

**Transformational Leadership, Workplace Spirituality and
Employee Well-Being: A Mixed-Method Study**

by
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ABSTRACT

Transformational Leadership, Workplace Spirituality and Employee Well-Being: A Mixed-Method Study

By Margaret C. McKee

This thesis explores empirical relationships between three phenomena in a health care organization, namely transformational leadership, workplace spirituality and employee well-being. A mixed method research program was developed and implemented in the form of three studies. In the first study, multilevel modeling was used to analyze survey data from a sample of 273 health care workers and test a proposed mediation model. As hypothesized, regression and mediation analyses revealed the effects of transformational leadership on employees' emotional and spiritual well-being were fully mediated by workplace spirituality. In the second study, a field experiment with 243 health care workers in the same organization was used to test the longitudinal effects of a training intervention related to transformational leadership. Again, multilevel analyses were used to analyze survey data collected at two time intervals, with a three month time lapse, and demonstrated a significant main effect of training. As in the first study, subsequent regression and mediation analyses demonstrated support for the hypothesized mediation model, but only relative to employees' emotional well-being. In the final qualitative study, in-depth interviews were used to explore the experiences of a select group of seven leaders who had participated in the training study and experienced the greatest increases in mean leadership ratings. This study revealed a definite focus on two dimensions of transformational leadership behaviour, namely individualized consideration and intellectual stimulation. The interviews also revealed that the challenges faced by leaders implementing their goals were both personal and organizational. Participants identified numerous benefits from their training, including increased communication, improved collaboration and, in some cases, better work group relations. Based on the findings of all three studies, a research agenda is proposed to explore in greater detail various aspects of these findings. Implications for research and practice are also discussed.

September 12, 2008

Dedication and Acknowledgments

I dedicate my thesis to the memory of my maternal grandmother, Mary Eileen Duffy McGovern, and to her commitment to learning. In spite of considerable personal sacrifice, my Grandmother McGovern ensured her daughters had the benefit of a post-secondary education. Her legacy lives on in my mother, Clare Eileen McGovern McKee, who by her own example instilled in her children recognition of the importance of lifelong learning. When I decided to pursue my doctorate, my mother was one of my biggest supporters. These past few years in particular, she has helped by encouraging me and, at times, by reassuring me that I could see this through to the end. She has stressed that I have been given a wonderful opportunity and that I had better take full advantage.

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THE EFFECTS OF TRANSFORMATIONAL LEADERSHIP ON EMPLOYEE WELL-BEING: A MIXED METHOD STUDY

Chapter 1 – Introduction

Today's work organizations differ significantly from those of 40, 20, 10 and even five years ago. The wide scale introduction of computer technology in the 1960s, the shift toward global operations in the 1980s, the significant organizational restructuring arising out of the economic recessions of the 1990s, and the move toward outsourcing and sub-contracting in the current century have all taken their toll on organizations and their employees. Such changes and their associated effects have also presented enormous leadership challenges. Organizations have tried to address such issues with leadership training and development. In fact, some \$50 billion is reportedly spent each year by North American corporations on various leadership development and training programs (Raelin, 2004). And yet, what do we know about the impact of such initiatives?

In one of the largest empirical evaluations of corporate training initiatives, Saari, Johnson, McLaughlin, and Zimmerle (1988) found that developmental programs were seldom evaluated in any extensive or rigorous fashion. Effects, therefore, have been very difficult to quantify. More recently, Collins and Holton III (2004) completed a meta-analysis of 103 leadership development studies conducted over the last 19 years and noted a growing focus on training in transformational leadership.

Transformational leadership is one of the most studied theories of leadership (Bono & Judge, 2004). Leaders adopting such a style are employee focused and make concerted efforts to inspire and motivate employees to attain shared goals, to stimulate

employees' intellectual development and provide opportunities for meaningful work, to demonstrate interest in their employees' personal and professional development, and to model and promote ethical behaviour consistent with the values of the organization (Bass, 1985). As will be detailed later, research has shown many positive individual and organizational outcomes associated with transformational leadership, including improved employee satisfaction, commitment and performance. Despite these benefits, Collins and Holton III (2004) reported comparatively little transformational leadership training occurring and limited reporting of the results from such training. They also pointed out that few empirical studies have been conducted of feedback interventions and suggested a need for more research of on-the-job training experiences. For example, Block and Manning (2007) reported fewer than a dozen articles on leadership training interventions in the health care sector were published between 1960 and 2005. Given the critical nature of the health care system, they also echo the call for greater study of leadership training initiatives.

Another area where scholars are encouraged to initiate inquiries is in the domain of individual well-being (Seligman, 2002), which is defined as "pleasant emotions, low levels of negative moods, and high life satisfaction" (Diener, Lucas, & Oishi, 2002, p. 63). A limited number of organizational scholars have explored well-being in work contexts, finding well-being to be positively associated with a supportive team leader (Holman, 2002) and job satisfaction (Diener, Suh, Lucas, & Smith, 1999), and negatively influenced by large work units and time pressures (Pekkarinen, Sinervo, Perälä, & Elovainio, 2004). Research has also shown that supervisor behaviour has a greater effect on employee mental well-being than many other factors, including stress, life and work

events (Gilbreath & Benson, 2004) and transformational leadership in particular has been positively associated with employee psychological well-being (Arnold, Barling, Turner, Kelloway, & McKee, 2007). Few intervention studies to increase subjective well-being have been undertaken, even though such initiatives are reported to produce positive effects, such as increased positive affect, increased volunteerism, and more positive work behaviors (Diener, et al., 2002). Not surprisingly, scholars have been encouraged to conduct more research in the area, specifically to explore the developmental processes involved in well-being (Diener, et al., 2002) and initiate interventions directed at front line employee (Sparks, Faragher, & Cooper, 2001). With a growing focus on building healthy workplaces (Kelloway & Day, 2005a), organizational scholars in particular are urged to study employee well-being (Wright & Doherty, 1998). Recently, such research into work-related employee well-being has been termed a neglected area that is essential to enhancing organizational effectiveness (Baptiste, 2008). The decision by the International Association of Applied Psychology to launch a new journal in summer 2008 devoted to health and well-being is further evidence of the growing recognition of the importance of research in the field (<http://www3.interscience.wiley.com>).

Management scholars are also being encouraged to conduct empirical work in the workplace spirituality domain, which has been characterized as a “burgeoning new field” (Benefiel, 2007, p. 947) with “an active and growing research agenda” (Fornaciari, Sherlock, Ritchie, & Lund Dean, 2005). In keeping with its status as an emergent field, there is no one accepted definition for this phenomenon. However, common themes in the literature are that workplace spirituality promotes a work culture that encompasses shared values, promotes feelings of interconnectedness within the workplace and the

larger community, and responds to the basic human need for work that is meaningful. Scholars are encouraged to explore the connections between workplace spirituality and phenomena such as work group cohesion, job satisfaction and, of particular relevance to this research program, leadership (Giacalone & Jurkiewicz, 2003).

To date, there has been relatively little empirical study of workplace spirituality and leadership. Scholars have conceptualized frameworks for spiritual leadership and organizational transformation (Benefiel, 2005a, 2005b; Delbecq, 1999, 2006; Fry, 2003). The few empirical studies conducted to date exploring linkages between these two phenomena have focused on organizational and financial performance outcomes (see for e.g. Fry, 2005; Fry & Matherly, 2006; Fry & Slocum, 2008; McKee, 2005; Milliman, Czaplewski, & Ferguson, 2003; Rego & Pina e Cunha, 2008). Additional studies are required to validate the results of these early investigations, and uncover more about the process through which these results are realized. Research using other outcomes measures is also warranted. Employee well-being is one outcome that has attracted very little attention to date. Given the positive linkages between spirituality and well-being, and leadership and well-being, research into the relationships between all three of these phenomena could be of value in the promotion of healthy workplaces.

The present document is a response to the need for investigation into possible relationships between and among transformational leadership, workplace spirituality and employee well-being. The research program described herein was designed as a mixed method study of a transformational leadership training intervention in a health care organization. Specifically, surveys, interviews and participant observation were used to collect data from leaders and their employees, both before and after the training program.

These methods are considered appropriate for organizational research (Glesne, 2006; Weaver & Trevino, 1994). As will be discussed in more detail in the research approach, the chosen data collection methods were also in keeping with recommendations from scholars in the leadership, workplace spirituality and well-being fields. In all three domains, researchers recommend the use of multiple methods because of the complex nature of the phenomena.

The specific objectives of the three studies in the research program were to 1) test a hypothesis that workplace spirituality mediates the effects of transformational leadership on employee well-being, 2) assess the longitudinal effects of a transformational leadership training intervention on employees' perceptions of their well-being, and 3) explore in more depth the individual experiences of leaders who were trained and succeeded in applying the principles of transformational leadership on the job.

The potential contributions and applications for knowledge from the proposed research study are significant. As noted earlier, even though an estimated \$50 billion is spent annually on leadership development programs in North America (Raelin, 2004), such training initiatives are rarely assessed with formal criteria (Burke & Day, 1986; Collins & Holton III, 2004; Saari, et al., 1988), or a mixed method approach (Antonakis, Avolio, & Sivasubramaniam, 2003; Conger, 1998). Examining the effects of such training in a fully functioning organization with a large employee population is a rare opportunity because of management concerns about cost and disruption (Frese, Beimeel, & Schoenborn, 2003) and yet such evaluations are bound to generate new insights that can be used to improve training effectiveness. This is especially true given that the study

examines the development experience from the perspective of both leaders and their direct-reports, again something that is not frequently undertaken in organizational studies (Alvesson & Sveningsson, 2003a, 2003b). It also uses sophisticated techniques for the survey analysis that account for the hierarchical nature of the data that is employees associated with particular leaders. Again, few leadership studies have used this analytical approach, but it is believed to provide results with greater validity (Bliese, Halverson, & Schriesheim, 2002; Hofmann, Griffin, & Gavin, 2000). The insights from program evaluation research under such rigorous conditions could be used by scholars, consultants and organizational training specialists to create more effective training programs and, ideally, healthier workplaces.

Considering the study from the perspective of organizations and their employees, there are also many potential positive outcomes from such an inquiry. Time spent at work is said to equal half of our waking life (Wrzesniewski, 2002) and the work environment has not been a very positive one for many employees. The massive layoffs and reorganizations that occurred in many organizations during the 1980s and 1990s have had a negative effect on many employees (Mohamed, Wisniewski, Askar, & Syed, 2004). And the cuts in organizational staffing levels have continued, with one estimate of an additional 2.7 million jobs being eliminated in corporate America between 2000 and 2003 (Tsui & Wu, 2005). In many organizations, people are expected to work longer and more intensely, with the associated outcomes including stress, sickness, injury and even workplace violence (Naylor, 2004). Dealing with such occupational stress has been described as a “leadership challenge” for those concerned with the well-being of their employees (Quick, Quick, Nelson, & Hurrell, 1997).

In summary, this research program addresses three gaps in the literature. It provides insight into inter-relationships between three phenomena; transformational leadership, workplace spirituality and employee well-being. It provides empirical data from a rigorous assessment of a leadership training initiative with pre and post-test measures from the perspective of employees. Lastly, it explores in-depth the experiences of those trained in transformational leadership to understand how they applied their training and what challenges and benefits they encountered in doing so. As such, it provides a rare opportunity for insight into the leadership development process within a fully functioning organization.

With this overview of the research program completed, I will now proceed with a discussion of the relevant literature in Chapter 2. In Chapter 3, I will present the overall research method and context. Then, in Chapters 4, 5 and 6, I will present the three studies in the research program. I will conclude with a general discussion in Chapter 7.

Chapter 2 – Literature Review

To provide an overview of the state of research on transformational leadership, well-being and workplace spirituality, in this chapter I will review the current literature in these areas. I will begin with the literature on leadership, with a specific focus on transformational leadership and my rationale for choosing it as my theoretical model.

Research on Leadership

Over the past 25 years, the subject of leadership has attracted considerable attention from the scholarly community. In their recent meta-analysis, Bono and Judge (2004) reported that 15,000 journal articles have been written on leadership since 1990. Several different models of leadership have been proposed, including transforming and transactional leadership (Bass, 1985; Burns, 1978), servant leadership (Greenleaf, 1977), values leadership (Fairholm, 1991), visionary leadership (Nanus, 1992), charismatic leadership (Conger & Kanungo, 1998), spiritual leadership (Fairholm, 1996; Fry, 2003) authentic leadership (Avolio, Gardner, Walumbwa, Luthans, & May, 2004) and, more recently, spirit-centered leadership (Jue, 2006). Bono and Judge (2004) found that transformational leadership is by far the most commonly used model of leadership in empirical studies, and it has been linked to many positive employee and organizational outcomes.

Burns (1978) developed the idea of the transforming leader versus the transactional leader, conceiving them as end points on a spectrum (Bass, Avolio, & Jung, 1999). Burns (1978, p. 20) saw the transforming leader as one who interacted with his or her employees in such a way so as to “raise each other to higher levels of motivation and morality,” with the key being shared values and goals. He conceived of transforming

leaders as moral agents who are capable of turning employees into leaders. He viewed them as excelling at telling employees who and what they are, and what they are capable of becoming. Alternatively, Burns (1978, p. 21) perceived the transactional leader as short-term oriented and focused on the actual exchanges with employees and the “political and psychic profits” to be maximized.

Bass (1985) built on Burns’ concept of the transforming leader and identified four sub factors, or dimensions, of what he referred to as the transformational leadership style, namely idealized influence, inspirational motivation, intellectual stimulation and individualized consideration. The first of these factors, idealized influence, concerns the behaviour of leaders and the ways in which they role model appropriate behaviour for the rest of the organization. A leader demonstrating this dimension is respected, admired, trusted and most importantly emulated by her or his employees (Bass & Avolio, 1994). The second dimension, inspirational motivation, relates to the ways leaders challenge their employees and provide meaning to their work. Here the leader works to develop team spirit, and displays optimism and enthusiasm. He or she involves employees in envisioning “attractive future states”, and clearly conveys to employees what is required to meet that future state (Bass & Avolio, 1994, p. 3). Employees are inspired to meet the leader’s expectations and actively demonstrate their commitment to meeting the now shared goals and vision. The third dimension of transformational leadership is intellectual stimulation, and it speaks to the leader’s ability to stimulate employees to innovate, and develop new and creative ways to look at challenges and problems. Here the leader provides an environment where ideas can be shared openly and freely without fear of ridicule or criticism, even if the suggestions differ from those proposed by the

leader. Employees not only aid in the development of creative solutions, but they are also actively involved in their implementation (Bass & Avolio, 1994). Individualized consideration is the fourth and final factor of transformational leadership. A leader demonstrating this dimension is one who acts as a coach and mentor, working with employees on an individual basis. Such a leader recognizes the existence of employees' individual needs for both achievement and growth, and works with each employee one-on-one to help them attain their "successively higher levels of potential" (Bass & Avolio, 1994, p. 4). The individually considerate leader engages in two-way interactions with employees, which are characterized by personalized communications and effective listening on the part of the leader. Such a leader uses effective delegation as a tool to develop employees, but actively monitors the individual's progress in such a way as to provide necessary support without the employee feeling "checked on" (Bass & Avolio, 1994, p. 4).

