between nursing manager leadership style, professionalism and socio-demographic variables, there is no relationship between socio-demographic variables and this variable.

Recommendation: The researcher recommends Enhance the nursing work environment by practicing appropriate leadership styles and empowering strategies, including greater participation of nursing staff in the decision-making process. Ultimately, more effective nursing management should result in improved nursing staff creativity, job satisfaction, and work commitment all that can led to professionalism.

Keywords: Leadership Style, Nursing Professionalism, Governmental Hospitals, Transformational Leadership, Transactional Leadership.

الملخص:

الخلفية :يُعد نمط القيادة أحد القضايا الجوهرية في تحفيز السلوك المهني وإعداده لمواكبة التغيرات الجديدة في بيئة العمل أو لتنفيذ الأدوار والمهام وفق معايير الجودة والتميز.

الهدف :تقييم دور نمط القيادة لدى مدير التمريض في تحقيق المهنية التمريضية لدى الممرضين العاملين في المستشفيات الحكومية في فلسطين.

المنهجية :استخدمت هذه الدراسة تصميمًا مقطعيًا وصفيًا تحليليًا، وأُجريت خلال الفترة من يونيو 2022 إلى أبريل 2023. وبعد الحصول على الموافقات الأخلاقية، استهدفت الدراسة الممرضين العاملين في المستشفيات الحكومية الرئيسية، حيث قُسّم مجتمع الدراسة إلى مجموعتين: المجموعة الأولى هي مدراء التمريض (NM) وتشمل رؤساء الأقسام والمشرفين التمريضيّين، والمجموعة الثانية هي الممرضون التابعون (SN). تم تضمين جميع مدراء التمريض في الدراسة وعددهم (263)، كما تم اختيار عينة عشوائية من الممرضين التابعين بلغ عددها (378). بلغت نسبة الاستجابة لمدراء التمريض 91.3%، وللممرضين التابعين 92.6%. قام الباحث بتطوير استبانة لكلا المجموعتين لتعكس واقع نمط القيادة لدى مدراء التمريض وأثره في تحقيق المهنية التمريضية لدى الممرضين التابعين. وتضمنت الاستبانة: المتغيرات الاجتماعية الديموغرافية، والمتغيرات التنظيمية، ومحاور الدراسة.

النتائج :أظهرت النتائج أن معظم أفراد العينة كانوا من الذكور بنسبة 67.3% مقابل 32.7% من الإناث. وكانت الفئة العمرية حتى 30 سنة تمثّل حوالي 46.6% لدى الممرضين التابعين، بينما كانت غالبية مدراء التمريض من الفئة العمرية أكثر من 31 سنة. كما أن نحو 88.30% من المشاركين كانوا متزوجين. وكانت أعلى نسبة مشاركة من محافظة غزة، بينما كانت أقل نسبة من محافظة رفح. وفيما يتعلق بالمؤهلات العلمية، تبين أن 68.6% من الممرضين التابعين يحملون درجة البكالوريوس، بينما كان معظم مدراء التمريض من حملة البكالوريوس بنسبة 63.3%، و33.3% منهم يحملون دراسات عليا. أما من حيث سنوات الخبرة، فقد تبين أن غالبية الممرضين التابعين (62.3%) لديهم خبرة تقل عن 10 سنوات، بينما لدى مدراء التمريض كانت نسبة 54.1% ممن لديهم خبرة تتراوح بين 11–20 سنة، و35.5% لديهم خبرة تزيد عن 21 سنة. كما أظهرت النتائج أن النمط القيادي الأكثر ممارسة من قبل المشرفين التمريضيّين ورؤساء الأقسام هو **القيادة التبادلية (Transactional Leadership)** بمتوسط مرجح بلغ 74.5%.

ولدراسة العلاقة بين نمط قيادة مدير التمريض والمهنية التمريضية، استخدم الباحث تحليل الانحدار الخطي. وأظهرت النتائج أن المتغيرات المستقلة (القيادة التحويلية، والقيادة التبادلية، والقيادة التشاركية) لها تأثير معنوي في المهنية التمريضية عند مستوى دلالة (P-Value<0.05).كما بلغ معامل التحديد 0.827، مما يعني أن 82.7% من التغير في المهنية التمريضية يمكن تفسيره من خلال التغير في نمط قيادة مدير التمريض. كما أظهرت النتائج عدم وجود علاقة ذات دلالة إحصائية بين المتغيرات الاجتماعية الديموغرافية وهذه المتغيرات.

التوصيات :يوصي الباحث بتعزيز بيئة العمل التمريضي من خلال ممارسة أنماط قيادية مناسبة وتطبيق استراتيجيات التمكين، بما في ذلك زيادة مشاركة الطاقم التمريضي في عملية اتخاذ القرار. ومن شأن الإدارة التمريضية الأكثر فاعلية أن تسهم في تحسين الإبداع لدى الممرضين، ورفع مستوى الرضا الوظيفي، وتعزيز الالتزام بالعمل، الأمر الذي يقود في النهاية إلى تحقيق المهنية التمريضية.

الكلمات المفتاحية : نمط القيادة، المهنية التمريضية، المستشفيات الحكومية، القيادة التحويلية، القيادة التبادلية.

Chapter 1

Introduction

Giving nurses freedom to work, independence, entrepreneurship and participation contributes greatly to enhancing their Nursing Professionalism; empowering nurses stimulates creativity and professionalism. Several studies by a number of researchers have confirmed such as (Wuerz, 2017) and (Alyami, 2013) noted that freedom of decision-making, freedom from regulatory restrictions and work constraints can enhance the creative energy of employee, and that the most creative staff are spotters who have a tendency towards curiosity, wishing towards learning, and have high cognitive flexibility, are willing to take risks and are more determined to face obstacles and challenges.

Therefore, it is relevant and timely to explore how nurses perceive their attitudes toward professionalism as well as factors that influence these attitudes as a means to enhance professional behaviors like leadership. So, members of a profession have an obligation to contribute to the advancement of the profession and to the development of its members at all levels. Nursing is one of the world's most diverse occupations and historically, nurses have struggled to determine whether professionalism is present or absent from nursing (Tanaka, 2014).

In the Palestinian health care system, there is a great burden over the nurses especially in the hospitals due the unstable political situation and the great strain on the health services, so there is pressing need to knowing professionalism of nursing to support nurses particularly during crisis and to decrease work stress and tension. Unclear job descriptions for health care providers, especially for the nursing profession, make nurses in a dilemma, where connection and communication are more difficult and complex, and this affects the professionalism of the nurse (Adams et al., 2019).

Research problem:

Leadership style is one of the critical issues in stimulating professionalism behavior and prepare it to meet the new changes in the working environment or the implementation of roles and tasks according to the standards of quality and excellence. Nursing leader can impact overall professionalism for nursing. So, Nursing leaders in the health care environment need to understand the influence of various leadership styles on nurses. Leadership styles may impact the overall discipline of nursing. Nursing leaders who are able to inspire, engage, and positively influence nurses at various levels can help change nursing attitudes, behaviors and professionalism. These attitudes and behaviors not only shape the discipline, but will impact the care provided to patients and families.

Nurse management and leadership research dealt with the upper and middle levels of management as well as the nature of management and leadership styles used in management. Few studies have examined the leadership style of nursing manager and the level of professionalism. Therefore, this study came to identify the nursing manager leadership style in government hospitals and their role in achieving nursing professionalism.

Specific Objectives

To detect the relationship between nursing manager leadership style and achieving the nursing professionalism among nurses in governmental hospitals in Gaza Strip.

To identify the relationship between nursing manager leadership style and socio-demographic variables in Governmental Hospitals in Gaza Strip.

Research questions:

What is the nursing manager leadership style from point of view SN?

What is the level of nursing professionalism from point of view NM?

Is there a relationship between nursing manager leadership style and nursing professionalism?

Justification of the study:

The growing complexity of health care has placed additional burdens on nurses, who make up the largest healthcare workforce, to resolve ongoing challenges in an environment where patient care requires interfaces with multidisciplinary teams, technology, systems, procedures, and patients' unique

health care needs. Therefore, nursing professionalism is foundational to achieving the primary goals of nursing practice: optimal patient outcomes, optimal patient satisfaction, and effective collaborative practice within health care delivery teams.

Definition of Terms

This part will contain the definition of terms included in this study

Nursing:

Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations (American Nurses Association, 2019).

Nurse Managers

Theoretical Definition: An individual or person that has direct responsibility for staff nurses and quality of patient care delivery in one or more hospitals units (ANA, 2019).

