

## Posebnosti vodstva kao preokret sestrinstva: Potreba za osobne i organizacijske identifikacije

### Authentic leadership and nurses' turnover intentions: The role of personal and organizational identification

Sidra Aziz, Ayesha Latif

Department of Management Sciences Hazara University, Mansehra, Pakistan

#### Sažetak

Ova studija pruža informacije o autentičnom vodstvu, osobnoj i organizacijskoj identifikaciji te namjerama slobode kretanja medicinskih sestara/tehničara, kao i njihovom međusobnom odnosu u Pakistanu. Predlažemo da osobna i organizacijska identifikacija posreduju učinku autentičnog vodstva na namjere skrbištvu medicinskih sestara/tehničara. Za svrhe ispitivanja osmišljena je kvantitativna presječna vrsta studije. Uključeno je 432 registriranih medicinskih sestara/tehničara koji rade u privatnim bolnicama Pakistana. Rezultati ukazuju na to da autentično vodstvo u sestrinstvu smanjuje namjere odlazaka medicinskih sestara/tehničara istodobno poboljšavaju i osobnu i organizacijsku identifikaciju te djeluju kao negativan čimbenik na odlazak iz strukovnosti. Utjecaj autentičnog vodstva na namjere odlazaka medicinskih sestara/tehničara iz struke upućuje na to da bi praksa bolničkog upravljanja ljudskim resursima trebala staviti naglasak na autentične značajke vodstva u razvoju sestrinstva.

**Ključne riječi:** Autentično vodstvo • osobna identifikacija • organizacijska identifikacija • namjere prometa; medicinske sestre • zdravstvena industrija

**Kratki naslov:** Vodstvo u sestrinstvu i prepoznatljivost

#### Abstract

This study provides information about authentic leadership, personal and organizational identification, and nurses' turnover intentions, as well as their relationship with each other in the Pakistani context. We suggest that both personal and organizational identification mediate the effect of authentic leadership on nurses' turnover intentions. A quantitative, cross-sectional survey was designed to test the hypotheses. Data were collected from 432 registered nurses working in private hospitals of Pakistan. Results following structural equation modelling and mediation analysis suggest that authentic leadership decrease turnover intentions of nurses and personal and organizational identification mediate the negative effect of authentic leadership on turnover intentions. The impact of authentic leadership on nurses' turnover intentions suggests that the practice of hospital human resource management should place an emphasis on authentic leadership traits in leadership development.

**Keywords:** Authentic leadership • personal identification • organizational identification • turnover intentions; nurses • healthcare industry

**Running head:** Authentic leadership in nursing and organizational identification

Received 17<sup>th</sup> May 2018;

Accepted at 18<sup>th</sup> June 2018;

**Autor za korespondenciju/Corresponding author:** Sidra Aziz, Department of Management Sciences, Hazara University, Mansehra, Pakistan • e-mail:masood6025@gmail.com

## Introduction

Turnover in healthcare is a serious concern, as it contributes to the global nursing shortage and is associated with declines in quality of care, patient safety, and patient outcomes. Turnover has always been an issue that organizations try to address due to the high cost associated with recruiting and training new employees. Hospitals are no exception to this. Nursing turnover has adverse effects on healthcare organizations, patients, and nurses [1]. Nurses' turnover intention is not just a result of an individual's maladjustment to the field but is an organizational issue. To replace departing nurses, healthcare organizations face a financial burden that is associated with advertising, recruiting, orientating, and training new employees [2]. It is obvious that high turnover among nurses can have serious effects on the quality of care, the costs and the efficiency of hospitals. Accordingly,

tailored strategies should be developed to tackle the problem of high turnover intention among nursing staff. How to reduce nurse turnover and tackle the problem of nursing shortage has captured wide attention across the world. When nurses quit their jobs, the quality of care delivered to patients is severely compromised [3], and communication among various stakeholders involved in the deliverance of care to patients deteriorate, and more frequent errors occur in medication resulting in burnout and emotional exhaustion among other nurses [4].

Several studies have identified the detrimental effect that high nurse turnover has on the remaining nurses on the unit. Nurses who remained in their position reported lower levels of job satisfaction and mental health issues [3], factors which may lead them to seek alternative jobs as well.

Turnover is always costly to every type of organization and especially to service providers. In the healthcare context, turnover would result in decreased patient satisfaction, recruitment and selection cost to hire new nurses, training cost to equip new nurses with the necessary set of skills to deal with patients, physicians, and other stakeholders of the hospital. Therefore, managers become critical of the fact that nurse retention strategies are to be placed in accordance with hospitals' values. The role of nurse managers as leaders is pivotal in this regard. These nurse managers can motivate subordinate nurses to remain committed and let go the intentions to turnover. Authentic leadership is especially relevant in this context since authentic leaders are open, honest, an optimist and they give confidence and the freedom to followers to enjoy freedom of doing work as they like it. We aim to examine the influence of authentic leadership on nurses' job turnover intentions through nurses' personal identification with their leader and organizational identification.