Transformational leadership that is authentic, that is "grounded in values, based in trust and rooted in spirituality," is theorized to create both more moral leaders and more moral organizations (Bass & Steidlmeier, 1999, p. 191). As such it has been described as "ideal moral type" and may possess a spiritual dimension that "underscores not only virtuous behavior, but an attitude of openness to the transcendent meaning of human existence" (Bass & Steidlmeier, 1999, p. 193). Sanders, Hopkins, and Geroy (2003) have proposed that as leaders move along a continuum of transactional, transformational, and transcendental leadership, they also develop spiritually. Given the theoretical linkages between transformational leadership and spirituality, and the fact that a measure of transformational leadership has been shown to be highly reliable and valid (Antonakis, et

al., 2003; Bass, et al., 1999; Lowe, Kroeck, & Sivasubramaniam, 1996), this is the model of leadership that I chose for my study.

Effects of Transformational Leadership

Using this conceptualization of transformational leadership, researchers have conducted thousands of leadership studies in laboratory, classroom and real-life settings. The findings of these studies have demonstrated that transformational leadership provides a number of positive benefits to the organization, organizational leaders and individual employees.

In studies examining performance, Barling, Weber and Kelloway (1996), Kirkpatrick and Locke (1996), and Howell and Frost (1989) found higher performance, both in terms of task and group level financial performance, with transformational leadership. Hater and Bass (1988) found the same effect on individual employee performance, while Howell and Avolio (1993) found improvements in business unit performance, and Keller (1992; 2006) in project team performance.

Transformational leadership has also been found to produce significant results relative to other important organizational outcomes such as positive work attitudes (De Hoogh, et al., 2005), organizational commitment (Bycio, Hackett, & Allen, 1995; Dvir, Kass, & Shamir, 2004; Koh, Steers, & Terborg, 1995; Piccolo & Colquitt, 2006), empowerment (Kark, Shamir, & Chen, 2003) and organizational citizenship (Koh, et al., 1995; Podsakoff, MacKenzie, & Bommer, 1996). Researchers have found significant relationships between transformational leadership and leader satisfaction (Deluga, 1991, 1995; Hater & Bass, 1988; Koh, et al., 1995; Shieh, 1997), and trust in the leader (Arnold, Barling, & Kelloway, 2001; Gillespie & Mann, 2004; Podsakoff et al., 1996).

We also know that there are negative effects of poor-quality leadership. In a comprehensive review of the transformational leadership and mental health literature, Kelloway, Sivanathan, Francis & Barling (2005) detailed how poor quality leadership contributed to negative outcomes. For example, they reported poor leadership increased employee stress levels (Offermann & Hellmann, 1996), contributed to anxiety and depression (Hoel, Rayner, & Cooper, 1999), resulted in high frustration, stress, sense of helplessness and alienation (Ashforth, 1994), and was associated with lower job and life satisfaction, decreased organizational commitment and increased work-family conflict (Tepper, 2000). For the most part these results are based on cross-sectional studies. There are few longitudinal studies of the linkages between leadership and employee well-being (van Dierendonck, Haynes, Borrill, & Stride, 2004).

Given the strong empirical support for the positive benefits of transformational leadership, several scholars turned their attention to the study of the development of this particular leadership style.

Transformational Leadership Training

In their recent meta-analysis of 103 leadership development studies conducted over the last 19 years, Collins and Holton III (2004) reported that, in spite of the interest in transformational leadership, there was little training and reporting of results in this area. They also pointed out that few empirical studies had been conducted of feedback interventions, and suggested a need for more research into on-the-job training experiences.

In the specific area of transformational leadership training, only a small number of scholars have conducted field experiments involving training initiatives. For example,

Dvir, Eden, Avolio and Shamir (2002) conducted a field study where they compared the ratings and performance of military leaders who had been trained in transformational leadership with those who had not been trained. In examining results from both direct and indirect subordinates, they found that the self efficacy of direct subordinates improved, and that indirect subordinates benefited as well with increases in their performance, relative to those subordinates whose leaders had not been trained. Towler (2002) conducted a study with 48 university business students, exposing a treatment group to charisma training, i.e. training to improve their ability to be inspiring role models through their communication style. In a separate evaluation with 102 students from another university, Towler (2003) found that the charisma training, again focused on inspirational motivation and idealized influence communication behaviours, produced significant effects on both trainees and those observing them in terms of their performance on study related tasks. However, reviewers have questioned the generalizability of such studies because of the rather unique nature of the military leader-follower relationship and/or the use of student samples (Towler, 2003).

Despite encouragement for the initiation of quasi-experimental studies in business settings (Hollenbeck, 2002), few studies have been undertaken in the private sector. Barling et al. (1996) conducted the first such study in a field experiment involving 20 managers of a financial services company in a specific geographic region. Managers were randomly assigned to control and treatment groups. Members of the treatment group participated in a one day transformational leadership training session, and then individually received four one-on-one counseling sessions. During these sessions, managers received feedback from direct-report ratings of their transformational

leadership, established personal development goals related to their training and then were monitored in terms of their goal attainment. Members of the control group received neither the training nor the one-on-one counseling. At the end of the treatment period, all managers were again assessed by their direct-reports with the result being that trained leaders were rated significantly more positively than untrained leaders. The researchers examined other outcomes as well and found that the trained leaders became more committed to their organization and that their branch performance, as measured by credit card sales and personal loan sales, also increased significantly.

Kelloway, Barling and Helleur (2000) also used an experimental design to assess the effectiveness of leadership training in a health care setting. Following the model established by Barling et al. (1996), they randomly assigned 40 leaders to one of four groups. One group participated in a day-long workshop, one group received a thirty-minute feedback/counseling session, one group received both training and feedback, and a final control group received neither training nor feedback. Based on post-test assessments by leaders and their direct-reports, both training and counseling were found to be effective means of behavioral change.

Frese et al. (2003) conducted two studies involving the training of 47 mid-level managers from a telecommunications company. Using a quasi-experimental design, the researchers had managers complete a one and half day training session on inspirational communication and found that there were positive effects on the trained behaviours. Follow-up interviews 10 weeks after the training were used to assess whether trainees were making use of their training on the job, and to provide face validity of the training program. More recently, Mullen and Kelloway (2008), using a control group design with

pre- and post-tests, assessed the effects of general and safety-specific transformational leadership training on leaders and their employees in a health care setting. Of particular interest is their finding that employees of leaders receiving the transformational leadership training, in either form, perceived positive differences in their leader's behaviour and their organization's safety climates.

In summary, research thus far has consistently linked transformational leadership with a range of positive individual and organizational outcomes. The few researchers who have conducted field experiments of transformational leadership training initiatives in fully functioning organizations have also produced positive outcomes for individuals and organizations. Researchers are being encouraged to conduct more of these training field experiments and rigorously assess their effects, so that we may develop a deeper understanding of the leadership development process and the way in which transformational leadership generates positive outcomes.

Research on Employee Well-Being

Personal well-being has been studied for some time by behavioural scientists. Diener et al. (2002) report that the first studies were carried out in the early 1900s and that U.S. researchers began wide scale surveys of individual well-being after World War II. However, it is only relatively recently that organizational scholars have focused on well-being. Wright and Doherty (1998, p. 481) suggest that organizational behavior scholars are just now "rediscovering" the role of emotional well-being, commenting "while affect or emotional well-being plays a significant role in various aspects of our work lives, recent organizational research investigating this topic has been rather sparse."

As stated earlier, scholars studying subjective well-being define it broadly as experiencing “pleasant emotions, low levels of negative moods, and high life satisfaction” (Diener, et al., 2002, p. 63). It is also characterized as “an active state consisting of positive affect and high arousal” (Turner, Barling, & Zacharatos, 2002, p. 715). Several measures of well-being have been developed, including scales that assess satisfaction with life (Diener, Emmons, Larsen, & Griffin, 1985), spiritual well-being (Paloutzian & Ellison, 1982), mental and physical health (Goldberg, 1972) and positive well-being (Hess, Kelloway, & Francis, 2005).

Studies conducted using such measures have linked well-being with personality, health, religion, marriage, education, goal setting and job morale (Diener et al., 1999). In terms of work, a few key linkages have already been identified. For example, in their review of 30 years of well-being research, Diener et al. (1999) report a correlation of .44 between job and life satisfaction. They suggest that work may be related to well-being because it provides a source of “positive social relationships”, “a sense of identity and meaning” and an “optimal level of pleasurable stimulation” (Diener et al., 1999, p. 293).

Organizational scholars focusing on employee well-being have identified a host of other possible factors influencing job-related well being, ranging from work patterns, job design, the role of teams and work groups (Turner, et al., 2002) to job insecurity, long work hours, supervisor behaviour, and loss of control at work (Sparks, et al., 2001).

A limited number of organizational scholars have studied well-being in work contexts. For example, Holman (2002) examined employee well-being in call centres and found it is positively associated with high control over work and work procedures, a supportive team leader, and a low level of monitoring. Pekkarinen et al. (2004) studied

the well-being of employees and patients in a long-term care facility, and found that employees who worked in large work units and were time pressured were more stressed, and this negatively affected the residents' quality of life. Gilbreath and Benson (2004) examined the effects of supervisor behaviour on employee well-being and found that leader behaviour had a greater impact on employee mental health than other factors such as stress, life and work events.

Not surprisingly, perhaps, scholars have been encouraged to conduct more research in the area. Diener et al. (2002) called for scholars to undertake studies that explore the developmental processes involving well-being. They noted that few interventions to increase subjective well-being have been undertaken, even though such initiatives can produce positive effects such as increased positive affect, increased volunteerism, and more positive work behaviors. Sparks et al. (2001) suggested a need for studies that explore the impact of interventions on lower level employees, noting that many of the intervention studies conducted to date have focused on executives. Gilbreath and Montesino (2006) identified supervisor behaviours as one of many factors that need to be included in organizational stress audits. Baptiste (2008) said research into employee well-being is a neglected area and has argued that it is essential to enhancing organizational effectiveness.

In summary, while research into well-being has been ongoing for some time, it has only recently captured the interest of management scholars. There is evidence that the work environment can contribute positively to individual well-being, and there are calls for more research to be conducted into the contributing factors. Organizational leadership has been proposed as one such mechanism.

Research on Employee Well-being and Leadership

As just noted, a recent focus of leadership research is on the positive impact of effective leadership on the well-being of employees. In fact, management practices, including leadership, have been conceptualized as part of a “healthy work organization model” proposed by the National Institute for Occupational Health and Safety (Lim & Murphy, 1999). In the management domain, Dutton, Frost, Worline, Lilius, and Kanov (2002) were among the first to suggest ways in which compassionate leaders can positively affect the health of their employees. Few as yet have pursued these ideas with empirical studies (Bono, Foldes, Vinson, & Muros, 2007); however, organizational scholars are advancing models of how leadership and well-being might be related.

Turner et al. (2002) advanced a conceptual argument for the positive impact of transformational leadership on employee well-being stemming from the style’s four dimensions. They comment that “although few academics or business practitioners would argue with the notion that effective leadership contributes to the positive health of an organization, precious little research has focused on the extent to which leadership might make a difference for individual well-being” (Turner et al., 2002, p. 721). Ilies, Morgeson, and Nahrgang (2005) also proposed a model linking leader positive well-being and employee well-being through the influence processes of authentic leadership. At this point, however, few empirical studies have been published providing support for such a relationship. Feldt, Kinnunen and Mauno (2000) found employees experiencing improved leadership relations reported higher levels of coherence, and this positively affected their well-being. Epitropaki and Martin (2005) found longitudinal support for a positive relationship between the perceived quality of leader exchanges and employee

perceptions of their work well-being. Arnold et al. (2007) found support in two separate employee samples for transformational leadership having an indirect, positive effect on employee well-being. Similarly, Bono et al. (2007) found employees whose leaders were perceived as being high on transformational leadership reported higher levels of optimism and enthusiasm, and they posited a potential spillover effect to the organization at large. Lastly, Baptiste (2008) found front-line leadership and relationships to be a predictor of employee well-being at work.

In summary, while much is known about transformational leadership and well-being individually, and strong linkages have been established by researchers in other domains, organizational scholars have only recently begun to consider possible relationships between the two phenomena, and few empirical studies have as yet been published on the topic in management journals.

Research on Well-being and Religion/ Spirituality

During the 1990s, a significant amount of quantitative research was initiated to explore possible linkages between religion/spirituality and health (Koenig, George & Peterson as cited in Larson & Larson, 2003). While criticism has been expressed about the soundness of the research methodologies employed in these studies (Sloan, Bagiella, & Powell, 1999) and the simplistic nature of some of the measures (Diener, et al., 1999), other scholars maintain that significant links do exist (George, Larsons, Koeing, & McCullough, 2000) or at least the evidence is strong enough to warrant further investigation (Miller & Thoresen, 2003).

In their review of quantitative research on the physical and emotional benefits of spirituality, Larson and Larson (2003) reported that studies have demonstrated religious

and spiritual practices are associated with improved health behaviours, such as smoking cessation, diminished alcohol consumption, increased physical activity and more extensive social relationships. Koenig and Larson (2001) suggested that beliefs centering on, for example, compassion and caring can foster optimistic worldviews and well-being. More recently, studies have shown positive linkages between spirituality and lower levels of psychological distress in cancer patients (Laubmeier, Zakowski, & Bair, 2004), higher quality of health life and psychological well-being in female HIV-positive women (Dalmida, 2006), and improved sleep quality and health status in male and female HIV-infected individuals (Phillips, Mock, Bopp, Dudgeon, & Hand, 2006). With such potential benefits, it is perhaps not surprising that Lund Dean and Fornaciari (2007) found, through a survey of the management, spirituality and religion literature, that 17% of empirical studies done by researchers from the domain between 1996 and 2005 were in the health care field.