Operational Definition: A nurse manager is the person a staff nurse directly reports to. The nurse manager has 24-hour accountability and responsibility for the operation and management of the staff nurse's acute care unit and in this study nurse manager include nurse supervisor and head nurse.

Nursing Supervisors:

Is the individual can be regulating activities directed toward the staff nurse, nursing care of clients, and Application and implementation of over-all goals and policies within the aims of the health agency and provision of organization, personnel, and facilities to accomplish these goals in the most effective and economical manner through cooperative efforts of all members of the staff, coordinating the service with other departments of the institution (Cherie & Gebrekidan, 2005)

Subordinate Nurse

Theoretical Definition: A person educated to provide direct patient care in hospital settings (American Nurses Association (ANA), 2019).

Operational Definition: Registered nurse, licensed to practice nursing, works alongside health service providers in hospitals that provide health care and is not currently involved in guidance.

leadership

Are staff nurse behaviors that provide direction and support to clients and the health care team in the delivery of patient care. A clinical leader is a registered nurse who influences and coordinates patients, families and health care teams for the purpose of integrating the care they provide to achieve positive patient outcomes (Patrick et al, 2011).

Leadership Style

Theoretical Definition: Leadership style is the manner and approach a leader uses to influence followers to achieve goals (Northouse, 2012). It was measured in terms of the following leadership styles: (transformational leadership, transactional leadership, participatory leadership, and servant leadership).

Chapter 2

Conceptual Framework and Literature Review

Nursing Manager Leadership Style

(Transformational – Transactional – Participatory Leadership)

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Nursing Professionalism

(Knowledge – Values – Autonomy – Ethics)

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Socio-demographic Variables

(Age, Gender, Education, Experience, etc.)

Study design

This study utilized descriptive, analytical, cross-sectional design. This design is appropriate for describing the status of phenomena or for describing relationships among phenomena and involves the collection of data once the phenomena under study are captured during a single period of data collection (Polit and Beck, 2012).

To investigate the research questions about the role nursing manager leadership style in achieving the nursing professionalism among nurses working at governmental hospitals in Palestine, a quantitative survey approach has been adopted. The research technique was a chosen as questionnaire research to measure objectives & answer study questions.

Setting of the study

This study conducted at major governmental hospitals in GS. The researcher selected major hospital from each governorate, the select hospitals: European Gaza hospital, Nasser medical complex, Shohadaa Al-Aqsa hospital, Al-Shifa medical complex and Indonesian hospital. Each hospital has more than 101 beds is considering a major hospital (MoH, 2018).

Study population

This study population consisted from both the SN and NS working at the selected governmental hospitals:

The first target population are SN who are working at the selected governmental hospitals, the total number of nurses working in these governmental hospitals is about 1710 nurses according to the records of General Administration of Nursing 2022.

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The second target population are NS whom are working at the selected governmental hospitals in Gaza governorates. The NM. The total number of NS in these hospitals is 263 (115 NS and 148 HN) according to the records of General Administration of Nursing 2022.

Sample size and sampling method

For SN: The total number of SN in the selected hospitals (target population) was 1710 nurses; thus, the sample size about (378) SN at 95% confidence level. http://www.raosoft.com/samplesize.html

For NS: The researcher selected all NS in the target population for NS group (Census sample, all target population). The total number of NS in the selected hospitals was (263). NS divided into: (115) NS and (148) HN.

The researcher used the census survey method with NS to collect data from all part of study population, and he used the purposive sampling method with SN.

Period of the study

The study conducted at the mid of year 2022. After obtaining approval for the study proposal from the administrative letter sent to the General Directorate of Human Resource Development at MoH in Oct. 2022 to offer facilitation for conducting the study in MoH hospitals. Data collected started from first Jan. 2023. Data analysis and discussion is finished at else Mar, 2023 to first Apr. 2023. The study took approximately 9 months in total from its beginning.

Eligibility Criteria

Inclusion Criteria:

For NS: All NS and HN who were working at the selected governmental hospitals in Gaza governorates.

For Subordinate nurse:

Formally Nurse.

Work in all shifts

Work in department more than one year.

Exclusion Criteria:

Nurses working at the selected governmental hospitals who were not formally employed (volunteers, internship or on job creation program).

Nursing working in morning shift.

Nurse work in department less than one years.

Study Tools

The researcher developed the questionnaire, it was initially designed based on the extensive literature review of previous studies, then two questionnaires were developed and validate by experts .

The questionnaire was provided with a covering letter explaining the purpose of the study, the way of responding, the aim of the research and the security of the information in order to encourage a high response. there exist a copy of the questionnaire in both Arabic and English languages.

The questionnaire included multiple choice questions which are used widely in the questionnaire. The variety in these questions aims to meet the research objectives, and to collect all the necessary data that can support the discussion, results and recommendations in the research. The questionnaire self-developed was designed in the Arabic language and consisted of close-ended questions. The questionnaires will be receiving in simple language, avoiding duplication and parallel questions.

Subordinate nurse's questionnaire

First questionnaire investigated from the perspective of subordinate nurse's (Nurse manager Leadership style). It also included socio-demographic data including: sex, age, marital status, place of residency, academic qualification. Organizational data included place of work, nursing experience.

Questionnaire of leadership style:

1. Transformational leadership (10 items)

2. Transactional leadership (10 items)

3. Participatory Leadership (10 items)

NM questionnaire

The second questionnaire for NM was investigated by professionalism of the SN from point of view of NM. It also contained socio-demographic data including: sex, age, marital status, place of residency, academic qualifications and organizational data which includes: place of work and years of experiences in nursing .

Questionnaire of professional creativity contain multi-domains:

1. Problem solving

2. Confront of challenges & risks

3. Decision making

The headings of the dimensions were removed from the questionnaire during the collection of the sample, to ensure the credibility of the answer, and to avoid bias to some dimensions from the other.

The researcher has used a questionnaire to measure the responses of questionnaire's items as in the following, where 1 represented "the lowest scale" and 5 represented "the highest scale", as the case might be.

Table 3.1: Response Value

Response	Very low	Low	Moderate	High	Very high
Degree	1	2	3	4	5
Mean	1-1.8	1.8-2.6	2.6-3.4	3.4-4.2	4.2-5
RII%	20-36%	36-52%	52-68%	68-84%	84-100%

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Validity of study instruments:

Face Validity

To increase the response rate, it is important to maintain good face validity for the questionnaire. The researcher constructed the questionnaire in an appealing design. And researcher asked the participants in the pilot study about their opinions regarding the structure, shape, clarity and format.

Content Validity

The questionnaire was evaluated by experts to validate the questions and their relation to the domains that reflect the study and their comments were taken into consideration and modification was performed accordingly (Annex 5) shows the list of arbitrators. Many useful and important modifications and comments were made and taken into consideration for the questionnaire.

Statistical Validity

To ensure the validity of the questionnaire, two statistical tests should be applied. The first test is internal validity (Pearson test) which measure the correlation coefficient between each item in the dimension and the whole dimension. The second test is structure validity (Pearson test) that used to test the validity of the questionnaire structure by testing the validity of each dimension and the validity of the whole questionnaire. It measures the correlation coefficient between one dimension and all the dimensions of the questionnaire that have the same level of similar scale.

Internal validity of the first questionnaire (*Subordinate Nurses*)

Table 3.2 below shows the correlation coefficient and *p*-value for each item. are less than 0.05, so the correlation coefficients of each item are significant at α= 0.05. Thus, it can be said that the items of each item are consistent and valid to be measured what it was set for.