## Literature review and hypotheses development

### Turnover intentions

Turnover intention is defined as a conscious and deliberate willingness to leave the organization [5]. It is a measure of whether organizational members are planning to leave their positions of employment. Turnover can also be directed towards several targets (i.e., from a unit, organization or profession). Researchers have found that a lot of factors determine turnover intentions of employees such as leadership, supervisor attributes, organizational support, negative behaviors, ostracism, incivility, workplace bullying, lack of motivation, rewards, and many other such factors [6]. The actual turnover of an employee depends on his/her intention to do so. Research shows that when an employee is dissatisfied from the job or has other reasons to feel unsafe and searching for a new job elsewhere, he/she does not quit the organization immediately. The intent to turnover starts with becoming disengaged, leaving to take job roles seriously, remaining absent from work, engaging in negative behaviors such as bullying, counterproductive work behaviors, uncivil behaviors, and rudeness towards a customer, co-workers, and even bosses. All these negative behaviors move him/her closer to ultimately quitting the organization [7]. Karatepe and Avci [8] argued that psychological capital and work engagement are related to turnover intentions such that when employees are high on psychological capital and are engaged in their work roles, they tend to display lower intentions to turnover.

### Authentic leadership

Authentic leadership focuses on integrity, honesty, and high moral values [9]. Authentic leaders are "those who are deeply aware of how they think and behave and are perceived by others as being aware of their own and others' values/moral perspectives, knowledge, and strengths; aware of the context in which they operate; and who are confident, hopeful, optimistic, resilient, and of high moral character" [9]. There are four dimensions of authentic leadership

through which leaders play their roles and display different characteristics [10]. The first one is self-awareness that refers to leaders' behaviors that show their awareness of their own values and beliefs [11] as well as their strengths and weaknesses. Another attribute of an authentic leader is balanced processing. According to this attribute, authentic leaders do not make decisions until they gather all relevant information and after having a detailed analysis of the information, they try to make objective decisions [12]. The third trait of an authentic leader is relational transparency. According to this trait, leaders are open to others and instead of concealing information and other aspects of their own personalities, they reveal their thoughts and feelings to others from time to time so that others can better understand their leaders and display trust on them [11]. Finally, an internalized moral perspective reflects leaders' moral principles that are compatible with their behaviors [10]. In the context of the nursing profession, authentic leadership plays an important role to keep nursing staff committed and focused on their jobs. If a nursing manager displays authentic leadership traits, subordinate nurses find themselves more meaningful and impactful in providing quality care to their patients.

### Personal identification

Employees are involved in at least two types of workplace relationships: one with their immediate manager and one with the organization [13]. The follower-leader relationship is influenced by the extent to which followers self-identify with their leader [14]. Such identification reflects the personal aspect of the follower-leader interaction, one that is described as "the definition of oneself in terms of a given relationship" [15]. Authentic leaders explain and reveal their feelings to others and especially followers [15]. Doing this enables followers to understand their leaders deeply and they are willing to trust their leaders more often. Since authentic leaders do not believe in concealing information, sensitive strategic planning, and other critical aspects of the organizational processes, followers identify themselves with their leaders. Through the norm of reciprocity, followers also share their feelings, ideas, and information with their leaders. They do not feel insecure to discuss new ideas. They know that if their ideas are not successful, their leaders would not blame them.

On the other hand, if the ideas are successful, practical, and useful to the organizations, their leaders would provide them with every possible resource to implement such ideas. Hence, they are not afraid to speak up and feel more fulfilled in their jobs. This aligns with the influential role of the follower-leader relationships proposed in authentic leadership theory. Managers who demonstrate authentic leadership behaviors by maintaining high moral standards that are consistent with their actions, involving followers in the process of decision-making, being aware of their own and others' strengths and weaknesses, and promoting openness, are able to build positive and honest interactions with followers [16]. Another attribute of an authentic leader is balanced processing. According to this attribute, authentic leaders do not make decisions until they gather all relevant information and after having a detailed analysis

of the information, they try to make objective decisions. This may result in followers developing a personal identification with their leaders, which fosters the development of positive attitudes and behaviors [15, 17].

### Organizational identification

Organizational identification is another type of self-identity that drives individuals' sense of belonging. An individual's identification with their work organization consists of cognitive and emotional dimensions [18]. The cognitive dimension of organizational identification reflects the shared characteristics and goals between employees and organizations and the perception of gaining benefit from categorizing oneself as a member of the organization [18]. The emotional dimension evokes a sense of pride in belonging to the organization in individuals. Galvin, Lange, and Ashforth [19] asserted that the emotional dimension of organizational identification helps develop employees' identification with the organization by presenting employees with a favorable image of the organization.