Scholars have called for “methodologically sound research on linkages among spirituality, religion and health” saying such research is “warranted, feasible and timely” (Miller & Thoresen, 2003, p. 33). Larson and Larson (2003) have encouraged scholars to initiate studies to explore the mechanisms by which spirituality/religion might contribute to positive health behaviours, including relational aspects, i.e. support and sense of community, and cognitive aspects, i.e. stronger sense of meaning, coherence or control.

In summary, while positive linkages have been established between religion/spirituality and health and well-being, there are ongoing calls for study in the area. As in the field of leadership development, the process by which spirituality and health are linked is said to be poorly understood and in need of additional investigation.

The study of spirituality and health is said to be “a genuine frontier for research” (Miller & Thoresen, 2003, p. 33).

Research on Workplace Spirituality

Over the past decade, growing interest in workplace spirituality has been demonstrated in the popular press as well as in academic research (e.g., Tinsley, 2002). Interest has grown among management scholars, practitioners, and professionals, as evidenced by the establishment of the *Academy of Management* interest group on Management, Spirituality, and Religion, the proliferation of MBA programs in the United States offering courses on this topic (Garcia-Zamor, 2003), and the many titles on spirituality and work listed on Amazon dot com. In academia and in the popular press, there has been a recent increase in writings on leadership and spirituality (Bailey, 2001; Benefiel, 2005a, 2005b, 2008; Blanchard, Hybels, & Hodge, 1999; Bowling, 2001; Delbecq, 1999, 2000, 2005; Driscoll & McKee, 2007; Fairholm, 1997; Fry, 2003, 2008; Fry & Matherly, 2006; Fry, Vitucci, & Cedillo, 2005; Graves & Addington, 2002; Hicks, 2002; Hicks, 2003; Kim, 2002; Korac-Kakabadse, Kouzmin, & Kakabadse, 2002; Moxley, 2000) and about the corporate soul and spirituality in the workplace (e.g., Batstone, 2003; Bolman & Deal, 1995; Brown, 2001; Canfield, Hansen, Rogerson, Rutte, & Clauss, 1996; Canfield & Miller, 1996; Fairholm, 1996; Mitroff & Denton, 1999; Pava, 2003). Academic journals helped to foster increased study in this area at the turn of the century by publishing over 200 articles on the topic between 1999 and 2001 (Kale & Shrivastava, 2003), and organizing special issues on the topic.

In spite of all this scholarly attention, the field of workplace spirituality is still considered to be in an emergent state (Dent, Higgins, & Wharff, 2005; Giacalone &

Jurkiewicz, 2003). Accordingly, there is little consensus about the meaning of workplace spirituality. In their recently published *Handbook of Workplace Spirituality and Organizational Performance*, Giacalone and Jurkiewicz (2003) cited some 14 different definitions of the construct, developed between 1975 and 2000. They suggested workplace spirituality is "a framework of organizational values evidenced in the culture that promotes employees' experience of transcendence through the work process, facilitating their sense of being connected to others in a way that provides feelings of completeness and joy" (Giacalone & Jurkiewicz, 2003, p. 6). Geroy (2005) stressed that spirituality in the workplace is also about organizations promoting a sense of meaning and interconnectedness. Spirituality in the workplace has also often been linked to ethics and values (see for e.g. Cavanagh & Bandsuch, 2002), typically in a way that allows for people to align organizational values to their own particular philosophical or religious roots (Weston, 2002). Parsimony is an issue with some definitions. Marques, Dhiman and King (2005) reported sourcing one definition of spirituality that was 116 words long. While a transcendent aspect is included in some definitions, Marcic's (2000) review of 100 books and 100 journals on the topic of spirituality and work found that less than 20% mentioned God or a Divine Presence. In spite of the broad range of views, common themes in the definitions of workplace spirituality are those of shared values, connectedness and community, and meaning and meaningful work.

Given the definitional issues, it is perhaps not surprising that there is a dearth of reliable and validated measures of workplace spirituality. In their recent review of scale development practices in the workplace spirituality domain, Fornaciari et al. (2005) reported that 65 new measures were developed between 1996 and 2004, and yet, due to

limited reporting of development methods and results, it is difficult to assess their integrity. Concerns with newly developed measures include lack of testing with large and representative samples, lack of reporting on internal consistency reliabilities and limited reporting of scale validation efforts (Fornaciari et al., 2005). One of the few new measures of workplace spirituality developed by scholars in the field incorporates 66-items to assess the three dimensions of the inner spiritual life, meaningful work, and community at the three levels of individual, work unit, and organization (Ashmos & Duchon, 2000). The scale was tested with a large sample of almost 700 health care workers from seven cities, but results from the factor analysis actually suggested the presence of seven factors as opposed to the hypothesized three. The authors found support for the individual level items, but not for the work unit or organizational level items. They noted problems with convergent and discriminant validity needed to be addressed. Given the concerns with this scale and other newly developed measures, it is perhaps not surprising that Fornaciari et al. (2005) reported that 67% of workplace spirituality survey studies used pre-existing measures, or developed proxy-measures of workplace spirituality (Jurkiewicz & Giacalone, 2004; Mohamed, et al., 2004; Moore & Casper, 2005; Wheaton & Baird, 2002).

Effects of Workplace Spirituality

The academic literature suggests there are many positive benefits associated with workplace spirituality, among them increased competitive advantage (Fry, 2003; Klein & Izzo, 1996; Krishnakumar & Neck, 2002) and increased organizational performance (Giacalone & Jurkiewicz, 2003; Milliman, et al., 2003). In fact, in a recent review of the literature that considered 87 articles, Dent et al. (2005) found that most authors either

found or hypothesized a positive relationship between spirituality and organizational performance. However, there has been comparatively limited empirical evidence of workplace spirituality and such associated outcomes (Giacalone & Jurkiewicz, 2003).

In an unpublished dissertation, Trott (1996) explored the relationships between organizational commitment, spiritual well-being, general self-efficacy, organizational climate and personal demographic characteristics in a sample of 337 workers in a Fortune 100 engineering and construction company, finding spiritual well-being had a positive effect on the dependent variables.

One of the few published quantitative studies is that of Milliman et al. (2003), who explored the relationship between workplace spirituality and five employee outcomes, namely intent to quit, work satisfaction, job involvement, organizationally-based self-esteem and organizational commitment. Milliman et al. surveyed 200 MBA students, some 70% of whom worked in a variety of primarily for-profit businesses, using an abbreviated version of the Ashmos and Duchon (2000) workplace spirituality scale. Using structural equation modeling, Milliman et al. found support for two of three of their hypotheses relating to work spirituality and job satisfaction, namely meaning in work and sense of community were found to contribute positively to the prediction of job satisfaction, but alignment of values did not. More recently, Markow and Klenke (2005) explored the relationship between organizational commitment, and personal meaning and vocational calling as a test of one of the key linkages in Fry's (2003) spiritual leadership theory. In a sample of clergy leaders, they found evidence that personal meaning alone was not a predictor of commitment, but it was significant when mediated by vocational calling.

Empirical Research on Workplace Spirituality and Leadership

To date, there has been relatively little empirical study of workplace spirituality and leadership. However, scholars such as Fry, Benefiel and Delbeq have conceptualized frameworks for spiritual leadership and organizational transformation. For example, Delbeq (2000, 2006) and Delbecq and Weiss (2000) have worked with executives – especially those in the Silicon Valley – exploring their views of spirituality in the workplace and found greater acceptance than initially posited. He has suggested humility and love as possible means for offsetting leader hubris. Fry (2003) has proposed a theory of spiritual leadership whereby the leader creates a common vision and fosters value congruence across the organization to increase employee commitment and productivity. Fry focuses on the need for organizational leaders to create a vision that will enable employees to feel their life has meaning and makes a difference and, as such, imbue them with a sense of vocational calling. The leader must also foster an organizational culture that is based on altruistic love, so that both leaders and employees experience “genuine care, concern and appreciation for *both* self and others, have a sense of membership, and are understood and appreciated” (Fry & Whittington, 2005, p. 187). Drawing on the work of Burrell and Morgan (1979) and Lonergan (1957, 1972), Benefiel (2005) has proposed a framework by which spiritual leaders can engender organizational transformation.

In terms of empirical work, recent studies have looked at the link between spiritual leadership and increased productivity, sales growth, organizational commitment, and other measures of organizational performance. For example, Sparks and Schenk (2001) found support for linkages between transformational leadership, belief in the

higher purpose of work and outcome measures such as cohesion, satisfaction, effort and performance. Similarly, McKee (2005) studied the relationship between workplace spirituality and transformational leadership, finding indirect effects on health care workers' job satisfaction. Fry et al. (2005) studied the longitudinal effects of spiritual leadership on soldiers' commitment and productivity, finding support for their measure and causal model. Moore and Casper (2005) also found workplace spirituality operating as an intervening variable between transformational leadership and employee turnover. In a case study, Fry and Slocum (2008) found evidence of positive linkages between spiritual leadership and employee spiritual well-being, which in turn had positive effects on employee commitment and productivity.

In summary, the limited empirical research exploring linkages between workplace spirituality and leadership appears to be driven largely by measures of organizational and financial performance. Additional studies are required to validate the results of these early investigations, but additional studies are also warranted with other outcomes measures, with well-being as one suggested alternative. In all cases, scholars echo the need to uncover more about the process through which these results are realized.

Research on Workplace Spirituality and Employee Well-being

As discussed previously, strong positive linkages between religion/spirituality and health have already been established, and researchers continue to find support for these relationships. Few organizational scholars have explored possible relationships between these two constructs in the work environment.

In summary, the field of workplace spirituality is still in an emergent stage and there are comparatively few published quantitative studies. While research on the

linkages between spirituality, religion and health – of which well-being is one aspect – has been ongoing for some time, there has yet been little equivalent investigation into the effects of spirituality and well-being in the work domain.

Research on Leadership, Workplace Spirituality and Employee Well-being

To date, limited research has been undertaken that explores relationships between and among the three phenomena of interest in this study, namely transformational leadership, workplace spirituality and employee well-being. The little research that has been conducted will be reviewed in Chapter 4 in the introduction to the first study. Before doing so, however, I would like to introduce the setting for this study.

Chapter 3 – Overall Method and Context

Research Approach

Empirical work in the areas of workplace spirituality and work well-being and leadership development is still in its infancy (Diener, et al., 2002; Fry, 2003) and, as such, the primary purpose of this research was exploratory. I sought to gain a better understanding of possible interrelationships between these phenomena through my research in a particular organization in the hopes that this knowledge might later be used in subsequent studies (Babbie, 2008).

This study was designed as a mixed method investigation, using surveys and interviews within a health care organization. Such an approach was appropriate for a number of reasons. For one, the nature of the research phenomena and associated research questions suggested the use of mixed methods. Leadership has been described as a complex phenomenon (Alvesson & Sveningsson, 2003a; Conger, 1998; Fiedler, 1996). The conventional approach to the study of leadership has been with the use of quantitative data collection methods and in particular surveys (Bass, et al., 1999; Fiedler, 1996). Academics have questioned the wisdom of this approach and suggested leadership scholars broaden their use of methods to include qualitative ones (Alvesson & Sveningsson, 2003a; Alvesson & Sveningsson, 2003b; Berry & Cartwright, 2000; Conger, 1998). Leadership scholar Conger (1998, p. 107) has gone so far as to describe qualitative research as the “methodology of choice for topics as contextually rich as leadership.” Bass et al. (1999) note that researchers have made very limited use of observation or interviews in their study of leadership, and yet such methods may provide important data for improving training, assessment and evaluation of transformational

leadership. Conger (1998, p. 111) argued that it was “imperative” that combinations of qualitative methods be used – encouraging the specific use of observation and interviews – to ensure between-method triangulation and multiple perspectives. A review of the literature identified only two leadership studies that used interviews in addition to surveys (Brain & Lewis, 2004; Pillai & Williams, 2004). In the current study, the sequential use of surveys and interviews was intended to allow for detailed exploration of the impact of the training from the perspectives of those most affected by it (Lincoln & Denzin, 2000). It was also expected to contribute to a better assessment of the training intervention (Antonakis, et al., 2003).

There was also support for a mixed method approach in the well-being literature and workplace spirituality literature. Given concerns about the validity of some of the well-being measures as well as self-report bias, scholars have been encouraged to supplement questionnaires with other types of assessments, including interviews (Diener, et al., 2002). Such an approach is believed to give researchers a more in-depth understanding of the way people “construct subjective well-being judgments” (Diener, et al., 2002, p. 65). For similar reasons, scholars in the workplace spirituality field have also been encouraged to use multiple data collection methods. In particular, researchers have been encouraged to analyze conversations with organizational members that explore the deeper questions of “why” and “how” spirituality is manifested within organizations, and with what impact on individuals (Benefiel, 2003, 2007). Other scholars have argued the need for qualitatively-oriented methods, citing a concern that the goal of measuring and modeling workplace spirituality in a data-driven way is a reductionist approach that

adds to the demystification of both spirituality and the individual (Bell & Taylor, 2003; Fornaciari & Lund Dean, 2001; Hicks, 2003; Zhuravleva & Jones, 2006).

In summary, given the objective of developing a richer, more nuanced understanding of the complex leadership development process and the subjective construction of well-being and workplace spirituality within a particular organization, I used a mixed method approach in this study. There was strong support for such an approach in the relevant literature bases. A mixed method approach is appropriate, even preferred, in case study research, and can be expected to reveal data that are rich, processual and contextual (Glesne, 2006; Miles & Huberman, 1994; Silverman, 2000; Yin, 1994).

I will now briefly describe my research site and how I gained access to the organization. I will conclude this chapter with an overview of each study.