Table 3.2: Correlation coefficient between each item in the dimension and

the whole dimension of Leadership styles

No.	Dimension	Correlation coefficient	p-value
	1. Transformational leadership		
1.	The nursing supervisor is proud of his relationship with the nurses.	0.725	0.000*
2.	The nursing supervisor treats employees with respect.	0.724	0.000*
3.	The nursing supervisor deals with a high level of trust.	0.762	0.000*
4.	Human values transcend when the nursing supervisor communicates with others to achieve the desired goals.	0.718	0.000*
5.	The nursing supervisor is interested in developing and expanding the perception and creative thinking of nurses.	0.801	0.000*

No.	Dimension	Correlation coefficient	p-value
6.	The nursing supervisor spreads optimism about the future among nurses.	0.652	0.000*
7.	The nursing supervisor accepts multiple perspectives to face the problems they face.	0.674	0.000*
8.	The nursing supervisor makes innovative suggestions in the field of supervisory and administrative work.	0.666	0.000*
9.	The nursing supervisor tries to develop the capabilities of nurses.	0.797	0.000*
10	The nursing supervisor develops the implementation of work procedures in order to improve performance.	0.701	0.000*
2.Transactional leadership			
11	The nursing supervisor provides assistance to nurses when asked.	0.631	0.000*
12	The nursing supervisor expresses satisfaction with the performance of nurses in the field of carrying out tasks.	0.658	0.000*
13	The nursing supervisor takes care of the initiatives offered by nurses.	0.728	0.000*
14	Easily accessible nursing supervisor in times of crisis or when needed.	0.798	0.000*
15	The nursing supervisor effectively leads and guides nurses.	0.751	0.000*
16	The nursing supervisor deals with nurses' mistakes realistically.	0.740	0.000*
17	The nursing supervisor responds to the nurses' questions and responds to them in a convincing manner.	0.639	0.000*
18	The nursing supervisor makes decisions on time and within the interest of the work.	0.759	0.000*
19	The nursing supervisor is obligated to carry out the tasks in accordance with the rules and regulations.	0.674	0.000*
20	The nursing supervisor follows up on the completion of the work and its results on an ongoing basis.	0.789	0.000*
3.Participatory Leadership			
21	The nursing supervisor develops good relations with nurses.	0.685	0.000*
22	The nursing supervisor provides an acceptable and comfortable atmosphere for nurses and strives for it.	0.634	0.000*

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No.	Dimension	Correlation coefficient	p-value
23	The nursing supervisor solves the nurses' problems that require his intervention.	0.724	0.000*
24	The nursing supervisor strives to provide for the needs of nurses.	0.718	0.000*
25	The nursing supervisor seeks to win over nurses by providing their own requirements.	0.729	0.000*
26	The nursing supervisor deals flexibly with the regulations and instructions in the interest of nurses.	0.741	0.000*
27	A nursing supervisor avoids exclusivity in making important decisions.	0.785	0.000*
28	The nursing supervisor participates in social events for nurses.	0.764	0.000*
29	The nursing supervisor is keen to build trust between him and his nurses.	0.647	0.000*
30	The nursing supervisor gives nurses the opportunity to give their opinions on important decisions and work in a team spirit.	0.698	0.000*

Structure validity of the first questionnaire (*Subordinate Nurses*):

Structure validity is the second statistical test that used to test the validity of the whole questionnaire. It measures the correlation coefficient between one dimension and all of the other dimensions of the questionnaire that have the same level of rating scale (five-point Likert scale). As shown in table 3.3, the significance values are less than 0.05. Thus, it can be said that the dimensions are valid to be measured what it was set for to achieve the main aim of the study.

Table 3.3: Correlation coefficient between each dimension and the whole

dimensions of leadership styles

Leadership style	Correlation coefficient	P-value
Transformational leadership	0.714	0.000*
Transactional leadership	0.687	0.000*
Participatory Leadership	0.789	0.000*

Internal validity of the second questionnaire (*Nursing Supervisor's*)

Table 3.4 below shows the correlation coefficient and *p*-value for each item. are less than 0.05, so the correlation coefficients of each item are significant at α= 0.05. Thus, it can be said that the items of each item are consistent and valid to be measured what it was set for.

Table 3.4: Correlation coefficient between each item in the dimension

and the whole dimension of professionalism

No.	Dimension	Correlation coefficient	p-value
Problem solving			
1	Nurse forms an integrated perception of problems through discussion with colleagues at work	0.728	0.000*
2	Nurse can solve problems countered by non-traditional solutions.	0.711	0.000*
3	Nurse tries to develop plans and procedures to reduce problems at work.	0.635	0.000*
4	Nurse expects problems during work before they occur.	0.602	0.000*
5	Nurse analyzes the causes of the problem accurately.	0.587	0.000*
6	Nurse proposes innovative solutions to solve work problems in the light of available alternatives	0.647	0.000*
Confront of challenges & risks			
7	Nurse looks at the best ways to accomplish tasks if there are many options, not the easiest ones.	0.659	0.000*
8	Nurses encourage each other to innovate despite the risks they may face.	0.662	0.000*
9	Nurses prefer to work with a team that takes risks	0.542	0.000*
1	Nurses prefer to work with a team that loves achievement	0.748	0.000*
1	Nurses take advantage of opportunities to handle risks with distinction and precision	0.639	0.000*
1	Nurses apply procedures like a protocol; No matter how difficult	0.674	0.000*
Decision making			
1	Nurse carries out the opinion of their colleagues when they make a decision by a majority & be correct	0.755	0.000*
1	Nurse makes sound decisions to solve problems in proportion to the job situation	0.725	0.000*
1	Nurse actively participates in the decision-making process of the department within the scope of job descriptions	0.738	0.000*
1	Nurse determines the requirements for effective implementation of decisions regarding patient care	0.629	0.000*
1	Nurse distributes work among their team members according to their abilities and skills	0.648	0.000*

No.	Dimension	Correlation coefficient	p-value
1	Nurse supports the ideas of colleagues to develop work and improve services	0.731	0.000*

Structure validity of the second questionnaire (*nursing supervisor's*):

As shown in table 3.5, the significance values are less than 0.05. Thus, it can be said that the dimensions are valid to be measured what it was set for to achieve the main aim of the study.

Table 3.5: Correlation coefficient between each dimension and the

whole dimensions of professionalism

Professionalism	Correlation coefficient	P-value
Problem solving	0.758	0.000*
Decision making	0.719	0.000*
Confront of challenges & risks.	0.727	0.000*

Reliability of study instruments

The questionnaire reliability was measured by applying Cronbach's Alpha test on the questionnaire dimensions. This test is used to measure the reliability of the questionnaire dimensions and the mean of the whole dimensions of the questionnaire. The value of Cronbach's Alpha coefficient lies between (0-1), the higher the value of Cronbach's Alpha coefficient the higher the reliability of the measured items.

The resultant value of Cronbach's Alpha coefficient of each dimension is as shown in table 3.6. The value of Cronbach's Alpha coefficient for professionalism (0.754), and for leadership style (0.783), which is considered relatively high values reflecting high reliability of questionnaire paragraphs. This indicates excellent reliability value for the complete questionnaires.

Table 3.6: Cronbach's Alpha for each dimension of the questionnaire and the entire dimension

No.	Dimension	Cronbach's Alpha
Professionalism		**0.754**
1.	Problem solving	0.725
2.	Decision making	0.820
3.	Confront of challenges & risks.	0.734
Leadership style		**0.783**
1.	Transformational leadership	0.775
2.	Transactional leadership	0.705
3.	Participatory Leadership	0.769

Data Collection

Data collected by using self-administer questionnaire. A questionnaire related to leadership styles was distributed to nurses working in the five government hospitals to assess leadership style, while a questionnaire related to professional creativity was distributed to NM in order to assess the professionalism of nurses, and then receiving them after completion of the questionnaires. The average time for filling the questionnaire about 10 minutes. The covering letter of the questionnaire outline the title and the purpose of the study and the identity of the researcher.

Response Rate

Subordinate nurse's part: the total number of target population was 378 subjects. 350 of them are positively responded with response rate of 92.6%.

NM part: the sample size was 263 subjects. 240 of them are positively responded with response rate of 91.3%. These response rates are considered satisfactory.

Data Management

Data Entry:

The collected data entered into the computer software "Statistical Package for Social Sciences" SPSS program by the researcher after coding of the questions and then cleaning of the entered data.

Data Analysis:

Analysis of the data was undertaken using IBM SPSS Statistics (Statistical Package for the social Science) Version 26 (IBM). The following quantitative measures were used for the data analysis:

  – Reviewing the filled questionnaire.

  – Coding the questionnaire

  – Data entry model.

– Defining and recoding the continuous variable.

– Data cleaning.

– Frequency tables of all variables.

– Frequencies and Relative frequency

– Measures of central tendency (mean), and measurement of dispersion (standard deviation).

– Relative Important Index (RII)

– Pearson's correlation coefficient

– One sample t test

– Independent sample t test.

– One-way Analysis of Variance (ANOVA).

Chapter 4

Results and Discussion

Introduction

This chapter illustrates the results of a statistical analysis of the data, including descriptive analysis that presents the socio-demographic characteristics of the study sample and answers to the study questions. The researcher used simple statistics including frequencies, means, and percentages, also independent sample t-test, One-way ANOVA, as well as Pearson correlation were used.

Socio-demographic characteristics of participants

The importance of demographic information to meaningful quantitative analysis cannot be undermined. Background and demographic information from respondents were also forked. This section analyzed the demographic information of 240 (Nursing supervisor's), and 350 (Subordinate nurses) as shown in table 4.1.