According to Avolio et al. [9], authentic leaders influence followers' work attitudes and behaviors through the mechanism of organizational identification. Individuals who identify with an organization are more likely to adopt the organization's mission and values, and functions to achieve the organizational goals. It has been argued that followers' identification with their leader can extend to their identification with the organization [17]. Sluss and Ashforth (2007) [15] asserted that an individual's personal identification is woven into their organizational identification because followers' relationship with their manager is embedded within their relationship with the organization.

The convergence of personal and organizational identification may be influenced by leadership behaviors [15]. This seems logical because a leader is perceived by his or her followers to be the organization's representative, who embodies and endorses the organization's mission, goals, and values [15]. Therefore, when followers identify themselves with the leader they will ultimately identify with the organization. This proposition aligns with a growing body of research indicating that individuals' organizational identification is influenced by their identification with the leader. For instance, Sluss and colleagues [17] found that newcomers' personal identification with their supervisor was directly and indirectly (through affective, cognitive, and behavioral mechanisms) associated with their identification with the organization. In addition, they found that personal identification with the leader led to organizational identification when newcomers perceived that their leaders' behaviors reflected the organization's goals, norms and values.

### Authentic leadership and turnover intentions

Previous research has documented the influence of authentic leadership on new graduate nurses' turnover intentions. Laschinger, Wong and Grau [20] studied the effect of authentic leadership on nurses' organizational identification and job satisfaction and found that when nurse leaders displayed characteristics of authentic leadership, their follower nurses were more satisfied with their jobs and as

a consequence they displayed lower intentions to quit their respective jobs and hospitals. In another study by Wong, Laschinger and Cummings [21] on nurses, they found that follower nurses were more attached to their supervisor nurses who were authentic leaders. This suggests that social identification might be influenced by leaders' behaviors and other workplace factors [21]. Authentic leaders help employees to find meaning in their jobs, cope with stressful situations, and perform better by being positive and optimistic about the outcomes. These traits prove to be useful for employees to stay in organizations. Employees display intentions to quit only when they do not find their working environment meaningful and become dissatisfied with jobs and face burnout situations due to work stressors. These situations are highly likely in nursing profession since nurses have to deal with patients, attendants, doctors, and other stakeholders round the clock [22] and there is not let off in their extremely emotionally exhaustive jobs.

These findings also confirm the pivotal role authentic leaders play in influencing new graduate nurses' work attitudes and behaviors by building positive and honest relationships that aim to facilitate their transition to practice [22]. Through these relationships, leaders are able to manage work characteristics that negatively influence nurses' retention outcomes. Another attribute of an authentic leader is balanced processing. According to this attribute, authentic leaders do not make decisions until they gather all relevant information and after having a detailed analysis of the information, they try to make objective decisions. Nurses have to interact directly with the patients and are responsible to provide quality care to patients. The pressure to perform better is highest on nurses since hospitals rely on them to claim quality patient care aspect. In such competitive circumstances, the authentic leadership characteristics of a nurse leader are extremely important to keep subordinate nurses focused on their working roles and responsibilities and remain committed to the objectives of the hospital. Authentic leaders are able to retain employees even during uncertain, turbulent, competitive, and extremely challenging environments. Thus, we can hypothesize on the basis of the above arguments:

**Hypothesis 1.** *The authentic leadership of a nurse manager is negatively associated with a subordinate nurse's turnover intentions.*

### The mediating role of personal identification

The relationship between authentic leadership and nurses' identification with their leader and the organization has yet to be studied. However, we expect that authentic leaders who provide nurses with conditions that support their professional development and successful transition are likely to influence their personal identification with their leader. Carmeli, Atwater, and Levi [23] found that managers who exhibited positive leadership behaviors and had relationships characterized by high-quality leader-member exchange were more likely to develop personal and organizational identifications in followers which, in turn, resulted in more knowledge sharing activities. In line with these findings, we argue that a manager who demonstrates authentic leadership behaviors encourages nurses to identify

with them personally; and since that manager reflects the organization's culture and goals (theoretically), he or she is more likely to influence new graduate nurses' identification with the work organization. Authentic leadership theory proposes a number of mediating processes by which leaders influence the work attitudes and behaviors of their followers [9]. These include followers' personal and social identification with the leader and the organization [12, 21].