Research Site

The research studies were conducted with the leaders and employees of Northwoodcare Inc. With some 6,000 clients, 1,200 employees and over 500 registered volunteers, Northwood is the largest not-for-profit seniors' health care organization in Eastern Canada (www.nwood.ns.ca). It was selected as the research site for a variety of reasons. The management team was preparing for a period of significant transition at the senior levels of management. Northwood's senior executives had determined that a leadership development program was a key priority to help the organization through this period of change and to build future leadership capability. The organization's senior leaders also had a strong interest in the well-being of their employees, and had identified the development of a safe and healthy workplace as one of their strategic priorities.

Lastly, the organization had a large employee base and was amenable to supporting applied research initiatives.

As an organization, Northwood has been in operation since 1962, with a focus on supporting older adults with programs and services that meet their needs at various stages of life. For those able to maintain an active and independent life style, Northwood offers low cost seniors' housing and social and recreational programming from its 5,000 square foot community centre (Northwood, 2003). To support seniors wishing to live in their own residences, Northwood offers TeleCare – a daily telephone call to confirm the health and well-being of seniors – and Lifeline – a personal response system that summons help with the touch of a button 24 hours a day. For those requiring more specialized attention, Northwood provides personal care and nursing care for clients in their homes or Northwood-managed apartments, as well as full-time institutional care for seniors with dementia, Alzheimer's, and other serious mental or medical concerns (Northwood, 2004a).

In its formal communication materials, Northwood is promoted as being innovative and willing to take risks (Northwood, 2004a), with a record of accomplishments that includes offering full-time pastoral care, hospice and physiotherapy services, a dental clinic, banking services, a radio station, beauty salon, fitness and wellness centre and the first licensed bar and lounge in a seniors special care facility (Northwood, 2003). The stated organizational values include: "People come first, Everyone plays a part, We can always do better, Growth is built on trust, and The future is in our hands." These values were developed in 1996 through a process involving both management and employees (Northwood, 1997). In 1997, a sixth and final value, "We

are not alone,” was added by the organization’s board of directors (Northwood, 1998). These six values replaced a set of 32 beliefs that had been in place since 1982 and were judged to be too comprehensive to be able to be retained by employees (Northwood, 2004b). These six values are said to strongly reflect the values of the organization’s most senior leaders – both past and present (Northwood, 2004b).

In its 40 year history, Northwood has had incredibly stable leadership. The founding president, Edward Roach, was in his role for 26 years. He recruited and groomed his successor, Lloyd Brown, who remained with the organization for 29 years, with the last 17 years in the role of president. In the spring of 2004, the organization’s only two vice presidents were also long standing executives, one with 18 years of service and the other with 28 years of service. The only other senior member of management, the chief operating officer, was a comparatively recent arrival to Northwood with only four years of service with the organization. With the imminent retirement of the CEO and one of the vice presidents, the senior leaders determined that a leadership development program was a key priority to help the organization through this period of change and to build future leadership capability. The organization had also recently completed a strategic plan and reorganized its operations into business units focused on either providing client care or supporting those units that did provide care. As part of the strategic planning process, organizational leaders had identified the creation of a safe and healthy workplace as one of its five key priorities, and they were actively looking for ways to support the attainment of this goal.

Around this same time, a column written by my dissertation supervisor about workplace spirituality appeared in the local daily newspaper. Northwood executives read

the column and approached Dr. Cathy Driscoll about meeting and talking about potential research partnerships. I participated in that first meeting in July, 2004 and immediately saw the organization as a potential site for my dissertation research. Over the next number of months, I met with the Northwood president and senior management team members to develop a research agenda. First we agreed on the need to survey employees to benchmark existing health and well-being measures, with a view to introducing smoking cessation, diet and exercise programs. Given the organization's interest in workplace spirituality, we also agreed to assess perceptions of the spiritual climate of Northwood. The last big area of focus was leadership, where, as previously stated, there was an existing recognition of the need to develop leadership capacity across the organization. Twenty in-depth interviews were also conducted with leaders and employees from a variety of levels in the organization. The objective of the interviews was to explore issues around the departure of key executives and to learn how people felt about the organization's readiness for this major leadership transition. While the interview data revealed departing senior leaders had done much to ensure a smooth transition and maintain Northwood's unique organizational culture (McKee & Driscoll, 2008), the survey identified inconsistencies in the leadership style across business units and varying levels of employee positive well-being. Leadership training was already on Northwood's agenda, and so we negotiated an agreement for me to conduct a transformational leadership training study. The coordinator of Northwood's Research Advisory Council was appointed as my prime contact, and the leaders of human resources and employee education were identified as my logistical support. These individuals acted as gatekeepers and controlled and facilitated my access to the research

site and organizational members (Glesne, 2006). After almost a year of preliminary research, planning, proposal development and ethics approval, the groundwork was completed for me to begin my dissertation research. With this background in mind, I will now briefly present my research program.

Research Program Overview

My research consisted of three inter-related studies conducted at the research site over a span of 18 months. As noted earlier, the focal point of the research was a transformational leadership training intervention. Surveys were used to collect data with designated employee groups prior to the start of training, as well as three months post-training. Interviews were also conducted post-training. Each study had specific objectives and was intended to build on the previous one.

Study 1 was cross-sectional and used data from employees who had only completed surveys prior to the start of their leader's training. This data was used to test a mediation model linking transformational leadership, workplace spirituality and various measures of employee well-being. The purpose of this study was to replicate and extend previous studies that supported such a model.

Study 2 was a longitudinal study designed to assess training to enhance the transformational leadership behaviour of leaders within the organization. In this field experiment, leaders were randomly assigned to treatment and control groups. Employees of these leaders completed pre- and post-tests to assess changes in their leader's behaviour over a three-month time period. With this more elaborate longitudinal design, I hoped to confirm relationships between my predictors and outcomes, as well as to establish causality in the proposed mediation model.

Study 3 explored, in a more detailed manner, the experiences of leaders who were trained. Although the research methodology was largely inductive, I had a set of general research questions in mind before beginning the study (Glaser & Strauss, 1967). Specifically I wanted to focus on leaders whose leadership ratings had improved, suggesting they had experienced success in applying their transformational leadership training. Using in-depth interviews with a select group of trainees and drawing on my prolonged contact with the organization, I sought to gain a better understanding of what leaders did relative to their training implementation, and what they felt had helped or hindered them in their efforts, as well as what they felt happened as a result of their endeavours. I remained open to modifying this pre-structure as I discovered new phenomena, and issues and themes emerged from the data (Glaser & Strauss, 1967, p. 86). As described previously, there is considerable support in the leadership, workplace spirituality and well-being literatures for the use of qualitative methods. Interviews and participant observation are specifically recommended for case study research (Glesne, 2006). I chose these data collection methods for these reasons, but also because I knew from previous personal experience how valuable interviews in particular had been to me in understanding the Northwood social and cultural context (McKee & Driscoll, 2008). As a result of my more than three years of exposure to the organization and its employees, I also felt that I would be able to develop the rapport and trust necessary for more open and frank exchanges to help me better understand trainees' experiences during and after the training (Glesne, 2006).

Level of Analysis

Scholars are encouraged to be explicit about their level of analysis in research. As no doubt evident from the previous discussion, this research program is principally about the perceptions of employees, and their leader trainees, relative to their experiences related to transformational leadership and an organizational leadership development program. As such, the analysis is at the individual level. However, the individual employees are also associated with particular leaders and this creates special challenges from a research perspective. As Bickel (2007, p. 8) explains “grouping may give rise to interesting contextual effects and cross-level interactions effects, as well as easy-to-miss but consequential methodological problems.” This hierarchical structure presents challenges from a quantitative data analysis perspective because many of the statistical tests are based on assumptions of independence of observation, or, more specifically, that the errors of prediction are independent (Tabachnick & Fidell, 2001). Scholars conducting analysis without accounting for this violation of the independence of errors may produce questionable results. If there is positive autocorrelation, this may result in error variances being too small, and this could lead to inflated Type I error rates. Alternatively, if the autocorrelation is negative, then estimates may be too large, leading to loss of power (Tabachnick & Fidell, 2001).

Multilevel analysis, or mixed modeling or hierarchical linear modeling as it is also called, has been suggested as one effective approach for accounting for the absence of residual independence. As Hoffman, Griffin and Gavin (2000) discuss, there are several key assumptions for the use of hierarchical linear models. The first is that the lower-level units must be nested within higher level ones and the researcher must be able

to explicitly link the two for analytical purposes. The second requirement is for these lower-level units to be exposed to, and thereby potentially influenced by, the higher level units. Thirdly, there is an assumption that the outcomes of interest, in my case well-being, are measured at the level of interest of the researcher. Variables that are hypothesized to influence these outcomes can reside at this same level, or higher ones. Again, in my studies, I have variables at both the employee and leader level. Lastly, there is an assumption that the outcome variables vary both within the lower-level units, so within employees in my research, and between the higher level units, so between leaders in my studies. Hofmann et al. (2000) also specify the kinds of research questions most suited to multilevel analysis, naming one of three as being: “Are individuals influenced by characteristics of the work group?” Or more appropriately in my case, are individual employees influenced by the behaviours of their leaders? Given that my studies meet these criteria, I used multilevel modeling in the analysis of the quantitative data from Studies 1 and 2. My approach is consistent with other researchers studying these phenomena (Bliese & Halverson, 2002; Gavin & Hofmann, 2002).

As evidenced by a special issue of *Leadership Quarterly* devoted exclusively to “multilevel methods in leadership” (Bliese, et al., 2002) and texts on the topic (Klein & Kozlowski, 2000), the use of multilevel techniques are attracting increased attention from organizational scholars and becoming more frequently used by many studying the relationships between leaders and their employees (see e.g. Bliese & Halverson, 2002; Bliese, et al., 2002; Erdogan & Enders, 2007; Gavin & Hofmann, 2002; Markham & Halverson, 2008; Mathieu, Ahearne, & Taylor, 2007; Platonova, Hernandez, Shewchuk, & Leddy, 2006). This hierarchical structure did not pose any challenges in terms of the

qualitative data analysis. Since my interviews were with leaders, I did not need to be concerned with trying to match them up with their employees.

In the next three chapters, I will present each of the studies in the research program, reviewing the literature that is specifically relevant to each study, and discussing the results and the potential contributions they make in light of what we already know.

Chapter 4 – Replication and Extension of a Mediation Model

Introduction

As noted previously, studies have demonstrated links between leadership and employee well-being, and between leadership and workplace spirituality, but few studies have demonstrated relationships between the three constructs. This first study was conceived to assess the validity of a proposed mediation model, linking transformational leadership, workplace spirituality and employee well-being. I will now briefly discuss the literature to support such a model.

Scholars who have spent considerable time studying transformational leadership have advanced mediation models (Avolio, et al., 2004; Kelloway & Barling, 2000). In this study I am proposing that the effects of transformational leadership on employee well-being outcomes are realized indirectly through the mediating variable of workplace spirituality. I have conceptualized workplace spirituality as consisting of three elements, namely sense of community, value alignment and meaningful work. As discussed in the literature review, these three particular elements are common to many definitions of workplace spirituality. I will define these in greater detail now and present any literature linking these aspects of workplace spirituality to leadership.

Meaningful work is not a new concept. Hackman and Oldham (1980, pp. 78-79) identified three core job characteristics that are necessary for people to experience meaningfulness as being “skill variety, task identity and task significance.” The latter characteristic is defined as “the degree to which the job has a substantial impact on the lives of other people, whether those people are in the immediate organization or in the world at large” (Hackman & Oldham, 1980, p. 79). However, as argued effectively by

Duchon and Plowman (2005, p. 814), the concept of meaningful work in the workplace spirituality domain goes beyond this notion and encapsulates the idea of “life-giving” work in that it is of great personal value to the individual and meets their inner needs for deeper meaning and purpose. Milliman et al. (2003, p. 429) agree and state that “the spirituality view is that work is not just meant to be interesting or challenging,” but it is also about “expressing one’s inner life needs by seeking meaningful work.”

The second dimension of the construct is sense of community. Ashmos and Duchon (2000, p. 137) were the first in the workplace spirituality domain to develop a construct they called “sense of community and connectedness.” They argued that, for many employees, work represents a form of community and that people “want to feel connected to each other at work” (Ashmos & Duchon, 2000, p. 137). Sense of community also incorporates the idea that “there is some type of relationship between one’s inner self and the inner self of other people” (Maynard, 1992 and Miller, 1992 as cited in Milliman, et al., 2003, p. 429).

Lastly, value alignment in the workplace spirituality literature includes the idea that “an individual’s purpose is larger than oneself and should make a contribution to others or society” (Milliman, et al., 2003, p. 430). Ashforth and Pratt (2003, p. 95) pointed out that studies of person-organization (P-O) fit demonstrate that when there is greater alignment between the worker and an organization in terms of values, beliefs and practices there are likely to be positive outcomes for both. These conceptualizations go beyond values congruence models in psychology and organizational behaviour, which have also looked at the fit between personal and organizational values (see e.g. Chatman, 1989; Liedtka, 1989).

A small number of scholars have conducted empirical studies using one or more of these elements of workplace spirituality. In their follow-up exploratory study, Duchon and Plowman (2005) found preliminary support for their proposition that work units with a stronger sense of community also perform more effectively. Milliman, et al. (2003, p. 434) also explored the effects of employees experiencing a “sense of community,” finding positive effects on organizational commitment, intrinsic work satisfaction, job involvement and intentions to quit. Rego and Pina e Cunha (2008) looked at the effects of perceived community on organizational commitment, finding empirical support for a positive relationship with affective and normative commitment. Research has also been conducted linking the individual components of the workplace spirituality construct to leadership.

With regard to value alignment, there is more research linking this construct with leadership. For example, one early study found that employees who perceived their values to be congruent with their leaders were more satisfied with their leader (Meglino, Ravlin, & Adkins, 1991). Jung and Avolio (2000) found evidence of the effect of transformational leadership on employee performance being mediated by trust in the leader and value congruence. Colbert (2004) had the same finding, namely value congruency mediating transformational leadership’s effect on employee attitudes and performance. Recently, Lau, Liu and Fu (2007) found that congruence between leader-member values mediated the relationship between leader behaviour and employee felt trust. Rego and Pina e Cunha (2008) also found that value alignment is positively associated with an important employee outcome, namely organizational commitment. Colbert, Kristof-Brown, Bradley and Barrick (2008) found congruency in perceived goal

importance mediated the effects of CEO transformational leadership on vice presidents' attitudes, but not their performance.