Table 4.1: Distribution of study participants according

socio-demographic characteristics

Variable	Categories	Subordinate nurses N= 350		Nursing supervisor's N= 240	
		Frequency	Percent	Frequency	Percent
Gender	Male	202	57.7	195	81.3
	Female	148	42.3	45	18.7
Age	20-30	163	46.6	25	10.4

Variable	Categories	Subordinate nurses N= 350		Nursing supervisor's N= 240	
		Frequency	Percent	Frequency	Percent
	31-40	148	42.3	82	34.2
	41-50	21	6.0	68	28.3
	51-60	18	5.1	65	27.1
Marital Status	Not married	65	18.6	4	1.7
	Married	285	81.4	236	98.3
Academic Qualification	Diploma	83	23.7	-	-
	Bachelor	240	68.6	152	63.4
	Postgraduate	27	7.7	88	36.6
Years of Experience	1-10	218	62.3	25	10.4
	11-20	117	33.4	130	54.1
	21-35	15	4.3	85	35.5

Table 4.1 shows the frequencies and percentages for demographic variables of the SN and NM. According to figure 4.1, clarify about 67.3% of participants were male nurse and 32.7% were female nurse. This percentage distributor to SN and NM, for SN male were 57.7% and female 42.3%, while NM male 81.3% and female 18.7%. These findings were consistent with the findings of Abate et al (2021), Ahmed (2015) and Al Jabaly (2014) which showed the percentage of male nurse more than females nurse in public hospital. The high number of males among nursing supervisors is due to the nature of the nursing supervisor's work, which is burdened with responsibilities and obligations according to the job description of the nursing supervisor, and this is directly reflected in the selection of females in nursing supervision, So, they were chosen them to head nurse in female department.
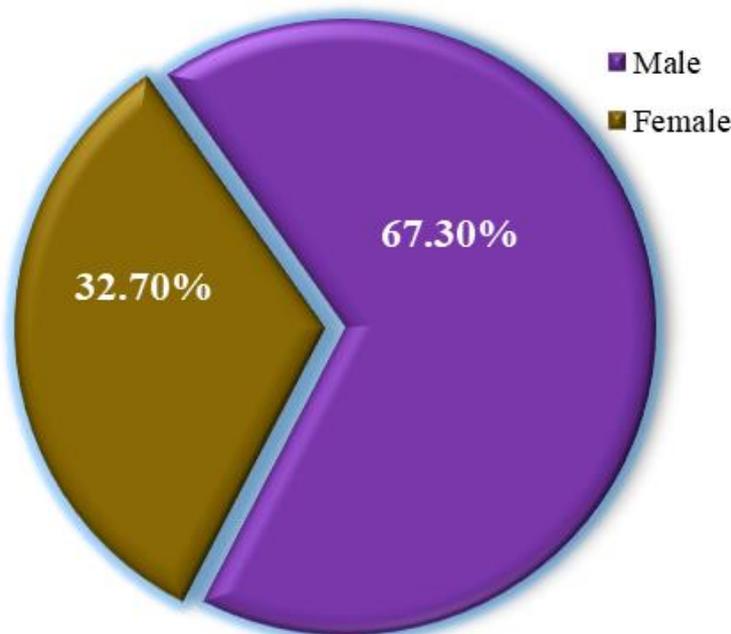
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Figure 4.1: Distribution of participant according Gender

Regarding Age group, most of the age group up to 40 years about 88.9% in SN, while in NM most of the age group more than 40 years with percentage 55.4%. However, age group of 31 to 40 years represented 34.2%, Where this percentage was represented from the head nurse.

About 82% of SN were married and 18% were unmarried (single, divorced and widows). and about 98% of NM were married and 2% were not- married.
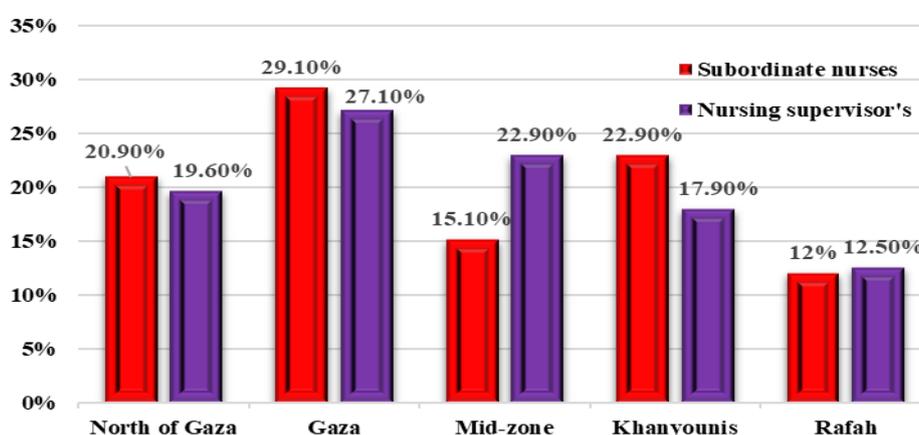
Figure 4.2: Distribution of participant according place of residency

Regarding the residency place figure 4.2 clarify about highest participation from Gaza Governorate, while lowest participation from Rafah governorate. The researcher explains that Gaza governorate is the main governorate in the Gaza Strip and has the largest population density, in addition to that the largest medical complex in Palestine is located in Gaza governorate, while Rafah governorate has only a small region.
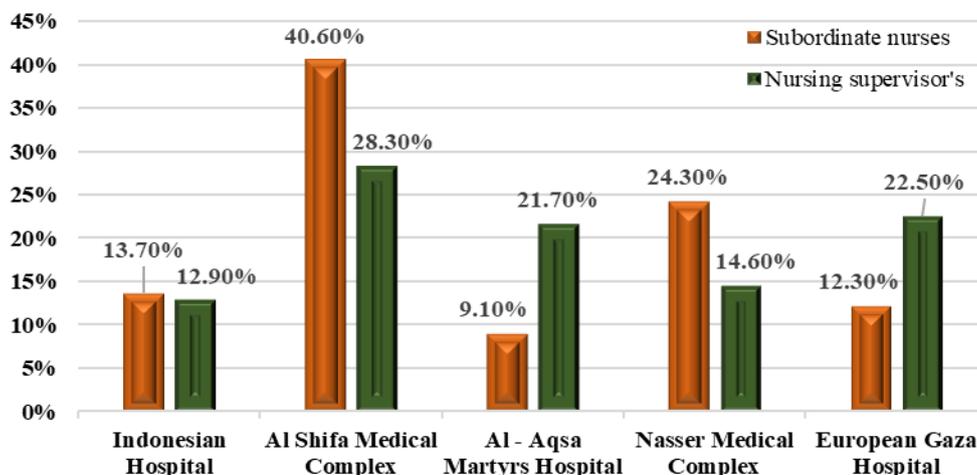

Figure 4.3: Distribution of participant according hospital

Figure 4. 3 shows that highest participation rate in SN was for Shifa Medical Complex with 40.6%, while Nasser Medical Complex had 24.3% participation, while the participation in the Indonesian hospital with 13.7% participation. European Gaza Hospital had 12.3% participation. Finally, the participation rate in Al-Aqsa Martyrs Hospital was 9.1%, the lowest participation rate.

Regarding academic qualifications clarify table 4.1 about 68.6% from SN were getting bachelor degree. While 23.7% had diploma certificate, whilst, 7.7% from them had postgraduate qualification.

According to academic qualifications of NM that most of them from bachelor 63.4%, while 36.6% have been holding postgraduate. This result agrees with study of Ahmed (2015) findings which showed that 64.5% has a bachelor degree; and differs somewhat with Hassan (2011) findings which showed that 43.6% has a bachelor degree. This reflects an increase in the nurses' educational level and the positive attitudes of nurses towards the development of their qualifications and could be explained by the different upgrading programs which are enabled many nurses to hold granted a bachelor degree.

According to the years of experience the majority of SN (62.3%) had work experience less than 10 years, while 33.4% of participants had a total work experience ranged from 11 to 20 years, and other (4.3%) had a total work experience of more than 20 years .Where the percentage of participants who have more than 20 years of experience is low to(4.3%) due to the large workload in hospitals, which leads to the elderly requesting transfer from hospitals to primary care or places with less work pressure due to advanced age . The high percentage (64%) who had work experience less than 10 years could be explained as a result of the MoH has recruited a large number of new nurses to confront the COVID -19 epidemic. These findings are congruent with the results of Ahmed (2015) and Radwan (2012) that showed nearly 50% of study sample had work experience of less than 10 years.

Regarding experience for NM about 54.1% of the supervisors were having experience from 11-20 years and 35.5% of them had experience more than 21 years. This result indicates that the NS had satisfactory years of experience in nursing and this is considered as a strong point in the supervisors' characteristics. Supervisors need to be experts in the field of supervision to be as a good reference for nursing in clinical settings. the NS were having experience from less than 10 of 10.4% due to the presence of some distinguished people with short periods of time and holding some administrative positions, and they proved their

Research questions:

What is the nursing manager leadership style from point of view staff nurses?