Lower levels of turnover among nurses have been linked to the ability of nursing managers to provide support and improve workplace conditions [20, 24]. The actual turnover of an employee depends on his/her intention to do so. Research shows that when an employee is dissatisfied from the job or has other reasons to feel unsafe and searching for a new job elsewhere, he/she does not quit the organization immediately. The intent to turnover starts with becoming disengaged, leaving to take job roles seriously, remaining absent from work, engaging in negative behaviors such as bullying, counterproductive work behaviors, uncivil behaviors, and rudeness towards a customer, co-workers, and even bosses. All these negative behaviors move him/her closer to ultimately quitting the organization [7]. Nurse managers who exhibit authentic leadership behaviors motivate their subordinate nurses to identify more strongly with their respective hospitals and become engaged in their jobs. This, in turn, increases new graduate nurses' confidence in their ability to handle stressful work situations and ultimately, lowers their intentions to exit the organization. Backman et al. [24] found that nurses' beliefs in their ability to cope with the physical and psychological demands of their job had a significant and negative effect on turnover intentions. On the above-based arguments, it is reasonable to hypothesize:

**Hypothesis 2.** *Personal identification mediates the effect of authentic leadership on a nurse's turnover intentions.*

### The mediating role of organizational identification

When followers identify with their organizations, their sense of belongingness to their respective organizations enhance considerably [25]. Nurses have to interact directly with the patients and are responsible to provide quality care to patients. The pressure to perform better is highest on nurses since hospitals rely on them to claim quality patient care aspect. In such competitive circumstances, the authentic leadership characteristics of a nurse leader are extremely important to keep subordinate nurses focused on their working roles and responsibilities and remain committed to the objectives of the hospital. Authentic leaders are able to retain employees even during uncertain, turbulent, competitive, and extremely challenging environments [10]. Authentic leaders enable followers to understand their leaders deeply and they are willing to trust their leaders more often. Since authentic leaders do not believe in concealing information, sensitive strategic planning, and other critical aspects of the organizational processes, followers identify themselves with their leaders [26]. Through the norm of reciprocity, followers also share their feelings, ideas, and information with their leaders. They do not feel insecure to discuss new ideas. They know that if their ideas are not successful, their leaders would not blame them.

On the other hand, if the ideas are successful, practical, and useful to the organizations, their leaders would provide them with every possible resource to implement such ideas. Hence, they are not afraid to speak up and feel more fulfilled at their jobs [20]. This aligns with the influential role of the follower-leader relationships proposed in authentic leadership theory [27]. Managers who demonstrate authentic leadership behaviors by maintaining high moral standards that are consistent with their actions, involving followers in the process of decision-making, being aware of their own and others' strengths and weaknesses, and promoting openness, are able to build positive and honest interactions with followers [9, 28].

Previous research has found that organizational identification can lead to job-related attitudes and behavioral outcomes [29, 30]. Using a meta-analysis of organizational identification, he posits that employees who have identified themselves with the organization to a strong extent seem to effectively accept and fit themselves with organizational values and subsequently become emotionally attached to the organization. He also found evidence of a negative relationship between organizational identification and turnover intention. However, the theoretical perspective clarifying the relationships among these constructs is still missing in the existing literature [31]. Prior research has also shown that employees with high organizational identification tend to remain with the organization [32] and are strongly committed to their work [33]. Conversely, employees who have weaker identification with the organization may want to separate themselves from it and view themselves as not having the same goals, values and attributes as the organization. They tend to behave in a manner that is unfavorable to organizational practices and directions and may consider leaving [31]. Based on the above discussion, it can be argued that in a situation characterized by weak identification, employees may think about quitting. Hence, it can be hypothesized:

**Hypothesis 3.** *Organizational identification mediates the effect of authentic leadership on a nurse's turnover intentions.*

### Design

Nurses of private hospitals of Pakistan were the participants in this study. This study used a cross-sectional survey design administered through anonymous self-report questionnaires. This survey was conducted with the nursing workforce from eleven private general hospitals located in major cities of Pakistan. The number of beds available in these hospitals ranges from 200 to 500. Data were collected during May-June 2016. Using a convenience sampling method, the questionnaires were sent out to the targeted respondents through Human Resource managers of each hospital. Participation was voluntary. Out of 1100 questionnaires distributed, 457 were returned, representing a response rate of 42%. Owing to several significant missing data, only 432 questionnaires were considered appropriate for further analysis. The study was approved by the executive management committee of each hospital. After approval was received, each participating hospital assigned its Human Resource manager to coordinate with the researcher to facilitate the data collection process as described



above. All questionnaires were returned anonymously to protect participants' privacy.