Lastly, a small number of studies have explored relationships between leadership and perceptions of meaningful work. Sparks and Schenk (2001) found support for a model whereby the effect of transformational leadership on outcome measures such as cohesion, satisfaction, effort and performance was mediated by belief in the higher purpose of work. More recently, Arnold et al. (2007) found the effects of transformational leadership on employee psychological well-being were mediated by employee perceptions of the meaningfulness of their work. Again, Rego and Pina e Cunha (2008) found positive associations between affective and normative organizational commitment and perceptions of meaningful work.

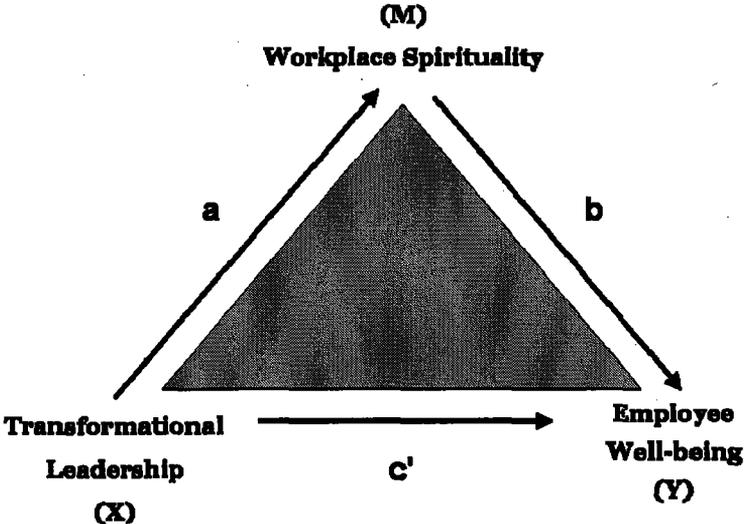
Only two studies appear to have explored explicitly a composite measure of workplace spirituality as a mediator of the effects of transformational leadership. McKee (2005) found that workplace spirituality fully mediated the effects of transformational leadership on employee job satisfaction. Here, workplace spirituality was operationalized as representing sense of community, meaningful work and values alignment. Moore and Casper (2005) also found support for a mediation model. In their study, the effects of transformational leadership on turnover were mediated by workplace spirituality, which they operationalized as consisting of affective organizational commitment, intrinsic job satisfaction and perceived organizational support.

The purpose of Study 1 is to replicate the findings of these last two studies in particular by testing a mediation model with a new sample, as well as to extend this research by broadening the employee outcomes to include multiple measures of

employee well-being. Scholars interested in the development of healthy workplaces have stressed the need for multiple indices of employee well-being (Kelloway & Day, 2005b) and so I decided to assess employees' emotional well-being, their healthy behaviour, their physiological well-being and their spiritual well-being. The multiple measures of well-being were deemed particularly important given that the research site was a health care organization and that employees in such organizations – particularly nurses – have been characterized as among the most “overworked, stressed and sick workers” (Cummings, et al., 2008).

The figure that follows depicts the proposed model, whereby the effects of transformational leadership on employee well-being may be both direct, as in path c', or indirect via the intervening variable of workplace spirituality, as in path ab (see Figure 1). The first set of hypotheses are related to path c' in the model, that is the relationship between transformational leadership and employee well-being.

Figure 1. Proposed Model of the Effects of Transformational Leadership on Employee Well-being Mediated Through Workplace Spirituality.



Transformational Leadership and Well-being

From the psychology and occupational health literatures, there is ample evidence that leaders or supervisors can affect the emotional well-being of their employees. For example, negative leadership has been associated with burnout (Hetland, Sandal & Johnsen, 2007), job related stress (Offermann & Hellmann, 1996), and emotional exhaustion (Feldt, et al., 2000). Gilbreath and Benson (2004) found that the impact of supervisor behaviour on employee mental health was greater than other factors, such as stress, life and work events. Lim, Cortina and Magley, (2008) have shown that employees who perceive their supervisor as supportive experienced reduced work stress, compared to support from other sources, even co-workers.

Research also suggests leaders can directly affect some health related behaviours of employees. For example, high social support from a variety of sources, including supervisors and coworkers, has been associated with a lower prevalence of smoking in municipal government workers (Väänänen et al., 2008), while low social support – leader support being part of this network – has been associated with worker fatigue (Åkerstedt, et al., 2004).

The occupational health literature provides evidence of relationships between leaders/supervisors and employee physiological well-being. For example, lack of supervisor support has been associated with sickness absences among women (Ishizaki, et al., 2006; Väänänen, et al., 2003), and higher levels of musculoskeletal pain (Torp, Riise, & Moen, 1999) and with symptoms such as headaches and heart palpitations (Feldt, et al., 2000). However, a high level of social support has been associated with fewer illness symptoms (Olbier, Smith, & Steinhardt, 2007).

As previously discussed, there is as yet limited research on the relationship between leadership and spiritual well-being. However, Fry and Slocum (2008) demonstrated that spiritual leadership was positively associated with spiritual well-being. Based on all of this literature showing a relationship between leader behaviour and aspects of employee well-being, I hypothesized the following:

Hypothesis 1: Transformational leadership will be positively associated with employees' [a] emotional well-being, [b] healthy behaviour, [c] physiological well-being and [d] spiritual well-being.

The final hypotheses are related to the proposed indirect relationship between transformational leadership and well-being, or path ab in Figure 1, through the mediating variable of workplace spirituality. As discussed in the introduction, there is empirical support for workplace spirituality mediating the effects of leadership on employee outcomes (Fry & Matherly, 2006; Fry & Slocum, 2008; Fry, et al., 2005; McKee, 2005; Sparks & Schenk, 2001), but there is as yet limited evidence of linkages with employee well-being outcomes (Arnold, et al., 2007). However based on these findings and theories about possible interrelationships between these phenomena (Fry, 2003), I developed the following set of hypotheses to test the indirect effect of transformational leadership, mediated through workplace spirituality, on employees' well-being:

Hypothesis 2: The effect of transformational leadership on employees' [a] emotional well-being, [b] healthy behaviour, [c] physiological well-being, and [d] spiritual well-being will be mediated by workplace spirituality.

Method

Participants

All leaders and employees of Northwood, full and part-time, were invited to participate in the research program. As noted in the research study overview, the participants for Study 1 were employees who had only completed a survey prior to the start of the leadership training. They represented 273 of the 516 employees who completed the pre-test, from a total population of 1,029. These respondents were overwhelmingly female (89%), tended to be older (30% were between 36 and 45 years of age, and 37% were between 46 and 55), full-time workers (72% worked 40+ hours) and 60% had more than 5 years of tenure with the organization (36.5% had 5-10 years of service, and 20% had 11-15 years). The majority of participants (60%) reported to a supervisor, with the next largest group (15%) reporting to a manager. In terms of business unit affiliation, the largest numbers of respondents were from homecare (45.6%), long-term care (33.5%) and corporate support services accounting for 19% of the surveyed workers.

Procedure

As referenced above, all employees were invited to complete the pre-test. They received personally addressed, sealed envelopes with a letter from senior executives in the organization and a copy of the survey. The executive's letter introduced the training program, explained that all leaders would be participating in the coming months and reinforced that employee assistance was needed to evaluate the impact of the training. No details were provided about which leaders would be completing training or when. Employees were invited to complete an anonymous and confidential survey to assess

their immediate supervisor's leadership behaviour, as well as answer questions relating to their work experience and personal well-being (see Appendix A for sample of executives' letter to employees). The survey document provided additional details on the research and the investigators, offered respondents the option to complete a paper or web-based version of the survey and assured them of the confidentiality and anonymity of their responses. Employees were informed that if three or more evaluations of a given leader were received then summaries of that data would be provided to their leader, but that no details would be provided so as to be able to specifically identify which employees had or had not completed surveys. Respondents were asked to submit surveys within a two week period to ensure completion of the data collection before the start of training. Employees were asked to complete one survey, and offered the option of either doing so online via a secure server at Saint Mary's University, or by returning a paper survey copy in the supplied postage-paid envelope directly to Saint Mary's University or by depositing the envelope in one of the locked drop boxes located in the organization's two primary offices. I had the only key, to the boxes, and I visited the organization's office two to three times per week to collect the surveys. No incentives were offered for completion of the questionnaires. Return of a completed survey was considered informed consent (see Appendix B for sample of invitation to participate and informed consent). Two electronic reminders were sent out via email and text messaging encouraging people to submit the surveys. Information posters were also placed in high traffic areas to reach those without email access or text messaging (see Appendix C for sample of employee reminder notice).

Measures

Dependent Variables: Given the desire to have a multi-faceted assessment of well-being, I used four measures. To assess emotional well-being, I used the 12 items from the General Health Questionnaire (Goldberg, 1972). Sample items include: “Have you been able to concentrate on what you are doing?” “Have you been feeling happy all things considered?” and “Have you felt that you couldn’t overcome your difficulties?” (See Appendix D for complete list of items). Respondents were asked to indicate their level of agreement or disagreement with the items using a 7-point Likert scale, with 1 indicating “not at all” and 7 indicating “frequently or always.” Negatively worded items were recoded so that higher scores indicated higher levels of emotional well-being. Cronbach’s alpha for this scale was .89.

To assess healthy behaviour, I used a 10 item index created by Francis (personal communication, August 23, 2005). Six of the items focused on behaviour related to sleeping, eating, exercise, etc., and four items asked about consumption of cigarettes, caffeine, alcohol and over the counter drugs. Respondents were asked to indicate their level of agreement with statements related to the first six items using a 7-point Likert scale, with 1 indicating “strongly disagree” and 7 representing “strongly agree.” Items were recoded so that higher scores indicated more positive behaviours. For the last four items, respondents were asked to assess changes in their consumption in the last few months using a 7-point Likert scale, where 1 indicated their consumption was “a lot less than usual” and 7 represented it was “much more than usual” (see Appendix E for complete list of items). Here, lower scores The Cronbach alpha for this scale was .69.

To gain a measure of physiological well-being, 10 items were adapted from work by Johnston, Bachman and O'Malley (1995) and Derogatis and Cleary (1977). These items asked respondents to report how often they experienced a variety of physiological symptoms in the previous six months, including nausea or upset stomach, pain in lower back, headaches. Respondents were asked to answer using a scale from 1 to 5, with 1 representing "never" and five "very often" (see Appendix F for complete list of items). Item responses were recoded so that lower scores represented higher well-being. The Cronbach alpha for this scale was .8.

To assess spiritual well-being, I used a 20 item scale developed by Paloutzian and Ellison (1982), which is one of five measures King and Crowther (2004) recommend for use in quantitative studies because of its use in more than 400 studies (Hill & Pargament, 2003). The scale has 10 items related to religious well-being and 10 items related to existential well-being. Sample items from the existential scale included: "I feel that life is a positive experience" and "I feel a sense of well-being about the direction my life is headed in." Examples of the items related to religious well-being include the following: "I have a personally meaningful relationship with God or a Higher Power" and "My relationship with God or a Higher Power contributes to my sense of well-being." Again, respondents were asked to use 7-point Likert scales to indicate their level of agreement or disagreement with the items, with 1 representing "strongly disagree" and 7 indicating "strongly agree" (see Appendix G for complete list of items). Negatively worded items were recoded so that higher scores represented higher levels of spiritual well-being. Cronbach's alpha for the scale was .93

Independent Variables: The study included four independent variables. For Transformational Leadership, I used the Multifactor Leadership Questionnaire (MLQ) developed by Bass & Avolio (1995) to assess Transformational Leadership. The MLQ was developed by Bass (1985) to assess the four factors of transformational leadership and is the most commonly used measure of transformational leadership (Bono & Judge, 2004). Scholars have identified concerns relating to the conceptualization of transformational leadership and its operationalization in the MLQ instrument (Yukl, 1999), as well as its factor order structure (Bycio, et al., 1995) and discriminant validity (Carless, 1998). However, many more studies have provided continued support for the validity and reliability of the measure (Antonakis, et al., 2003; Bass, et al., 1999; Judge & Piccolo, 2004). The 45 item MLQ was used by employees to assess the behaviour of their organizational leaders. Twenty items in the scale assess transformational leadership behaviours and these were used to create a transformational leadership sum scale. (The remaining 25 items assess transactional and negative leadership behaviours, such as laissez-faire and management by exception, and were not used in the study.) Employees were asked to assess to what extent their leaders exhibited the dimensions of individualized consideration, intellectual stimulation, inspirational motivation and idealized influence. Respondents were asked to indicate their level of agreement or disagreement with the items using a 5-point Likert scale, with 0 being “Not at all” and 4 being “Frequently, if not always” (see Appendix D for list of sample items). Higher scores on the MLQ represented higher levels of perceived transformational leadership behaviour. Cronbach’s alpha for the scale was .95.

To measure employee perceptions of workplace spirituality, I created an index comprised of three previously validated scales to measure meaningful work, sense of community and shared values. As discussed in the literature review, I found these three constructs were most often referenced in definitions of workplace spirituality and were elements used by other researchers conducting quantitative studies (Duchon & Plowman, 2005; Milliman, et al., 2003; Rego & Pina e Cunha, 2008). I did not use the Ashmos and Duchon (2000) scale as it has not been used extensively, and scholars have questioned its convergent and discriminant validity (Fornaciari & Lund Dean, 2001). Given my own difficulty using the scale and attaining a three factor structure (McKee, 2005), I sourced what I felt were alternate but equivalent, parsimonious scales. The items were similar to the Ashmos and Duchon (2000) items, but fewer in number. I hoped a more parsimonious measure would limit redundancies and thereby respondent fatigue (Fornaciari, et al., 2005). For meaningful work, I sourced a six item measure developed by May, Gilson and Harter (2004). Sample items included “The work I do on this job is worthwhile” and “The work I do on this job is meaningful to me.” A 5-point Likert scale was used to assess respondents’ perceptions of this construct, with 1 being “strongly disagree” and 5 being “strongly agree.” The Cronbach alpha for this scale was .91. To assess the alignment of individuals’ values with those of the organization, I used a three item scale by Cable and Judge (1996). Sample items included: “To what degree do you feel your values “match” or fit with this organization and the current employees in this organization?” and “Do you think the values and “personality” of this organization reflect your own values and personality?” Respondents were asked to rate the items on a scale of 1 to 5, with 1 being “not at all” and 5 being “completely.” The alpha coefficient for

this subscale was .84. To measure sense of community, I used seven items developed by Milliman et al. (2003) to evaluate “conditions of community.” These items were based on items in the scale created by Ashmos and Duchon (2000). The Milliman et al. (2003, p. 434) version assesses the “sense of community experienced by workers” as opposed to the enablers or outcomes of such an environment. This scale includes items that require respondents to evaluate their perceptions of the degree to which they feel connected with the organization’s values and identify with its mission, as well as the extent to which they perceive that the organization cares about its employees. Sample items include “I think employees are linked with a common purpose” and “I feel part of a community here.” Respondents were asked to indicate their level of agreement or disagreement with the scale items on a 7 point Likert scale, with 1 being “strongly disagree” and 7 being “strongly agree.” The alpha coefficient of this index was .88. In each of the three scales, a higher value represented a higher perceived level of construct, i.e. meaningful work, sense of community or value alignment.