To answer this question and identify the nursing manager leadership style in governmental hospitals in Gaza Strip, the mean, standard deviation, weighted mean of the dimensions, probability value was calculated for the leadership styles, and the results are shown in table 4.2.

Table 4.2: Nurse manager leadership style among NS from point of view SN

Dimensions	Mean	SD	%	t-test	p-value	Rank
Transformational leadership	3.70	0.88	74.0	14.9	0.000	2
Transactional leadership	3.72	0.86	74.5	15.7	0.000	1
Participatory Leadership	3.66	0.89	73.2	13.9	0.000	3

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Table 4.2 shows the distribution of the participants' perceptions according to their responses about the total domains. According to the results, the highest domain is" Transactional leadership" with a weighted mean of 74.5, and the "Transformational leadership" with a weighted mean of 74.0%, and the domain "Participatory Leadership" with a weighted mean of 73.2%.

The researcher attributes this result to the fact that nursing supervisors and heads of nursing departments have leadership skills and the ability to deal wisely with all situations they face, in addition to that the Palestinian health system faces frequent and sudden emergencies that require those in charge of nursing leadership to act with each emergency situation or with every sudden order in a specific pattern so as not to increase the pressure of these emergency events.

There is no doubt that the nature of human behavior is a changing, So, that's needs flexibility in dealing, especially in light of the recurrent work pressures. The nursing staff are exposed to constant pressures. Therefore, the NM are able, with their leadership skills and administrative experience, to deal with their subordinates with respect and acceptance of their opinions, contain their anger, and assess their circumstances.

1 Transformational leadership

The distribution of the participants' perceptions according to their responses about transformational leadership is illustrated in table 4.3. When the subordinate nurses have been asked about their estimation regarding the transformational leadership style, they showed that the total weighted mean for transformational leadership is 74.0%. According to the results, the highest paragraph was number (5) "The nursing supervisor is interested in developing and expanding the perception and creative thinking of nurses" with a weighted mean 84.0%, followed by the paragraph number (2) "The nursing supervisor treats employees with respect" with a weighted mean 77.0%. While the lowest paragraphs were number (1) "The nursing supervisor is proud of his relationship with the nurses" with a weighted mean 68.8%, followed by the number (3) "The nursing supervisor deals with a high level of trust" with a weighted mean 70.6%. This result agrees transformational leadership is effective style in leadership.

Table 4.3: Mean, SD & weighted percentage for the field of

transformational leadership

No.	Item	Mean	SD	%	Rank
1.	The nursing supervisor is proud of his relationship with the nurses.	3.44	0.92	68.8	10
2.	The nursing supervisor treats employees with respect.	3.85	0.95	77.0	2
3.	The nursing supervisor deals with a high level of trust.	3.53	0.85	70.6	9
4.	Human values transcend when the nursing supervisor communicates with others to achieve the desired goals.	3.58	0.96	71.6	8
5.	The nursing supervisor is interested in developing and expanding the perception and creative thinking of nurses.	4.05	0.84	81.0	1

No.	Item	Mean	SD	%	Rank
6.	The nursing supervisor spreads optimism about the future among nurses.	3.68	0.83	73.6	5
7.	The nursing supervisor accepts multiple perspectives to face the problems they face.	3.62	0.90	72.4	6
8.	The nursing supervisor makes innovative suggestions in the field of supervisory and administrative work.	3.84	1.08	76.8	3
9.	The nursing supervisor tries to develop the capabilities of nurses.	3.78	1.04	75.6	4
10.	The nursing supervisor develops the implementation of work procedures in order to improve performance.	3.61	1.23	72.2	7
	Total	**3.70**	**0.88**	**74.0**	

These results agreed with some studies such as study of Hall (2020) which showed strong statistical evidence of positive results and leadership style. The transformational leadership style resulted in the most positive results for the dependent variables. As for Akhras (2018) study, it was found that the level of transformational leadership practice, according to the nursing staff's opinion, was at a moderate level, and the most practiced transformational leadership behavior was individual consideration and ideal influence.

2 Transactional leadership

The distribution of the participants' perceptions according to their responses about transactional leadership is illustrated in table 4.4. When the subordinate nurses have been asked about their estimation regarding the transactional leadership style, they showed that the total weighted mean for transactional leadership is 74.5%. According to the results, the highest paragraph was number (9) "The nursing supervisor is obligated to carry out the tasks in accordance with the rules and regulations" with a weighted mean 79.0%, followed by the paragraph number (8) "The nursing supervisor makes decisions on time and within the interest of the work" with a weighted mean 78.2%. While the lowest paragraphs were number (2) "The nursing supervisor expresses satisfaction with the performance of nurses in the field of carrying out tasks" with a weighted mean 70.2%, followed by the number (3) "The nursing supervisor takes care of the initiatives offered by nurses" with a weighted mean 71.0%. This result agrees transactional leadership more effective.

Table 4.4: Mean, SD & weighted percentage for the field of

transactional leadership

No.	Item	Mean	SD	%	Rank
1.	The nursing supervisor provides assistance to nurses when asked.	3.65	0.92	73.0	8
2.	The nursing supervisor expresses satisfaction with the performance of nurses in the field of carrying out tasks.	3.51	0.83	70.2	10
3.	The nursing supervisor takes care of the initiatives offered by nurses.	3.55	1.02	71.0	9

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4.	Easily accessible nursing supervisor in times of crisis or when needed.	3.73	1.11	74.6	5
5.	The nursing supervisor effectively leads and guides nurses.	3.66	0.82	73.2	7
6.	The nursing supervisor deals with nurses' mistakes realistically.	3.76	0.87	75.2	4
7.	The nursing supervisor responds to the nurses' questions and responds to them in a convincing manner.	3.82	0.77	76.4	3
8.	The nursing supervisor makes decisions on time and within the interest of the work.	3.91	0.93	78.2	2
9.	The nursing supervisor is obligated to carry out the tasks in accordance with the rules and regulations.	3.95	0.83	79.0	1
10.	The nursing supervisor follows up on the completion of the work and its results on an ongoing basis.	3.70	1.13	74.0	6
	Total	**3.72**	**0.86**	**74.5**	

Transactional leadership is a style in which leadership is focused on contingent reward of followers. The transactional leader excels at setting goals, giving direction to followers, and using rewards to employee promotion behaviors that are aligned with goals and the set vision (Wuerz, 2017). McGuire & Kennerly (2006) Stated that transactional leaders would reward followers with praise, recognition, merit raises, promotions, monetary bonuses, and honors based on their performance. Ultimately the end benefit of such leadership style is enhanced role clarity, job satisfaction, improved performance and all of the aforementioned can affect nursing professionalism.

3 Participatory leadership

The distribution of the participants' perceptions according to their responses about participatory leadership is illustrated in table 4.5 When the subordinate nurses have been asked about their estimation regarding the participatory leadership style, they showed that the total weighted mean for participatory leadership is 73.2%. According to the results, the highest paragraph was number (8) "The nursing supervisor participates in social events for nurses" with a weighted mean 77.2%, followed by the paragraph number (3) "The nursing supervisor solves the nurses' problems that require his intervention" with a weighted mean 76.4%. While the lowest paragraphs were number (5) "The nursing supervisor seeks to win over nurses by providing their own requirements" with a weighted mean 69.6%, followed by the number (4) "The nursing supervisor strives to provide for the needs of nurses" with a weighted mean 70.8%. This result agrees participatory leadership more effective.

Table 4.5: Mean, SD & weighted percentage for the field of participatory leadership

No.	Item	Mean	SD	%	Rank
1.	The nursing supervisor develops good relations with nurses.	3.71	0.83	74.2	4
2.	The nursing supervisor provides an acceptable and comfortable atmosphere for nurses and strives for it.	3.64	0.94	72.8	6
3.	The nursing supervisor solves the nurses' problems that require his intervention.	3.82	0.85	76.4	2
4.	The nursing supervisor strives to provide for the needs of nurses.	3.54	0.79	70.8	9
5.	The nursing supervisor seeks to win over nurses by providing their own requirements.	3.48	0.98	69.6	10
6.	The nursing supervisor deals flexibly with the regulations and instructions in the interest of nurses.	3.67	0.91	73.4	5
7.	A nursing supervisor avoids exclusivity in making important decisions.	3.58	0.88	71.6	7
8.	The nursing supervisor participates in social events for nurses.	3.86	0.81	77.2	1
9.	The nursing supervisor is keen to build trust between him and his nurses.	3.73	0.78	74.6	3
10.	The nursing supervisor gives nurses the opportunity to give their opinions on important decisions and work in a team spirit.	3.57	0.72	71.4	8
	Total	**3.66**	**0.89**	**73.2**	

These results agreed with many studies, such as the study of Maamari (2019), which found a positive relationship between the practice of participatory leadership among the leaders of Friendship Hospital, the practice of delegation of authority, the practice of decision-making, and the practice of human relations in improving the performance of workers.