## Measures

Authentic leadership was measured using the Authentic Leadership Questionnaire [10], consisting of 16 items that measure four components of authentic leadership behavior: self-awareness (4 items), balanced processing (3 items), relational transparency (5 items), and internalized moral perspective (4 items). Participants rated each item on a five-point Likert scale ranging from 0 = "Not at all", to 4 = "Frequently, if not always". Walumbwa and colleagues (2008) [10] have established acceptable reliability and validity of this instrument. The questionnaire validity was demonstrated through convergent, discriminant and content validity (Walumbwa et al., 2008) [10]. Among graduate nurses, Laschinger and colleagues (2015) [34] reported Cronbach's alpha of .96, and in Giallonardo et al.'s (2010) study the subscales Cronbach's alphas ranged from .69 to .88. In the current study overall, Cronbach's alpha was .88, while the subscales ranged from .83 to .91. Personal identification was assessed using the Relational Identification Scale [17]. It consists of four items rated on a five-point Likert scale ranging from 1 = "Strongly Disagree" to 5 = "Strongly Agree". Sluss and colleagues [17] conducted discriminant, face and content validity to establish an instrument's validity. Also, the researcher established the instrument's reliability (Cronbach's alpha = .85) and in this study Cronbach's alpha was .89. The Organizational Identification Scale developed by Sluss and colleagues [17] was used to assess nurses' organizational identification. The scale consists of three items that respondents rated on a five-point Likert scale from 1 = "Strongly Disagree" to 5 = "Strongly Agree". The validity of the scale was established through discriminant, face and content validity [17]. The scale showed acceptable internal consistency with Cronbach's alpha of .85 to .88 in Sluss et al.'s (2012) [17] study and .91 in the current study. Intent to leave one's current job was measured with three items from the Turnover Intention Scale (Kelloway, Gottlieb, & Barham, 1999) rated on a five-point Likert scale (ranging from 1 = "strongly disagree" to 5 = "strongly agree"). The scale has shown acceptable Cronbach's alpha from .87 and .92 (Laschinger & Grau, 2012) [20] and demonstrated construct validity (Kelloway, Gottlieb, & Barham, 1999; Laschinger, Finegan, Wilk, 2011). In this study, Cronbach's alpha was .85.

## Data Analysis

Prior to the main analysis, multicollinearity among variables was checked through the variance inflation factors (VIF). No issue was detected, since all VIF values were lower than 5 and not beyond the threshold of 10 [Hair, Black, Babin, & Anderson, 2010]. Because the data were collected from eleven hospitals, a breach of an assumption of observations' independence and the effect of clustering may occur. One-way analysis of variance (ANOVA) and intra-class correlation (ICC) tests was considered to assess the effect of participants who work in the same hospital on their responses to the outcome variable. The analyses were performed in R software version 3.2.1 (R Core Team, 2015). ANOVA

result ( $F = 1.427, p = 0.137$ ) and ICC coefficient with its respective 95% confidence intervals (0.008, CI = -0.006 to 0.039) reported no systematic between-cluster variance in nurses' turnover intentions. These results support the further analysis to be carried out at the individual level (Bliese, 2000).

Among the respondents, the majority (67%) were between the ages of 26-35 years old and another 22% were older than 35 years. A total of 59% had worked at the relevant hospital for less than five years, 28% between five and ten years and 13% for more than ten years. The vast majority (95%) of the participants were female. The Statistical Package for Social Sciences (SPSS) version 22 was used to conduct the statistical analysis. Descriptive statistics, including means, standard deviations, scale reliabilities, and Pearson's  $r$  correlations were used to describe the sample and research variables. Pearson correlation analysis was used to test the relationships among the variables. Cronbach's alpha reliability scores were calculated to test the internal consistency of the scales. Overall, nurses perceived their managers to have a moderate level of authentic leadership ( $M = 2.68, SD = 0.82$ ). They reported a moderate level of personal identification with their leaders ( $M = 2.73, SD = .85$ ) and identification with the organization ( $M = 2.34, SD = .68$ ) on a 5-point Likert scale.

The participants in our study reported low intentions to leave their current position ( $M = 2.27, SD = 1.04$ ). Correlations among the major variables of the study were assessed for significance. Authentic leadership was related to personal identification (.412), identification with the organization (.393), and job turnover intentions (-.268). Personal identification with the leader was significantly associated with job turnover intentions (-.139), and organizational identification with the leader was also significantly associated with job turnover intentions (-.196).

In the measurement model, authentic leadership was modeled as a second-order latent variable with its four subscales as observed variables. Personal and organizational identification, and job turnover intentions were modeled as latent variables with their respective indicators. Our measurement model showed satisfactory fit ( $\chi^2(542) = 1813.075, RMSEA = .048, SRMR = .051, TLI = .94, CFI = .94, p < .001$ ).

Standardized factor loadings ranged from .74-.97 ( $p < .001$ ) [Table 1]. We also generated 95% confidence intervals for the indirect effects by using bootstrapping with 500 iterations. The indirect effect is determined statistically significant when the confidence interval does not include zero (Lillis, Levin, & Hayes, 2011). Path model testing was conducted using the sample in its entirety. Results from testing of the path model are presented in Table 2 [Table 2]. The model accounted for 14.7% of the variance in personal identification, 41.1% of the variance in the organizational identification, and 39.86% of the variance in turnover intentions. As shown in Table 2, the results revealed that authentic leadership had a significant indirect effect on turnover intentions via personal identification with a leader ( $\beta = -0.321, 95\% \text{ C.I.} = 0.169, 0.374$ ). The 95% confidence intervals did not contain zero, thus indicating statistical si-