To confirm the appropriateness of the use of these three scales as separate measures of dimensions of workplace spirituality, I conducted a factor analysis with the variables. Prior to performing analysis, data were checked for suitability for factor analysis. Inspection of the correlation matrix revealed a number of coefficients over .30 and above, with no evidence of multicollinearity, curvilinearity or outliers. The Kaiser-Meyer-Olkin Measure of Sampling Accuracy was .886, and Bartlett’s Test of Sphericity was significant at $p < .00$. Cases with missing data were eliminated using list-wise deletion, resulting in an adequate sample size for factor analysis (N=243).

The 16 items comprising the scales for meaningful work, values alignment and sense of community were subjected to principal components analysis using SPSS. Using Kaiser's criterion, three components with an Eigen value of greater than one were identified, explaining a total of 68.25% of the variance. A visual inspection of the scree plot revealed a clear break between the third and fourth components. To aid in the interpretation of these components, Varimax rotation was performed. Following the removal of items with cross-loadings, factor analysis revealed the presence of simple structure (Thurstone, 1947), with three components showing a number of strong loadings, and all variables loading substantially on only one component. The three factors explained a total of 68.28% of the variance, with component 1 (Meaningful Work) representing 26.37%, component 2 (Sense of Community) representing 27.22%, and component 3 (Values Alignment) representing 14.70% (see Appendix J for results of Varimax rotation). A test of scale reliability using Cronbach's alpha was conducted, with Meaningful Work generating a Cronbach of .93, Sense of Community a Cronbach of .90 and Values Alignment a Cronbach of .84. Given that the three measures had different scales, I standardized the items to create the composite measure. A higher score on this variable indicated higher perceptions of workplace spirituality. The overall alpha for this measure was .88.

Control Variables: In order to reduce possible confounding effects, I utilized a number of control variables in study 1. These variables consisted of: age (1 = 15-25 years, 2 = 26 – 35 years, 3 = 36 – 45 years, 4 = 46 – 55 years, 5 = 56 – 65 years and 6 = 65 + years)), tenure in years (1 = 0-4 years, 2 = 5-10 years, 3 = 11-15 years, 4 = 16-20

years and 5 = 20+ years), and business unit (1 = Administration , 2 = Active and Independent Living, 3 = Homecare, 4 = Support Services and 5 = Long-term Care).

Results

Prior to analysis, I cleaned the study data set and assessed it for missing data. For the most part, missing data were well below 10%. The one exception related to the consumption items in the healthy behaviour index. Here, missing data for the items related to caffeine, cigarette, alcohol and over the counter drug consumption were at - 8.4%, 35.9%, 17.6% and 12.8% respectively. As a result, I decided to eliminate these four consumption related items and retain the remaining six behavioural items that were associated with sleeping, eating, exercise, etc. The Cronbach alpha's for this shortened index was .7. In addition, 19 cases had significant missing data and this did not seem random in nature, i.e. cases would have data missing for entire scales. These cases were also deleted from the data set. Using SPSS 14.0, I then examined the data set to ensure it met the assumptions necessary for multivariate analyses (Tabachnick & Fidell, 2001), namely that of normality, linearity and the absence of homoscedasticity, multicollinearity and outliers. Study data showed some evidence of skew and kurtosis beyond normally accepted levels, i.e. more than +/- 3. Outlier analysis also revealed the presence of data points with standardized scores above/below acceptable levels, i.e. z scores +/- 4. Since multivariate techniques are robust to minor violations of the assumptions of normality (Tabachnick & Fidell, 2001), I did not immediately delete these cases from the data set, but proceeded to determine whether they were also multivariate outliers. Using Mahalanobis and Cook's distance, I determined there were five multivariate outliers in

the data set and I deleted these cases, resulting in a final sample size of 249. The data met the remaining multivariate assumptions and were deemed appropriate for analyses.

Means, standard deviations, scale reliabilities and intercorrelations for all study variables are presented in Table 1.

Table 1 – Study 1 Means, Intercorrelations and Scale Reliabilities

	Mean	SD	1	2	3	4	5	6	7	8	9
1. Employee Age	4.0†	1.09	-								
2. Employee Tenure	2.0†	1.21	.34**	-							
3. Employee Business Unit	3.0+	0.91	-.06	.12	-						
4. Emotional Well-being	5.61	0.94	.19**	.08	.02	.89					
5. Healthy Behaviour	4.95	1.18	.07	-.06	-.13	.29**	.70				
6. Physiological Well-being	1.89	0.57	.07	.13*	.19**	.50**	.19**	.80			
7. Spiritual Well-being	5.56	0.98	.17**	.12	.06	.55**	.26**	.23**	.93		
8. Transformational Leadership	2.50	0.87	.02	.03	-.08	.14*	.01	-.04	.15*	.95	
9. Workplace Spirituality	0.04‡	9.15	.04	-.06	-.17*	.37*	.20**	.12	.41**	.27**	.88

Note: Listwise N for correlations = 237

Internal scale reliabilities appear along the diagonal in bold face type.

† Median reported. For age, 4 represents category 46-55 years; for tenure, 2 represents 5-10 years; + Mode reported for business unit, 3 represents homecare.

‡ Variable has been standardized.

*p < .05 (2-tailed) **p < .01 (2-tailed).

Multilevel Regression Analyses

To test hypotheses 1a -1d, I followed the recommendations of Stride (personal communication June 17, 2008) for multilevel analyses and first constructed a baseline model for each of the four dependent variables against which to assess the contribution of my predictors. This null model estimated the mean (intercept only) of each outcome variable as well as its baseline value for -2 Restricted Log Likelihood ($-2LL$), our overall model fit statistic. Next, I estimated an unconditional model for each outcome, which also contained no predictors but allowed the intercept term to vary by leader, i.e. my first level-2 variable. I then again calculated a model fit statistic. Doing so allowed me to determine the proportion of the variance which was at the leader level (i.e. level-2) through the calculation of the intra-class correlation coefficient [1], or ICC [1]. From here, I could then enter my control variables and predictors and assess their effects. As per Hofmann and Gavin (1998) and Hofmann (personal communications October 28, 2007), predictors were grand mean centered before entering them into the model. I will now present the effects of the multilevel regression for each of the four outcome variables. These results are summarized in Tables 2-5.

For emotional well-being, the null-model established the baseline for the $-2LL$ fit statistics at 675.07. Introducing the leader code variable and allowing intercepts to vary reduced the fit statistic to 67.86 ($\Delta-2LL = -4.21$). The addition of control variables as fixed effects further improved the model fit, bringing the $-2LL$ statistic down to 658.10 ($\Delta-2LL = -12.76$), but only employee age had a positive significant effect. When the grand mean centered transformational leadership predictor was added to the model as a fixed effect, it had a significant positive main effect on employee well-being, i.e. $B = .14$,

$p < .05$. Age remained significant. The $-2LL$ also improved, dropping an additional 1.44 to 656.66. Thus, hypothesis 1a, that transformational leadership would be positively associated with employees' emotional well-being, was supported.

Table 2 – Effect of Leadership on Employees' Emotional Well-being.

	Fixed effect B	Fixed effect SE	-2LL	$\Delta-2LL$ †	Random effects variance	Residual variance	ICC[1]
Null Model			675.07			.89***	
Intercept	5.61***	.06					
Unconditional Model			670.86	-4.21	.09	.80***	.11
Intercept	5.63***	.07					
Addition of Controls			658.10	-12.76	.08	.80***	.09
Intercept	4.97***	.38					
Age	.16**	.06					
Tenure	.00	.05					
Business Unit	.02	.08					
Addition of zTL			656.66	-1.44	.09	.78***	.10
Intercept	4.94***	.38					
Age	.16*	.06					
Tenure	.00	.05					
Business Unit	.03	.08					
zTL	.14*	.06					

Notes. $N = 247$

† Model estimation by Restricted Maximum Likelihood hence significance test for change in $-2LL$ due to additional fixed effects is not applicable.

* $p < .05$ (2-tailed) ** $p < .01$ (2-tailed) *** $p < .001$ (2-tailed)

For healthy behaviour, the null-model established the baseline for the $-2LL$ fit statistics at 790.06. Introducing the leader code variable and allowing intercepts to vary reduced the fit statistic to 788.22 ($\Delta-2LL = -1.84$). The addition of control variables as fixed effects further improved the model fit, bringing the $-2LL$ statistic down to 763.28 ($\Delta-2LL = -24.94$), with only employee age having a positive significant effect. When the grand mean centered transformational leadership predictor was added to the model as a fixed effect, it did not have a significant positive main effect on employee well-being. The $-2LL$ fit statistics deteriorated, increasing by 3.28 to 766.56. Hypothesis 1b, that transformational leadership would be positively associated with employees' healthy behaviours, was therefore not supported.

For physiological well-being, the null-model established the baseline for the $-2LL$ fit statistics at 432.51. Introducing the leader code variable and allowing intercepts to vary reduced the fit statistic to 426.54 ($\Delta-2LL = -5.97$). The addition of control variables as fixed effects further improved the model fit, bringing the $-2LL$ statistic down to 408.32 ($\Delta-2LL = -18.22$), again with only employee age having a positive significant effect. When the grand mean centered transformational leadership predictor was added to the model as a fixed effect, it did not have a significant positive main effect on physiological well-being. The $-2LL$ fit statistic deteriorated, increasing by 4.74 to 413.06. Hypothesis 1c, that transformational leadership would be positively associated with employees' physiological well-being, was also not supported.

Table 3 – Effect of Leadership on Employees’ Healthy Behaviour.

		Fixed effect B	Fixed effect SE	-2LL	Δ -2LL†	Random effects variance	Residual variance	ICC[1]
Null Model				790.06			1.40***	
Unconditional Model	Intercept	4.95***	.07					
				788.22	-1.84	.14	1.28***	.11
Addition of Controls	Intercept	4.93***	.09					
				763.29	-24.94	.03	1.33***	.02
Addition of zTL	Intercept	5.27***	.43					
	Age	.12	.08					
	Tenure	-.08	.07					
	Business Unit	-.14	.08					
					766.56	3.28	.03	1.33***
	Age	.12	.08					
	Tenure	-.08	.07					
	Business Unit	-.14	.09					
	zTL	.01	.08					

Notes. $N = 248$

† Model estimation by Restricted Maximum Likelihood hence significance test for change in -2LL due to additional fixed effects is not applicable.

* $p < .05$ (2-tailed) ** $p < .01$ (2-tailed) *** $p < .001$ (2-tailed)

Table 4 – Effect of Leadership on Employees’ Physiological Well-being.

	Fixed effect B	Fixed effect SE	-2LL	Δ -2LL†	Random effects variance	Residual variance	ICC[1]
Null Model			432.51			.33***	
Intercept	4.10***	.04					
Unconditional Model			426.54	-5.97	.04	.29***	.13
Intercept	4.14***	.04					
Addition of Controls			408.32	-18.22	.03	.27***	.10
Intercept	3.59***	.22					
Age	.03	.04					
Tenure	.04	.03					
Business Unit	.09	.04					
Addition of zTL			413.06	4.74	.03	.28***	.10
Intercept	3.59***	.22					
Age	.03	.04					
Tenure	.04	.03					
Business Unit	.09	.05					
zTL	-.01	.04					

Notes. N = 249

† Model estimation by Restricted Maximum Likelihood hence significance test for change in -2LL due to additional fixed effects is not applicable.

*p < .05 (2-tailed) **p < .01 (2-tailed) ***p < .001 (2-tailed)

Lastly, for spiritual well-being, estimation of the null model established a -2LL baseline fit statistic of 689.1. When the leader code variable was introduced and intercepts were allowed to vary, the fit statistic dropped to 687.47 (Δ -2LL = -1.64). The addition of control variables as fixed effects further improved the model fit, bringing the -2LL statistic down to 669.67 (Δ -2LL = -17.80), but again only employee age had a positive significant effect. When the grand mean centered transformational leadership

predictor was added to the model as a fixed effect, it had a positive main effect on employee well-being, i.e. $B = .16, p < .05$. The $-2LL$ improved, dropping an additional 2.40 to 667.27. Hypothesis 1d was therefore supported by the data.

Table 5 – Effect of Leadership on Employees’ Spiritual Well-being.

		Fixed effect B	Fixed effect SE	-2LL	$\Delta-2LL$ †	Random effects variance	Residual variance	ICC[1]
Null Model				689.10			.96***	
	Intercept	5.56***	.06					
Unconditional Model				687.47	-1.62	.05	.91***	.06
	Intercept	5.56***	.07					
Addition of Controls				669.67	-17.82	.04	.89***	.05
	Intercept	4.68***	.37					
	Age	.15*	.06					
	Tenure	.05	.06					
	Business Unit	.05	.07					
Addition of zTL				667.27	-2.40	.05	.87***	.06
	Intercept	4.64***	.37					
	Age	.15*	.06					
	Tenure	.05	.06					
	Business Unit	.07	.07					
	zTL	.16*	.06					

Notes. $N = 245$

† Model estimation by Restricted Maximum Likelihood hence significance test for change in $-2LL$ due to additional fixed effects is not applicable.