What is the level of nursing professionalism from point of view nursing supervisor?

To answer this question and identify the level of nursing professionalism from point of view nursing supervisor in governmental hospitals in Gaza Strip, the mean, standard deviation, weighted mean probability value was calculated for the professionalism, and the results are shown in table 4.7.

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Table 4.7: Professionalism among SN from point of view NS

Dimensions	Mean	SD	%	t-test	p-value
Problem solving	3.59	0.91	71.9	10.0	0.000
Confront of challenges & risks	3.61	0.91	72.2	10.4	0.000
Decision making	3.67	0.90	73.4	11.5	0.000

Table 4.7 shows the relative weight and rankings of the professionalism dimensions for SN from the NS point of view. Persuasion & creativity dimension ranked first with a relative weight of (73.6%), are followed by the Decision-making dimension (73.4%), while problem solving ranked last with a relative weight of (71.9%). In general, we conclude that there is a high degree of professionalism among nurses.

1 Problem Solving

The distribution of the participants' perceptions according to their responses about Problem solving is illustrated in table 4.8. When the nursing supervisors have been asked about their estimation regarding the problem solving, they showed that the total weighted mean for problem solving is 71.9%. According to the results, the highest paragraph was number (2) "Nurse can solve problems encountered by non-traditional solutions" with a weighted mean 77.8%, followed by the paragraph number (3) "Nurse tries to develop plans and procedures to reduce problems at work" with a weighted mean 74.8%. While the lowest paragraphs were number (1) "Nurse forms an integrated perception of problems through discussion with colleagues at work" with a weighted mean 68.2%, followed by the number (4) "Nurse expects problems during work before they occur" with a weighted mean 68.4%. This result indicates the ability of nurses to deal in solving problems.

Table 4.8: Mean, SD & weighted percentage for the field of problem solving

No.	Problem solving item	Mean	SD	%	Rank
1.	Nurse forms an integrated perception of problems through discussion with colleagues at work	3.41	0.74	68.2	6
2.	Nurse can solve problems countered by non-traditional solutions.	3.89	0.82	77.8	1
3.	Nurse tries to develop plans and procedures to reduce problems at work.	3.74	1.01	74.8	2
4.	Nurse expects problems during work before they occur.	3.42	0.91	68.4	5
5.	Nurse analyzes the causes of the problem accurately.	3.52	0.88	70.4	4
6.	Nurse proposes innovative solutions to solve work problems in the light of available alternatives	3.58	1.12	71.6	3
	Total	**3.59**	**0.91**	**71.9**	

In general, we conclude that there is a high degree of professionalism in problems solving among SN from the point of view NM, so the researcher believes that nurses have a high degree of leadership qualities skills and experience that makes them creative in solving problems which they face it with the direct support of NM.

2 Confront of challenges & risks

The distribution of the participants' perceptions according to their responses about confront of challenges & risks is illustrated in table 4.9. When the nursing supervisors have been asked about their estimation regarding the confront of challenges & risks, they showed that the total weighted mean for confront of challenges & risks is 72.2%. According to the results, the highest paragraph was number (4) "Nurse prefers to work with a team that is in love with achievement" with a weighted mean 76.4%, followed by the paragraph number (6) "Nurses apply procedures like a protocol; No matter how difficult" with a weighted mean 73.4%. While the lowest paragraphs were number (3) "Nurse prefers to work with a team that is risk-taking" with a weighted mean 68.2%, followed by the number (2) "Nurses encourage each other to innovate despite the risks they may face." with a weighted mean 70.0%. This score indicates the ability of nurses to work despite the challenges and risks.

Table 4.9: Mean, SD & weighted percentage for the field of challenges & risks

No.	Item	Mean	SD	%	Rank
1.	Nurse looks at the best ways to accomplish tasks if there are many options, not the easiest ones.	3.61	1.14	72.2	4
2.	Nurses encourage each other to innovate despite the risks they may face.	3.50	1.01	70.0	5
3.	Nurses prefer to work with a team that takes risks	3.41	0.85	68.2	6
4.	Nurses prefer to work with a team that loves achievement	3.82	0.91	76.4	1
5.	Nurses take advantage of opportunities to handle risks with distinction and precision	3.65	0.73	73.0	3
6.	Nurses apply procedures like a protocol; No matter how difficult	3.67	0.84	73.4	2
	Total	**3.61**	**0.91**	**72.2**	

We conclude that there is a high degree of confront of challenges & risks among SN from the point of view of NS, so, the researcher believes that the ability of SN to face the challenges and risks faced them in the performance of their duty, demonstrates their awareness of the importance of their job, their practical place in their departments, and flexibility in dealing with different people, patients and colleagues ، It is not hidden from me that the many challenges that the Gaza Strip and its health system face, such as the blockade for more than 16 years, the lack of workers' salaries, the lack of medicines, the lack of medical consumables, and the acute shortage of nursing staff.

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3. Decision making

The distribution of the participants' perceptions according to their responses about decision making is illustrated in table 4.13. When the nursing supervisors have been asked about their estimation regarding the decision making, they showed that the total weighted mean for decision making is 73.4%. According to the results, the highest paragraph was number (2) "Nurse makes sound decisions to solve problems in proportion to the job situation" with a weighted mean 76.8%, followed by the paragraph number (6) "Nurse supports the ideas of colleagues to develop work and improve services" with a weighted mean 75.2%.

While the lowest paragraphs were number (1) "Nurse carries out the opinion of their colleagues when they make a decision by a majority & be correct" with a weighted mean 70.2%, followed by the number (4) "Nurse determines the requirements for effective implementation of decisions regarding patient care" with a weighted mean 70.8%.

This result indicates the extent to which nurses participate in making decisions regarding work.

Table 4.13: Mean, SD & weighted percentage for the field of decision making

No.	Decision making item	Mean	SD	%	Rank
1.	Nurse carries out the opinion of their colleagues when they make a decision by a majority & be correct	3.51	0.75	70.2	6
2.	Nurse makes sound decisions to solve problems in proportion to the job situation	3.84	0.91	76.8	1
3.	Nurse actively participates in the decision-making process of the department within the scope of job descriptions	3.71	0.82	74.2	3
4.	Nurse determines the requirements for effective implementation of decisions regarding patient care	3.54	1.07	70.8	5
5.	Nurse distributes work among their team members according to their abilities and skills	3.67	0.88	73.4	4
6.	Nurse supports the ideas of colleagues to develop work and improve services	3.76	0.94	75.2	2
	Total	**3.67**	**0.90**	**73.4**	

In general, we conclude that there is a high degree of decision making by creative way among SN from the point of view of NS. So, through our work in the Ministry of Health in the Gaza Strip and in light of the crises facing the health system in light of the imposed blockade and the heavy burdens, nursing must have the ability to make the appropriate decision, many studies have confirmed that the skills of decision-making are not easy, but need experience and high skill.

Is there a relationship between nursing manager leadership style and nursing professionalism?

To test the relationship between nursing manager leadership style and nursing professionalism, the research used liner regression. Results in table 4.15 showed that the independent variables (Transformational leadership, Transactional leadership, Participatory Leadership, and Servant

Leadership) have a significant impact on nursing professionalism, (P-Value<0.05), and the coefficient of determination is equal to 0.827, which means that 82.7% of the change in the nursing professionalism can be explained by the change in nursing manager leadership style.

Table (4.15): Linear Regression Results

Dependent variable	Independent variable	Unstandardized Coefficients		t	p-value (Sig.)
		B	Std. Error		
Nursing Professionalism	C	0.506	0.120	4.217	0.000*
	Transformational leadership	0.817	0.315	2.594	0.000*
	Transactional leadership	0.625	0.125	5.000	0.000*
	Participatory Leadership	0.417	0.055	7.582	0.000*
F= 54.547 Sig=0.000 R²=82.7%					

The researcher attributes this result to the fact that the essence of leadership focuses on the ability to align means with ends, and to shape and reshape the hospital to achieve great human goals and moral aspirations.