**TABLE [1]** Descriptive Statistics

Variables	Mean (SD)	$\alpha$	1	2	3	4	5	6	7	8
1 Age	31.2 (5.9)		1							
2 Gender	.93(.04)		.032	1						
3 Tenure	4.5(3.7)		.216*	.029	1					
4 Education	14.3(3.7)		.138*	.018	.027	1				
5 Authentic leadership	2.68(.82)	.88	-.032	.146*	.026	-.011	1			
6 Personal identification	2.73(.85)	.89	-.015	.179*	.068	-.077	.412**	1		
7 Organizational identification	2.34(.68)	.91	.03	.04	.01	.03	.393*	.115	1	
8 Turnover intentions	2.27(1.04)	.85	.049	.042	.082	.041	-.268*	-.139**	-.196**	1

\* $p < .05$ ; \*\* $p < .01$ ; \*\*\* $p < .001$

**TABLE [2]** Path model and indirect effects

Alternate paths	Std. estimate	Std. error	t-value	95% confidence interval	
				Low	High
AL->PI->TI	-.321	.011	1.584	.169	.374
AL->OI->TI	-.287	.016	1.263	-.116	-.224

Note: AL for authentic leadership; PI for personal identification; OI for organizational identification; TI for turnover intentions

gnificance (Hayes, 2013), and the effect of the indirect path was medium-to-large (Kenny, 2015). The indirect path from authentic leadership to turnover intentions via organizational identification was also significant ( $\beta = -0.287$ , 95% C.I. =  $-0.116$ ,  $-0.224$ ), and the 95% confidence interval did not contain zero, thus supporting H3.

## Discussion

The aim of this study was to examine how supervisor nurses' authentic leadership affects the turnover intentions of subordinate nurses through intervening variables. Our results support that authentic leadership could help in retaining nurses by decreasing their intentions to quit [20, 34]. Consistent with authentic leadership theory, we found that authentic leadership had a direct influence on nurses' identification with their leader and the organization. It has been proposed that leaders are viewed by organizational members as representatives of the organization who help employees learn about the organizational culture, values, and goals [17]. When employees recognize attractive characteristics of the organization that is congruent with their own beliefs and values, they feel a sense of pride in their organizational membership [18]. This facilitates the creation of a positive image of the organization in employees, which in turn aids in the development of their identification with the organization. The direct influence of authentic leadership on nurses' organizational identification was significant, though contrary to the findings of a previous nursing study.

Wong and colleagues [21] found that the effect of authentic leadership on nurses' workgroup identification was significant only through their personal identification with

the authentic leader. This provides nurses with needed support to advance their skills and knowledge, which strengthens their connection to the organization, and subsequent identification. As predicted, we found that new graduate nurses' personal identification mediated the relationship between authentic leadership and turnover intentions. The evidence suggests that nursing managers that engage in authentic leadership behaviors make subordinate nurses to feel safe and secure while talking and sharing ideas with them [17]. This consequently increases their identification with their leaders and they start to find their jobs and work more meaningful and hence do not quit the organizations.

Because authentic leaders identify followers' strengths and weaknesses and create supportive work environments that allow them to build and develop their skills and knowledge, while emphasizing the goals and values of the organization [9], followers come to view the organization in a positive and desirable way, leading them to identify with the organization as well as the leader [15, 17]. Authentic leaders help employees to find meaning in their jobs, cope with stressful situations, and perform better by being positive and optimistic about the outcomes. These traits prove to be useful for employees to stay in organizations. Employees display intentions to quit only when they do not find their working environment meaningful and become dissatisfied with jobs and face burnout situations due to work stressors. These situations are highly likely in nursing profession since nurses have to deal with patients, attendants, doctors, and other stakeholders round the clock [17] and there is not let off in their extremely emotionally exhaustive jobs. Our results indicate that authentic leaders through the mechanism of identification may motivate nurses to stay in their position as they recognize the benefits of

belonging to an organization where they are provided with various opportunities to advance their career. When leaders evoke self-identity in terms of the leader and the organization, nurses recognize the value and goals they share with both the leader and the organization. This awareness contributes to their confidence in their ability to carry out their responsibilities and perform effectively, which subsequently reduces their intentions to leave their jobs.

### Managerial Implications

Our findings have numerous implications for future research, nursing management, and policy. From a research standpoint, our study provides support for authentic leadership theory, which proposes that authentic leaders influence followers' work attitudes and behaviors through the mechanisms of identification [9]. The results of this study suggest that authentic leaders who facilitate the development of nurses' personal and organizational identification are more likely to lower their intentions to leave. We recommend that future studies examine additional mechanisms by which authentic leaders and identification influence nurses' intentions to leave, such as, trust in their leader, positive emotions, and optimism. From a practical standpoint, the results of our study identified a number of implications for healthcare organizations. Specifically, the finding that authentic leaders positively influenced nurses' personal and organizational identification suggests the need for authentic leadership development programs that provide nursing managers with tools to become more authentic. Leadership development interventions may include self-reflection activities to raise leaders' self-awareness [12], or training sessions that teach leaders skills to integrate diver's points of view. Implementation of training initiatives that focus on developing organizational identification in nurses is a valuable strategy to increase the confidence in their ability to work effectively, especially, in stressful work environments. An organization can influence nurses' organizational identification by developing a sense of pride in belonging to the organization. This can be achieved by communicating organizational goals and values through organization newsletters and events.