* $p < .05$ (2-tailed) ** $p < .01$ (2-tailed) *** $p < .001$ (2-tailed)

In summary, the first round of multilevel analyses tested hypotheses of association between transformational leadership and four dimensions of employee well-being, namely emotional well-being, healthy behaviour, physiological well-being and

spiritual well-being. Results showed that hypotheses 1a and 1d were supported by the data, but not hypotheses 1b and 1c. That is, transformational leadership was directly and positively associated with employees' emotional and spiritual well-being, but it was not associated with employees' healthy behaviour and physiological well-being. These results will be discussed in more detail at the end of this chapter.

Mediation Analyses

To test the second set of hypotheses, that the effects of transformational leadership on employee well-being were mediated by workplace spirituality, I conducted a series of multilevel mediation analyses as specified by Baron and Kenny (1986) and Hofmann (personal communication, October 28, 2007). In order to conclude mediation had occurred, I sought to determine whether the following three conditions were satisfied: 1) that transformational leadership affected the employee well-being outcomes 2) that transformational leadership affected the hypothesized mediator workplace spirituality and 3) that workplace spirituality affected the employee well-being outcomes after controlling for transformational leadership. The determination of whether mediation was full or partial could then be made by assessing whether in step 3 the effect of transformational leadership on the employee well-being outcomes was reduced or became statistically non-significant once workplace spirituality was entered into the model (Baron & Kenny, 1986). While the initial intention had been to assess mediation models for all four of the employee well-being outcomes, the fact that hypotheses 1b and 1c were not supported meant that there was no theoretical justification for continuing with these analyses. Accordingly, I proceeded with mediation analyses for employee

emotional well-being and spiritual well-being. These results are presented in Tables 6 and 7. I will now present the results for each, beginning with emotional well-being.

As previously referenced, for path c, after controlling for respondent age, tenure and business unit, transformational leadership was directly and positively related to employees' emotional well-being, i.e. $B = .14$, $t_{1, 231} = 2.31$, $p < .05$. In step 2, after controlling for age, tenure and business unit, I regressed the workplace spirituality variable on transformational leadership. When the grand mean centered transformational leadership predictor was added to the model as a fixed effect, it had a positive main effect on workplace spirituality ($B = 2.40$, $t_{1, 235} = 4.21$, $p < .001$). Thus the data supported the hypothesized relationship between transformational leadership and workplace spirituality, thereby meeting the requirement of step 2 of the Baron and Kenny (1986) protocol. In step three, I sought to determine if, after controlling for age, tenure, business unit and transformational leadership (mean centered), workplace spirituality (mean centered) affected the emotional well-being outcome. Again statistically significant results were achieved. The addition of the workplace spirituality variable into the model as a fixed effect produced a positive main effect, ($B = .34$, $t_{1, 233} = 5.71$, $p < .001$). I conducted a visual check of the coefficients to determine whether there was full or partial mediation of transformational leadership on emotional well-being. Only the workplace spirituality variable remained a statistically significant predictor, suggesting full mediation of the effect of transformational leadership on emotional well-being.

Table 6 – Indirect Effect of Leadership on Employees’ Emotional Well-being.

		Fixed effects B	Fixed effects SE	df	t
Path c' DV=EWB	Intercept	4.94***	.38	71.44	13.05
	Age	.16**	.06	234.87	2.57
	Tenure	.00	.05	232.05	.03
	Bus. Unit	.03	.07	51.54	.44
	zTL	.14*	.06	231.03	2.31
Path a DV=WS	Intercept	5.55	3.20	62.67	1.74
	Age	.51	.57	234.97	.89
	Tenure	-.65	.50	230.81	-1.31
	Bus. Unit	-1.41*	.63	44.98	-2.25
	zTL	2.40***	.57	235.00	4.21
Path ab DV=EWB	Intercept	4.71***	.35	67.99	13.59
	Age	.14*	.06	233.68	2.42
	Tenure	.03	.05	229.70	.53
	Bus. Unit	.09	.07	49.52	1.30
	zTL	.04	.06	233.11	.75
	zWS	.34***	.06	233.04	5.71

Notes.

* $p < .05$ (2-tailed) ** $p < .01$ (2-tailed) *** $p < .001$ (2-tailed)

The results for the spiritual well-being outcome were similar. In step 1, after controlling for respondent age, tenure and business unit, transformational leadership was found to be directly and positively related to employees’ spiritual well-being, i.e. $B = .16$, $t_{1, 231} = 2.49$, $p < .05$. In step 2, after controlling for age, tenure and business unit, I also regressed the workplace spirituality variable on transformational leadership. When the

grand mean centered transformational leadership predictor was added to the model as a fixed effect, it had a positive main effect on workplace spirituality ($B = 2.40, t_{1,235} = 4.21, p < .001$). Thus the data supported the hypothesized relationship between transformational leadership and workplace spirituality, meeting the requirement of step 2 in the mediation protocol of Baron and Kenny (1986). In step three, I sought to determine if, after controlling for age, tenure, business unit and transformational leadership (mean centered), workplace spirituality (mean centered) affected the spiritual well-being outcome. Again statistically significant results were achieved. The addition of the workplace spirituality variable into the model as a fixed effect produced a positive main effect, ($B = .42, t_{1,231} = 6.98, p < .001$). I then conducted a visual check of the coefficients to determine whether there was full or partial mediation of transformational leadership on spiritual well-being. Only the workplace spirituality variable remained a statistically significant predictor, here again suggesting full mediation of the effect of transformational leadership on spiritual well-being.

Thus, two of the four hypothesized indirect relationships were supported by the data. The effects of transformational leadership on employee emotional and spiritual well-being were both fully mediated by workplace spirituality, but there was no support for the hypothesized relationships with healthy behaviour or physiological well-being.

Table 7 – Indirect Effect of Leadership on Employees’ Spiritual Well-being.

		Fixed effects B	Fixed effects SE	df	t
Path c' DV=SWB	Intercept	4.64***	.37	73.48	12.46
	Age	.15*	.06	232.78	2.32
	Tenure	.05	.06	228.65	.84
	Bus. Unit	.07	.07	53.74	.93
	zTL	.16*	.06	231.19	2.49
Path a DV=WS	Intercept	5.55	3.20	62.67	1.74
	Age	.51	.57	234.97	.894
	Tenure	-.65	.50	230.81	-1.31
	Bus. Unit	-1.41*	.63	44.98	-2.25
	zTL	2.40***	.57	235.00	4.21
Path ab DV=SWB	Intercept	4.40***	.35	65.61	12.64
	Age	.12*	.06	231.84	2.08
	Tenure	.08	.05	227.02	1.51
	Bus. Unit	.13	.07	48.23	1.88
	zTL	.04	.06	230.99	.72
	zWS	.42***	.06	230.87	6.98

Notes.

*p < .05 (2-tailed) **p < .01 (2-tailed) ***p < .001 (2-tailed)

Discussion

As outlined in the results section, multilevel modeling of the Study 1 data provided support for the proposed mediation model relative to two of the four well-being measures. Analysis revealed the workplace spirituality variable fully mediated the effects of transformational leadership on respondents’ emotional and spiritual well-being. The

finding of an indirect effect on the emotional well-being measure is consistent with the finding of Arnold et al. (2007), and as such provides further support for this proposed relationship. The finding that the effect of transformational leadership on spiritual well-being is also mediated by workplace spirituality provides the first known empirical support for a much theorized relationship (Benefiel, 2005a; Delbecq, 1999; Fry, 2003). While Fry et al. (2005), Fry and Matherly (2006), Fry and Slocum (2008) found evidence of workplace spirituality as a mediator of spiritual leadership on outcome measures related to employee performance and organizational commitment, they did not have employee well-being as an outcome measure.

The data did not support the hypothesized associations between transformational leadership and healthy behaviour, or transformational leadership and physiological well-being. Since this is the required first condition to be met in mediation analyses (Baron & Kenny, 1986), this also meant that the hypotheses related to mediation were also not supported.

It is interesting that the two dependent variables for which the mediation model did hold were both more psychologically oriented outcome measures, while the two for which there was no apparent relationship were not. There are several possible reasons why no support was found for the behavioural and physiological well-being outcomes. The healthy behaviour items for example were newly developed at their time of use in this study, and had not been extensively tested and validated. As noted previously, this was also the index for which there was considerable missing data and so perhaps the deletion of the four consumption related items affected the integrity of the measure. The physiological well-being items however were developed in the mid-1970s (Derogatis &

Cleary, 1977) and adapted for a 1995 study (Johnston, et al., 1995) and have been used extensively. Here, there were also no issues with missing data and the scale alpha was .79. The strong evidence of links between leadership and health outcomes from other research suggests there might be another reason for the finding of non-significance.

The nature of the employees in the sample could also help explain the non-significant results related to healthy behaviour and physiological well-being. As noted, nurses have been described as some of the sickest and most stressed of employees (Cummings, et al., 2008). A large percentage of the employees work in long-term care and homecare, and would be nurses and personal care workers. The respondents in this sample were also older and overwhelming female. It can be expected that many are dealing with physiological symptoms related to their stage of life. For example, if they are perimenopausal or menopausal they may be experiencing hot flashes, headaches, dizzy spells and fatigue. If these women are also caregivers for children or aging parents, they would likely be time pressured. Research has already shown that individuals in such situations, particularly women, are apt to experience greater conflict and stress (Marks, 1998; Stephens, Townsend, Martire, & Druley, 2001). In such situations, healthy eating, exercise, appropriate sleep and regular health checks might be expected to fall by the way side. The nature of the work might also play a role in the respondents' well-being as it is physically demanding. Many of the seniors for whom the employees are providing care are bedridden, and so there is often heavy lifting involved, and back and other injuries would likely be common. An employee dealing with such chronic issues might not perceive their physiological well-being as very good.

Another intriguing possibility is that there are first and second order effects relative to well-being. For example, Kelloway and Day (2005a) report that under conditions of emotional stress, people can be prone to excessive smoking, eating or drinking. Often the very changes we need to improve our emotional state, such as exercise, proper diet or increased rest, are those upon which we are least able to act (Kelloway & Day, 2005a). On the one hand, having a leader who focuses on creating an environment where workers feel they belong and are valued, have shared organizational values and are doing truly meaningful work could well enhance an employee's emotional and spiritual well-being. Nonetheless, it seems reasonable that this combination of emotional and spiritual well-being alone would have little to no immediate impact on employees' healthy behaviour or physiological well-being. More research is obviously warranted to better understand what happens in such situations.

Like all research, this study has both strengths and weaknesses. In terms of strengths, the data were analyzed using multilevel modeling, an approach being increasingly recommended for studies with hierarchically structured data. This more sophisticated approach allowed for the simultaneous examination of several variables and their respective contributions to the model. As a result, this analytical approach should provide greater confidence in the validity of the results. The sample was reasonably large and consisted of working adults in a relatively high stress work environment.

In terms of limitations, this is a cross-sectional study, and so no inferences can be made about causality. The study is based on self-report data from a single source and, as such, is prone to all of the limitations and biases inherent in such an approach. However, this data collection method is the one most often used in leadership studies (Bass, et al.,

1999; Fiedler, 1996). It has been argued that, because of their vantage point, employees are in the best position to evaluate leaders' range of behaviours, so it is appropriate they provide study data (Gilbreath & Benson, 2004). The fact that the study explores deeply personal areas, namely well-being and workplace spirituality, also makes the use of surveys somewhat problematic. As pointed out by Milliman et al. (2003) and Diener et al. (1999) respectively, the nature of workplace spirituality and personal well-being may not lend themselves to effective study through a survey instrument. The response rates reflect that I did not hear from all employees, so response bias might be an issue with the sample. I did receive surveys from respondents who did not feel able to assess a leader given that their association was limited. For example, several employees had been on maternity or sick leave had not worked with their new supervisors very long and so advised they were not comfortable completing an assessment. Such surveys were discarded so as not to bias results.

My measures may also present limitations. As discussed, there were issues with one of the well-being measures, that is healthy behaviour, and this problematic element may have limited the potential of findings in this one area. I also operationalized workplace spirituality in a particular way, and some may take issue with my particular view and even with the notion of workplace spirituality at all. In fact, some researchers have challenged the newness of the concept of workplace spirituality (e.g., Brown, 2003; Porth et al., 2003). Theologians have a long history of studying the relationship between spirituality, religion, and work (Miller, 2006; Williams, 2003). For example, the health care sector, in particular, has a rich history of spiritual values being integrated into work. Most of the hospitals in the Western world were started by religious organizations. In

addition, much of what is being discussed under workplace spirituality has been previously described and studied in human relations, corporate social responsibility, human resource development, organizational development, and healthy workplaces, among other places. For example, the link between employee health and happiness and employee productivity is not a new idea (e.g. Herzberg, Mausner, and Snyderman, 1959; McGregor, 1967), and management scholars studying job characteristics would find many parallels with Hackman and Oldman's (1980) ideas on the importance of task significance. Such debates are not likely to be settled quickly or easily.

It is also recognized that this research is based on data from a single organization with employees drawn from distinct business units. Through the collection of comprehensive demographic data and their use as control variables, efforts were made to control for the differences in employee work environments. That said, Northwood's history, values-based culture and operations represents a rather unique research site, characterized by a large percentage of female workers who are older than average and employed in the not-for-profit health care sector. These factors all limit the generalizability of the findings.

In conclusion, this first study served as a replication and extension of the research done by McKee (2005), Fry et al. (2005), Fry and Matherly (2006), Arnold et al. (2007) and Fry and Slocum (2008). Specifically, it demonstrated support for a model in which the effects of transformational leadership on employee emotional well-being and spiritual well-being were indirectly realized through the intervening variable of workplace spirituality. To date, no published studies have empirically demonstrated such a relationship with similar workplace spirituality and employee well-being measures,

although the previously named studies found evidence of workplace spirituality mediating the effects of leadership on other employee outcomes. With the growing interest in workplace spirituality and the development of healthy workplaces (Gilbreath & Montesino, 2006; Kelloway & Day, 2005a), these findings are highly relevant. They suggest a path by which transformational leaders can hope to positively influence the well-being of their employees. The data suggest that it may be very worthwhile for leaders to 1) devote time and effort to building relationships and community with their employees, 2) help employees understand the contribution their work efforts make to the larger organization and the importance of that contribution, and 3) clearly articulate the values of the organization so as to help employees understand and potentially identify with them. Employees of such leaders may be healthier emotionally and spiritually. We know from other research in the religion/spirituality and health areas that this added strength may help employees to be more resilient to the negative effects of work related stress. Given the importance of the role of health care workers, the chronic shortages of such skilled employees and the difficult circumstances under which they are said to be working (Cummings, et al., 2008), it would seem important to use every possible means to support these individuals in the important work they do in our society.