The leader also pays great attention to the needs of subordinates, including those specific needs, and while the leader seeks to build trust with subordinates, he is interested in knowing the strengths and weaknesses in their performance. Growth and development through personal challenges, in addition to the fact that many leaders do not influence others with the aim of changing their behavior only, but rather for specific reasons they have in order to push them to fulfill the roles entrusted to them in a better way, which improves their professionalism.

Chapter 5

Conclusion and Recommendation

Conclusion

This study aims to assess role of nursing manager leadership style in achieving the nursing professionalism at governmental hospitals in Gaza governorates from the perspectives of NS, HN and SN. It was a descriptive, analytical and cross-sectional study. All major governmental hospital from each governorate was selected. The target population is classified into two groups: the first group was NM which included HN, and NS. and the second was SN. All NS and HN were included in the study and proportional systematic random sample was selected for the subordinate nurse's group. The response rate for NS and HN was 91.3% (240) from total 263 NS and for the SN it was 92.6% (350) from total 378 nurses. The study tool was a self- administered questionnaire for both NS, HN and SN. Both questionnaires contained socio-demographic variable, organizational variable and other variables in addition to the study domains that reflect the reality of leadership style for NS and their impact in achieving the professionalism of SN.

Most of the sample was Male, which is representing 67.3% and 32.7% were female. This percentage distributor to SN and NS, for SN male were 57.7% and female 42.3%, but NS male 81.3% and female 18.7%. Regarding Age group, most of the age group up to 30 years about 46.6% in SN, but in NS most of the age group more than 31 years. About 82% of SN were married and 18% were not- married (single, divorced and widows). and about 98% of NS were married and 2% were not- married. Regarding the residency place about highest participation from Gaza Governorate, while lowest participation from Rafah governorate.

That highest participation rate in SN was for Shifa Medical Complex with 40.6%, while Nasser Medical Complex had 24.3% participation, while the participation in the Indonesian Hospital with 13.7% participation. European Gaza Hospital had 12.3% participation. Finally, the participation rate in Al-Aqsa Martyrs Hospital was 9.1%, the lowest participation rate in the GS.

Regarding academic qualifications clarify about 68.6% from SN were getting bachelor degree. While 23.7% had Diploma certificate, whilst, almost of the SN 7.7% had postgraduate qualification. According to academic qualifications

of NS that most of them from bachelor 63.4%, about 36.6% have been holding postgraduate.

According to the years of experience the majority of SN 62.3% had work experience less than 10 years, while 33.4% of participants had a total work experience ranged from 11 to 20 years, and other 4.3% had a total work experience of more than 20 years. Regarding experience for NS about 54.1% of the supervisors were having experience from 11-20 years and 35.5% of them had experience more than 21 years.

The prevalent leadership style practice by nursing supervisors and head nurse at governmental hospitals in Gaza governorates is the" Transactional leadership" with a weighted mean of 74.5%.

According rankings of the professionalism dimensions for SN from the NS point of view the Decision-making dimension (73.4%), while problem solving ranked last with a relative weight of (71.9%). In general, we conclude that there is a high degree of professionalism among nurses.

the relationship between nursing manager leadership style and nursing professionalism, the research used liner regression. Results showed that the independent variables (Transformational leadership, Transactional leadership, Participatory Leadership) have a significant impact on nursing professionalism, (P-Value<0.05), and the coefficient of determination is equal to 0.827, which means that 82.7% of the change in the nursing professionalism can be explained by the change in nursing manager leadership style.

The relationship between nursing manager leadership style, professionalism and socio-demographic variables, there is no relationship between socio-demographic variables and this variable.

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State of Palestine
Ministry of health

دولة فلسطين
وزارة الصحة

السيد : هاني سلطان الوحيدي   المحترم

التاريخ:07/11/2022
رقم المراسلة 1106784

مدير عام بالوزارة /الإدارة العامة للوحدات الإدارية المساعدة /وزارة الصحة

السلام عليكم ...

الموضوع/ تسهيل مهمة الباحث عصام سعدي نبهان

التفاصيل //
السلام عليكم
نهديكم أطيب التحيات ونود منكم تسهيل مهمة الباحث/ة عصام سعدي عبد نبهان الملتحق/ة ببرنامج الدكتوراة في إدارة التمريض –
جامعة البطانة – السودان في اجراء بحث بعنوان:

The Role Nursing Manager leadership Style in Achieving the Nursing Professionalism among Nurses Working at Governmental Hospitals in Palestine

دور نمط قيادة مدراء التمريض في تحقيق الاحتراف التمريضي لدى الممرضين العاملين في المستشفيات الحكومية في فلسطين
حيث الباحث/ة بحاجة لتعبئة استبانة من عدد من العاملين في مرافق وزارة الصحة (المستشفيات)، دون اجراء أي تدخل طبي او سحب
عينات دم ، نأمل توجيهاتكم لذوى الاختصاص بضرورة الحصول على الموافقة المستنيرة من المشاركين ، بما لا يتعارض مع مصلحة
العمل وضمن أخلاقيات البحث العلمي، ودون تحمل الوزارة أي أعباء أو مسئولية

وتفضلوا بقبول التحية والتقدير

ملاحظات /
تسهيل المهمة الخاص بالدراسة أعلاه صالح لمدة 3 أشهر من تاريخه.
يرجى التأكد من توافق الاستبانة المرفقة والتي يتم تعبئتها ميدانيا على ان لا يتم أي إضافة او تعديل على الاستبانة المرفقة

علي حسن البلبيسي
حكيم جامعي

التحويلات

■ علي حسن عبد القادر البلبيسي(حكيم جامعي)	← هاني سلطان ارميح الوحيدي(مدير عام بالوزارة)	للإفادة(07/11/2022)
■ هاني سلطان ارميح الوحيدي(مدير عام بالوزارة)	← محمد خليل محمد زقوت(مدير عام بالوزارة)	إجراءاتكم بالخصوص(10/11/2022)
■ محمد خليل محمد زقوت(مدير عام بالوزارة)	← صبحي اسماعيل هاشم سكيك(مدير مستشفى)	إجراءاتكم بالخصوص(10/11/2022)
■ محمد خليل محمد زقوت(مدير عام بالوزارة)	← شوقي ابراهيم عبد القادر سالم(مدير مستشفى)	إجراءاتكم بالخصوص(10/11/2022)
■ محمد خليل محمد زقوت(مدير عام بالوزارة)	← مصطفى سليم عبد الكحلوت(مدير مستشفى)	إجراءاتكم بالخصوص(10/11/2022)
■ محمد خليل محمد زقوت(مدير عام بالوزارة)	← عاطف محمد خليل الحوت(مدير مستشفى)	إجراءاتكم بالخصوص(10/11/2022)
■ محمد خليل محمد زقوت(مدير عام بالوزارة)	← محمد سلامه علي الهمص(طبيب مدير)	إجراءاتكم بالخصوص(10/11/2022)

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Questionnaire reviewers: -

No.	Name	Scientific Degree	Workplace
1-	Dr. Yousef Ibrahim Aljeesh	Prof. Dr. in Public Health	Islamic University - Gaza
2-	Dr. Nasser Abu-El-Noor.	Prof Dr. in Health Care Policy	Islamic University - Gaza
3-	Dr. Ashraf Eljedi	Prof. Dr. in Public Health	Islamic University - Gaza
4-	Dr. Mootasem Salah	Assistant Prof. in Nursing Management	MOH
5	Dr. Ahmed A. Najim	Assistant Professor, Community Health Nursing	Al-Azhar University Gaza
6-	Dr. Ezzat Ahmed Al-Askari	Assistant Professor, Community Health Nursing	ISRAA University Gaza
7-	Dr. Mazen Fathi Abu Qamar	Ph.D. Community Health Nursing	Al-Azhar University Gaza
8-	Dr. Yousif M. Awad	Assistant Professor of Nursing Management	University of Palestine
9-	Dr. Talib Saleh Abu Mualla	Ph.D. Psychological and community health	ISRAA University Gaza
10-	Dr. Mahmoed Radwan	PhD in Nursing Management	WHO Gaza office
11-	Dr. Khaled Jamal Khaddura	Ph.D. Epidemiology	ISRAA University Gaza

Arabian Gulf Journal
Humanities and Social Studies

Leadership style of the nursing director in achieving professional nursing competence among nurses working in government hospitals in the Gaza governorates

Dear participant:

This study to assess role of nursing manager leadership style in achieving the nursing professionalism at governmental hospitals in Gaza governorates.

The researcher a scertains that you are selected randomly and you have the right to refuse participation in this study.

Researcher thanks you for your participation and collaboration in this study that we hope to improve the nursing care at governmental hospital.

The researcher would like to emphasize that the information will remain confidential and for the purpose of scientific research that does not need to mention your name.