Our study highlights the critical role that authentic leaders play in influencing nurses' intentions to leave their current position by enacting the four dimensions of authentic leadership. Also, assessing the developmental needs and providing guidance and support will allow nurses to develop personal identification with their manager. Authentic le-

aders help employees to find meaning in their jobs, cope with stressful situations, and perform better by being positive and optimistic about the outcomes. These traits prove to be useful for employees to stay in organizations. Employees display intentions to quit only when they do not find their working environment meaningful and become dissatisfied with jobs and face burnout situations due to work stressors. These situations are highly likely in nursing profession since nurses have to deal with patients, attendants, doctors, and other stakeholders round the clock [22] and there is not let off in their extremely emotionally exhaustive jobs.

Through identification, nursing managers can encourage nurses to evaluate their strength and weakness, allowing both managers and nurses to create and implement development and training plans that help nurses advance their knowledge and skills. Organizations should strive to recruit and promote managers who demonstrate all four features of authentic leadership [21]. Policymakers should pay close attention to nurses' socialization programs. Well-defined socialization activities will provide opportunities to introduce nurses to the workplace culture, and allow them to develop positive relationships with their managers and peers. These activities can reduce stress and promote confidence in their ability to overcome work challenges.

### Limitations and Future Research Areas

A potential limitation of our study is the use of cross-sectional data, as this prevents strong causal inference [12]. Future research needs to examine nurses' transition experience over time by employing a longitudinal design. Generalizability of the study findings is limited to nurses working in acute care and community settings in Pakistan. In cross-sectional studies, the use of self-report measures are associated with response bias [12]. Participants completed all measures at the same time, which may increase the risk for common method variance (CMV). Nevertheless, it has been argued that well-designed, validated, and multi-item psychometric measures have the potential to reduce CMV biases. The results of this study suggest that authentic leaders who facilitate the development of nurses' personal and organizational identification are more likely to lower their intentions to leave. We recommend that future studies examine additional mechanisms by which authentic leaders and identification influence nurses' intentions to leave, such as, trust in their leader, positive emotions, and optimism.