Thank you for your participation

Researcher

Esam Sade Nabhan

Issam197824@hotmail.com

0592660315

Nurse's Questionnaire

Leadership style of the nursing director in achieving professional nursing competence among nurses working in government hospitals in the Gaza governorates

Serial Number: (...............) For researcher use.

Note: Nursing supervisor means: Heads Nurse in the morning shifts and NS in the evening and night shifts.

First: Personal Information:

1- **Gender:** Male ☐   Female ☐   **2- Age:** [_____] year

3- **Marital status:** Single ☐   Married ☐   Divorced ☐   ☐ Widowed

4- **Place of Residence:**   North Gaza ☐   Gaza city ☐   Mid- ☐ Zone

Khan Younis ☐   Rafah ☐

5- **Educational Level:**   Diploma ☐   Bachelor ☐   ☐ Postgraduate

6- **Place of work:** Hospital [_____]

7- **Total Experience in the nursing:** [_____] Year

Scale leadership styles of nursing supervisors from the nurses' point of view:

Explain your agreement with the following items:

Very High Degree (VHD); **High Degree** (HD); **Medium Degree** (MD);

Low Degree (LD); **Very Low Degree** (VLD)

No	Items	VHD	HD	MD	LD	VLD
1.	The nursing supervisor is proud of his relationship with the nurses.					

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2.	The nursing supervisor treats employees with respect.					
3.	The nursing supervisor deals with a high level of trust.					
4.	Human values transcend when the nursing supervisor communicates with others to achieve the desired goals.					
5.	The nursing supervisor is interested in developing and expanding the perception and creative thinking of nurses.					
6.	The nursing supervisor spreads optimism about the future among nurses.					
7.	The nursing supervisor accepts multiple perspectives to face the problems they face.					
8.	The nursing supervisor makes innovative suggestions in the field of supervisory and administrative work.					
9.	The nursing supervisor tries to develop the capabilities of nurses.					
10.	The nursing supervisor develops the implementation of work procedures in order to improve performance.					
11.	The nursing supervisor provides assistance to nurses when asked.					
12.	The nursing supervisor expresses satisfaction with the performance of nurses in the field of carrying out tasks.					
13.	The nursing supervisor takes care of the initiatives offered by nurses.					
14.	Easily accessible nursing supervisor in times of crisis or when needed.					
15.	The nursing supervisor effectively leads and guides nurses.					
16.	The nursing supervisor deals with nurses' mistakes realistically.					

17.	The nursing supervisor responds to the nurses' questions and responds to them in a convincing manner.					
18.	The nursing supervisor makes decisions on time and within the interest of the work.					
19.	The nursing supervisor is obligated to carry out the tasks in accordance with the rules and regulations.					
20.	The nursing supervisor follows up on the completion of the work and its results on an ongoing basis.					
21.	The nursing supervisor develops good relations with nurses.					
22.	The nursing supervisor provides an acceptable and comfortable atmosphere for nurses and strives for it.					
23.	The nursing supervisor solves the nurses' problems that require his intervention.					
24.	The nursing supervisor strives to provide for the needs of nurses.					
25.	The nursing supervisor seeks to win over nurses by providing their own requirements.					
26.	The nursing supervisor deals flexibly with the regulations and instructions in the interest of nurses.					
27.	A nursing supervisor avoids exclusivity in making important decisions.					
28.	The nursing supervisor participates in social events for nurses.					
29.	The nursing supervisor is keen to build trust between him and his nurses.					
30.	The nursing supervisor gives nurses the opportunity to give their opinions on important decisions and work in a team spirit.					
31.	The nurse supervisor listens to the nurses as they talk to him and provides feedback on what they say.					

32.	The nursing supervisor strives to understand the intentions and perspectives of nurses.					
33.	The nursing supervisor deals with the requirements of the supervisory process with an open mind.					
34.	The nursing supervisor uses persuasion rather than using his authority to encourage nurses to work.					
35.	The nursing supervisor follows the behavioral and professional development of all nurses and seeks their development.					
36.	The nursing supervisor seeks to provide the opportunity for nurses to interact with each other socially and professionally.					
37.	Through his commitment to professional values and behaviors, the Nursing Supervisor seeks to be a role model for nurses.					
38.	The nursing supervisor seeks to provide a work environment that provides a sense of security for those around him to practice their creativity and present their ideas transparently".					

Faculty of Graduate studies

Leadership style of the nursing director in achieving professional nursing competence among nurses working in government hospitals in the Gaza governorates

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Researcher thanks you for your participation and collaboration in this study that we hope to improve the nursing care at governmental hospital.

The researcher would like to emphasize that the information will remain confidential and for the purpose of scientific research that does not need to mention your name.

Thank you for your participation

Researcher

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Nursing supervisors Questionnaire

Leadership style of the nursing director in achieving professional nursing competence among nurses working in government hospitals in the Gaza governorates

Serial Number: (...............) For researcher use.

Note: Nursing supervisor means: Heads Nurse in the morning shifts and NS in the evening and night shifts.

First: Personal Information:

2- **Gender:** Male ☐   Female ☐   **2- Age:** ☐

year

8- **Marital status:** Single ☐   Married ☐   Divorced ☐   ☐

Widowed

9- **Place of Residence:**   North Gaza ☐   Gaza city ☐   Mid- ☐

Zone

Khan Younis ☐   Rafah ☐

10- **Educational Level:**   Bachelor ☐   Postgraduate ☐

11- **Place of work:** Hospital ☐

12- **Total Experience in the nursing:** ☐ Year

Scale of nursing professionalism among nurses working in government hospitals from the point of view of nursing supervisors:

Explain your agreement with the following items:

Very High Degree (VHD); **High Degree** (HD); **Medium Degree** (MD);

Low Degree (LD); **Very Low Degree** (VLD)

No	Items	VHD	HD	MD	LD	VLD
1.	Nurse forms an integrated perception of problems through discussion with colleagues at work					

2.	Nurse can solve problems countered by non-traditional solutions.					
3.	Nurse tries to develop plans and procedures to reduce problems at work.					
4.	Nurse expects problems during work before they occur.					
5.	Nurse analyzes the causes of the problem accurately.					
6.	Nurse proposes innovative solutions to solve work problems in the light of available alternatives					
7.	Nurse looks at the best ways to accomplish tasks if there are many options, not the easiest ones.					
8.	Nurses encourage each other to innovate despite the risks they may face.					
9.	Nurses prefer to work with a team that takes risks					
10.	Nurses prefer to work with a team that loves achievement					
11.	Nurses take advantage of opportunities to handle risks with distinction and precision					
12.	Nurses apply procedures like a protocol; No matter how difficult					
13.	Nurse stimulates their team members to participate in work development programs and improve services					
14.	Nurse can work efficiently with different head nurses.					
15.	Nurse adapts quickly to changes in the work environment					
16.	Nurse deal with crises and work pressures well					
17.	Nurse uses informal communication channels to complete the work					
18.	Nurse ideas and suggestions are conducive to the development and improvement of work.					
19.	Nurse initiates new ideas in their work					

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20.	Nurse develops their skills based on evaluation results					
21.	Nurse can analyze any problem they face to their primary components.					
22.	Nurse deal with their colleagues as required by the situation					
23.	Nurse seeks to link ideas and attitudes to produce a new and distinctive idea					
24.	Nurse assesses the results of their decisions with the achievement they achieve					
25.	Nurse is always looking for new developments about their performance development					
26.	Nurse seeks a better position in the hospital					
27.	Nurse accepts mobility between departments that require their expertise					
28.	Nurses support their colleagues to develop work in the best ways to accomplish tasks and procedures.					
29.	Nurse always seeks to participate in and out hospital courses to improve their work performance					
30.	Nurse carries out the opinion of their colleagues when they make a decision by a majority & be correct					
31.	Nurse makes sound decisions to solve problems in proportion to the job situation					
32.	Nurse actively participates in the decision-making process of the department within the scope of job descriptions					
33.	Nurse determines the requirements for effective implementation of decisions regarding patient care					
34.	Nurse distributes work among their team members according to their abilities and skills					
35.	Nurse supports the ideas of colleagues to develop work and improve services					
36.	Nurse responds to the team's queries with great skill					
37.	Nurse uses logical methods to convince others of their point of view.					

38.	Nurse presents their ideas in a sequence that helps to persuade					
39.	Nurse allows others to express their thoughts					
40.	Nurse is fluent in conducting dialogue with others.					
41.	Nurse helps their colleagues meet the requirements for success					
42.	Nurse participates in the department's development projects with enthusiasm					
43.	Nurse provides quick, creative ideas for urgent topics					