**Authors declare no conflict of interest**

## References

- [1] O'Brien-Pallas L, Griffin P, Shamian J, Buchan J, Duffield C, Hughes F, Stone PW. The impact of nurse turnover on patient, nurse, and system outcomes: a pilot study and focus for a multicenter international study. *Policy, Politics, & Nursing Practice* 2006; 7(3): 169-179.
- [2] Hairr DC, Salisbury H., Johannsson M, Redfern-Vance N. Nurse staffing and the relationship to job satisfaction and retention. *Nursing Economics* 2014; 32(3): 142.
- [3] Nei D, Snyder LA, Litwiller BJ. Promoting retention of nurses: a meta-analytic examination of causes of nurse turnover. *Health care management review*. 2015;40(3), 237-253.
- [4] Yang Y, Liu YH, Liu JY, Zhang H F. The impact of work support and organizational career growth on nurse turnover intention in China. *International Journal of Nursing Sciences* 2015; 2(2):134-139.
- [5] Tett RP, Meyer JP. Job satisfaction, organizational commitment, turnover intention, and turnover: path analyses based on meta-analytic findings. *Personnel psychology* 1993; 46(2): 259-293.
- [6] Griffeth RW, Hom PW, Gaertner S. A meta-analysis of antecedents and correlates of employee turnover: Update, moderator tests, and research implications for the next millennium. *Journal of management* 2000; 26(3): 463-488.
- [7] Fernet C, Trépanier SG, Demers M, Austin S. Motivational pathways of occupational and organizational turnover intention among newly registered nurses in Canada. *Nursing outlook*, 2017;65(4), 444-454.
- [8] Karatepe OM, Avci T. The effects of psychological capital and work engagement on nurses' lateness attitude and turnover intentions. *Journal of Management Development* 2017; 36(8): 1029-1039.
- [9] Avolio BJ, Gardner WL, Walumbwa FO, Luthans F, May DR. Unlocking the mask: A look at the process by which authentic leaders impact follower attitudes and behaviors. *The leadership quarterly*, 2004;15(6): 801-823.
- [10] Walumbwa, FO, Avolio, BJ, Gardner, WL, Wernsing, TS, Peterson, SJ. Authentic leadership: Development and validation of a theory-based measure. *Journal of management* 2008; 34(1):89-126.
- [11] Avolio BJ, Gardner WL. Authentic leadership development: Getting to the root of positive forms of leadership. *The leadership quarterly*, 2005;16(3): 315-338.
- [12] Leroy H, Palanski ME, Simons T. Authentic leadership and behavioral integrity as drivers of follower commitment and performance. *Journal of Business Ethics* 2012;107(3): 255-264.
- [13] Masterson SS, Lewis K, Goldman BM, Taylor MS. Integrating justice and social exchange: The differing effects of fair procedures and treatment on work relationships. *Academy of Management journal*, 2000;43(4): 738-748.
- [14] Steffens NK, Haslam SA, Reicher SD. Up close and personal: Evidence that shared social identity is a basis for the 'special' relationship that binds followers to leaders. *The*
- [15] Sluss, DM, Ashforth BE. Relational identity and identification: Defining ourselves through work relationships. *Academy of Management Review*, 2007;32(1): 9-32.
- [16] Luthans F, Norman S, Hughes L. Authentic leadership. *Inspiring leaders* 2006; 84-104.
- [17] Sluss DM, Ployhart RE, Cobb MG, Ashforth BE. Generalizing newcomers' relational and organizational identifications: Processes and prototypicality. *Academy of Management Journal* 2012; 55(4): 949-975.
- [18] Zhu W, Sosik JJ, Riggio RE, Yang B. Relationships between transformational and active transactional leadership and followers' organizational identification: The role of psychological empowerment. *Journal of Behavioral and Applied Management*, 2012;13(3): 186-199.
- [19] Galvin BM, Lange D, Ashforth BE. Narcissistic organizational identification: Seeing oneself as central to the organization's identity. *Academy of Management Review* 2015; 40(2): 163-181.
- [20] Laschinger HKS, Wong CA, Grau AL. Authentic leadership, empowerment and burnout: a comparison in new graduates and experienced nurses. *Journal of nursing management*, 2013;21(3), 541-552.
- [21] Wong, CA, Cummings GG, Ducharme L. The relationship between nursing leadership and patient outcomes: a systematic review update. *Journal of nursing management*, 2013; 21(5):709-724.
- [22] Fallatah F, Laschinger HK, Read EA. The effects of authentic leadership, organizational identification, and occupational coping self-efficacy on new graduate nurses' job turnover intentions in Canada. *Nursing outlook*, 2017; 65(2): 172-183.
- [23] Carmeli A, Atwater L, Levi A. How leadership enhances employees' knowledge sharing: the intervening roles of relational and organizational identification. *The Journal of Technology Transfer* 2011; 36(3): 257-274.
- [24] Backman A, Sjögren K, Lövheim H, Edvardsson D. Job strain in nursing homes—Exploring the impact of leadership. *Journal of clinical nursing*. available at: <https://www.diva-portal.org/smash/get/diva2.../FULLTEXT01.pdf>, retrieved at 18<sup>th</sup> June 2018
- [25] Avolio BJ, Walumbwa FO, Weber TJ. Leadership: Current theories, research, and future directions. *Annual review of psychology* 2009;60: 421-449.
- [26] Gardner WL, Avolio BJ, Luthans F, May DR, Walumbwa F. "Can you see the real me?" A self-based model of authentic leader and follower development. *The Leadership Quarterly*, 2005;16(3): 343-372.
- [27] Munyaka SA, Boshoff AB, Pietersen J, Snelgar R. The relationships between authentic leadership, psychological capital, psychological climate, team commitment and intention to quit. *SA Journal of Industrial Psychology*, 2017;43(1): 1-11.
- [28] Oh J, Oh S. Authentic leadership and turnover intention: does organizational size matter?. *Leadership & Organization Development Journal* 2017; 38(7): 912-926.
- [29] Lin CP, Liu ML. Examining the effects of corporate social responsibility and ethical leadership on turnover intention. *Personnel Review* 2017; 46(3): 526-550.
- [30] Shen Y, Jackson T, Ding C, Yuan D, Zhao L, Dou Y, Zhang Q. Linking perceived organizational support with employee work outcomes in a Chinese context: Organizational identification as a mediator. *European Management Journal* 2014;32(3):406-412.
- [31] Lee ES, Park TY, Koo B. Identifying organizational identification as a basis for attitudes and behaviors: A meta-analytic review. *Psychological bulletin*, 2015;141(5): 1049.
- [32] Brammer S, He H, Mellahi K. Corporate social responsibility, employee organizational identification, and creative effort: The moderating impact of corporate ability. *Group & Organization Management*, 2015;40(3): 323-352.
- [33] Van Knippenberg, D, Sleebos E. Organizational identification versus organizational commitment: self-definition, social exchange, and job attitudes. *Journal of organizational Behavior* 2006;27(5):571-584.
- [34] Laschinger HKS, Fida R. A time-lagged analysis of the effect of authentic leadership on workplace bullying, burnout, and occupational turnover intentions. *European Journal of Work and Organizational Psychology* 2014; 23(5):739-753.