Chapter 5 – Transformational Leadership Training Intervention

Introduction

In reviewing the learning from leadership training studies, Kelloway and Barling (2000) proposed there is strong evidence that individuals can be taught transformational leadership, and argued for formal assessment of such efforts using meaningful organizational outcomes. As outlined in the introduction, several studies have demonstrated such a relationship and the benefits in terms of individual and organizational outcomes (see for e.g. Barling, et al., 1996; Dvir, et al., 2002; Dvir & Shamir, 2003; Kelloway, et al., 2000; Mullen & Kelloway, 2008; Towler, 2002). Kelloway and Barling (2000) pointed out the need to develop a better understanding of specifically how such training interventions work and raised the possibility that intervening variables may be the cause. Further, they posited that the effects of transformational leadership on such factors as leader and work group performance can be mediated by affective organizational commitment, trust in leaders and perceptions of group cohesion. They proposed that transformational leadership training encourages leaders to believe they can “make a difference.” This belief, in turn, increases leaders’ perceptions of self-efficacy and, in keeping with Bandura’s (1977) social learning theory, leads them to expend greater effort and to do so more persistently (Kelloway & Barling, 2000). Like many leadership scholars (Collins & Holton III, 2004; Conger, 2004), Kelloway and Barling have called for continued study of training initiatives to identify and confirm such causal relationships.

This second study is one response to this call and its purpose was three-fold. First, the study was intended to assess the effectiveness of transformational leadership

training. Specifically, the objective was to determine whether employees of leaders who received training would perceive incremental differences in their leaders' transformational leadership behaviour. Second, the study was intended to assess the effects of this increased transformational leadership behaviour on multiple measures of employee well-being. Lastly, the study sought to explore the means by which these effects were realized by testing, for a second time, the hypothesized relationship between transformational leadership and employee well-being through the mediating variable of workplace spirituality.

As discussed in the literature review, previous studies have demonstrated that transformational leadership can be taught so that the employees of leaders who have been trained perceive their leaders as exhibiting more transformational leadership behaviour (Barling, et al., 1996; Dvir, et al., 2002; Kelloway, et al., 2000; Mullen & Kelloway, 2008). Based on such evidence, I hypothesized the following:

Hypothesis 1: Employees of leaders who are trained will perceive their leaders as exhibiting higher levels of transformational leadership behaviour than the employees of leaders who are not trained.

In the discussion for Study 1, I noted that one significant limitation of the study was its cross sectional nature. Study 2 attempts to address this shortcoming by comparing results from two waves of data collection to test the proposed associations between transformational leadership and employee well-being pre- and post-training. Therefore, building on Study 1 and the literature previously discussed there, I advance the following hypotheses to assess the longitudinal effects of transformational leadership on employee well-being:

Hypothesis 2: Controlling for transformational leadership at pre-test, transformational leadership at post test will predict employees' [a] emotional well-being at time 2, [b] healthy behaviour at time 2, [c] physiological well-being at time 2, and [d] spiritual well-being at time 2.

The final hypothesis in Study 2 re-tests the hypothesized mediation model advanced in Study 1, namely that the effects of transformational leadership on employee-well-being are mediated through workplace spirituality, using longitudinal data. Thus, building on the literature and findings of Study 1, I propose the following:

Hypothesis 3a: Controlling for transformational leadership at pre-test, transformational leadership at post-test will have an indirect positive effect, mediated through workplace spirituality, on employees' [a] emotional well-being at time 2, [b] healthy behaviour at time 2, [c] physiological well-being at time 2, and [d] emotional well-being at time 2.

Method

Participants

As discussed in the research program overview, all leaders and employees of Northwood, full and part-time, were invited to participate in the study by completing pre- and post-training surveys. Of the 1,029 employees contacted, 516 volunteered to participate at time 1 and 425 volunteered to participate at time 2, translating to response rates of 50% and 41% respectively. Using a personal identification code supplied by the respondents at time 1 and time 2, I was able to match responses from the two time periods for 243 of the participants, reporting to a 65 individual leaders, for use in the current study.

The 243 respondents were overwhelmingly female (89%), tended to be older (25.5% were between 36 and 45 years of age, 31.3% were between 46 and 55 years, and 28.8% were between 56 and 65 years), full-time workers (48.3% worked 40+ hours). As well, 85.7% had more than 5 years of tenure with the organization (46.9% had 5-10 years of service, and 19.3% had 11-15 years). The majority of participants (55.6%) reported to a supervisor, with the next largest group (16.5%) reporting to a manager. In terms of business unit affiliation, the largest numbers of respondents were from homecare (51.9%) and long-term care (24.7%), with corporate support services accounting for 16.0%.

Procedure

The leadership training relating to Study 2 was carried out in two phases; the first phase occurred between November 2005 to February 2006 and the second phase from April to June 2006. The first phase involved leaders and employees from the long-term care and facilities services areas, and the second phase involved leaders and employees from the homecare group and corporate administration. This phasing of leader training was a natural one as it grouped leaders who were physically located together in the same facility and simplified logistics.

The training protocol established by Barling et al. (1996) was used in the study. Each phase of the field experiment consisted of a pre-test, treatment and post-test. A quasi-experimental design was used. In each phase, leaders from the business areas were randomly assigned to experimental and control groups by the organization's human resource and operations staff. Then, these individuals were assigned to specific training sessions. The employees of these leaders were also identified by human resources and

operations staff. Phase one had three treatment and two control groups, and phase two had two treatment groups and one control group. Due to numbers and a desire to ensure sufficient data collection to test for a training effect, the decision was made to have more treatment than control groups. After the initial group assignment, some leaders had to be shifted from group to group to ensure adequate staffing of the organization and take into account already approved vacation. Ultimately, each group consisted of between 15 to 25 participants. I followed the data collection procedure outlined in Study 1 to survey the employees of all these leaders.

Leaders in the treatment groups were then exposed to the training over a two to three week period. The treatment consisted of a one and a half day transformational leadership training session led by an experienced trainer well versed in transformational leadership. In small groups of 20 participants, the leaders were first exposed to the principles of transformational leadership and its associated benefits. Then, leaders completed a module on goal setting relative to their own transformational leadership practices. Participants were asked to establish three to five specific, short-term goals for actively incorporating, over a three-month period, the principles of transformational leadership into their day-to-day work routines.

Within three to five days of the completion of their training session, leaders were contacted again and invited to meet with the principal researcher or one of two other research colleagues to receive feedback on their leadership behaviours. This debriefing session lasted anywhere from 30-45 minutes with the objectives of reviewing their transformational leadership ratings and discussing their development goals. The ratings were presented in a single page report consisting of their self-assessment scores, the

average score of leaders from the research site and the average score from a national sample of over 2,400 leaders who have participated in similar training. If three or more employees of a leader had submitted ratings, then these data were also averaged and presented to the leader (see Appendix K for sample trainee feedback report). Training participants were then asked to review their three to five actionable goals and make adjustments as required in light of the direct-report feedback. Goals were formally recorded by the trainees, and they were encouraged to immediately begin applying their learning with the view of realizing their objectives.

Following a three-month waiting period, surveys were again distributed to the employees of all leaders. These post-tests were duplicates of the pre-tests with the exception that dates had been changed. Once this second round of surveying was complete, leaders assigned to the control group were also trained.

This same procedure was followed for the second phase of the study, and the same trainer delivered all of the phase two training sessions, with the exception of the control group. I trained the second control group with another colleague who had been involved in the study.

Measures

The measures used in Study 2 were the same as those used in Study 1.

Specifically, they are as follows:

Dependent Variables: To assess emotional well-being, I again used the 12 items from the General Health Questionnaire (Goldberg, 1972). Cronbach's alpha for this scale was .90 at time 1 and .90 at time 2 (see Appendix D for a complete list of items). To assess healthy behaviours, I used six items created by Francis (personal communication,

August 23, 2005). Cronbach's alpha for this scale was .80 at time 1 and .68 at time 2 (see Appendix E for a complete list of items). To gain a measure of physiological well-being, I used the same 10 items adapted from work by Johnston et al. (1995), and Derogatis and Cleary (1977). The Cronbach alpha for this scale was .86 at time 1 and .81 at time 2 (see Appendix F for a complete list of items). To assess spiritual well-being, I again used the 20 item scale developed by Paloutzian and Ellison (1982). Cronbach's alpha for this scale was .92 at time 1 and .93 at time 2 (see Appendix G for a complete list of items). In all cases, higher scores mean higher levels of the various aspects of well-being.

Exogenous Variables: The study included four independent variables. The Multifactor Leadership Questionnaire (MLQ) developed by Bass and Avolio (1995) was again used to assess transformational leadership, with higher scores indicating more transformational leadership behaviour (see Appendix H for a list of sample items). Cronbach's alpha for this scale was .93 at time 1 and .95 at time 2. To assess workplace spirituality, I used the same three measures of sense of community, meaningful work and shared values to create my measure of workplace spirituality. The six item measure by May, et al. (2004) was used to assess respondents' perceptions of the meaningfulness of their work (see Appendix I for a list of sample items). Cronbach's alpha for this scale was .93 at time 1 and .92 at time 2. The three item scale by Cable and Judge (1996) was used to assess the alignment of individuals' values with those of the organization (see Appendix I for a list of sample items). Cronbach's alpha for this scale was .84 at time 1 and .85 at time 2. And, the seven items adapted by Milliman, et al. (2003) were used to evaluate "conditions of community" (see Appendix I for a list of sample items). Cronbach's alpha for this scale was .93 at time 1 and .92 at time 2. An exploratory factor

analysis was again completed to test the underlying structure of the components of the workplace spirituality measure at time 1 and time 2 (see Appendix L for results of the Study 2 Varimax rotation). As with study 1, Varimax rotation was performed on both time 1 and time 2 data. Following the removal of items with cross-loadings, factor analysis revealed the presence of simple structure (Thurstone, 1947), with three components for both time 1 and time 2 showing a number of strong loadings, and all variables loading substantially on only one component. For time 1, the three factors explained a total of 65.12% of the variance, with component 1 (Meaningful Work) representing 27.18% component 2 (Sense of Community) representing 25.37% and component 3 (Values Alignment) representing 13.36%. For time 2, the 3 factors explained a total of 71.78% of the variance, with component 1 (Meaningful Work) representing 31.58% component 2 (Sense of Community) representing 27.05% and component 3 (Values Alignment) representing 13.15%. A test of scale reliability using Cronbach's alpha was conducted and the result was .91 at time 1 and .93 at time 2. Given that the three measures had different scales, I standardized the items to create the composite measure per Kelloway and Watts (1994). Again, higher scores indicated greater workplace spirituality.

Results

Prior to analysis, I cleaned the study data set and tested for missing data. As with Study 1, missing data were only a problem for the items related to caffeine, cigarette, alcohol and over the counter drug consumption. With this data set, missing data levels were 3.7%, 4.7%, 17.3% and 8.2% respectively. As a result, I again decided to eliminate these four consumption related items and retain the remaining six behavioural items that

were associated with sleeping, eating, exercise, etc. The Cronbach alpha's for this shortened index was .75 at time 1 and .67 at time 2. In addition, eight cases were found to have significant missing data and this did not seem random in nature, i.e. cases would have data missing for entire scales. These cases were also deleted from the data set. Using SPSS 14.0, I then examined the data set to ensure it met the assumptions necessary for multivariate analyses (Bickel, 2007), namely that of normality, linearity and the absence of homoscedasticity, multicollinearity and outliers. Study data showed some evidence of skew and kurtosis beyond normally accepted levels, i.e. more than +/- 3. Outlier analysis also revealed the presence of data points with standardized scores above/below acceptable levels, i.e. z scores +/- 4. Since multivariate techniques are robust to minor violations of the assumptions of normality (Tabachnick & Fidell, 2001), I did not immediately delete these cases from the data set, but proceeded to determine whether they were also multivariate outliers. Using Mahalanobis and Cook's distance, I determined there were five multivariate outliers in the data set, and I deleted these cases, resulting in a final sample size of 238. The data met the remaining multivariate assumptions and were deemed appropriate for analyses. Means, standard deviations, scale reliabilities and intercorrelations for all study variables are presented in Table 8. Means and standard deviations for control variables by control and treatment group are presented in Table 9.

Multilevel Regression Analyses

To test my first hypothesis related to a training effect, I again followed the recommendations of Stride (personal communication June 17, 2008) for multilevel analyses. I first constructed a baseline model for the dependent variables, and then

estimated an unconditional model for transformational leadership at time 2, which also contained no predictors but allowed the intercept term to vary by leader. Per Hofmann and Gavin (1998) and Hofmann (personal communications October 28, 2007), I also grand mean centered predictors. Then I entered my control variables and predictors and assessed their effects. These results are summarized in Table 1.

Table 8 -- Study 2 Means, Intercorrelations and Scale Reliabilities

	Mean	SD	1	2	3	4	5	6	7	8	9	10	11	12
1. Emotional	5.61	0.93	.90											
Well-being T1														
2. Emotional	5.71	0.88	.65**	.90										
Well-being T2														
3. Healthy	5.18	1.13	.29**	.31**	.80									
Behaviours T1														
4. Healthy	5.12	1.13	.32**	.39**	.79**	.68								
Behaviours T2														
5. Physiological	1.78	0.55	.51**	.51**	.25**	.28**	.91							
Well-being T1														
6. Physiological	1.84	0.56	.37**	.52**	.19**	.23**	.77**	.81						
Well-being T2														
7. Spiritual	5.45	1.04	.60**	.38**	.28**	.29**	.28**	.18	.92					
Well-being T1														
8. Spiritual	5.50	1.05	.42**	.57**	.29**	.34**	.27**	.25**	.74**	.93				
Well-being T2														
9. Transformational	2.63	0.75	.18**	.18**	.06	-.01	.08	.06	.07	.10	.93			
Leadership T1														
1. Transformational	2.63	0.82	.22**	.25**	.11	.05	.11	.12	.06	.13*	.79**	.95		
Leadership T2														
11. zWorkplace	0.38	1.56	.37**	.38**	.18**	.10	.26**	.19**	.30**	.36**	.35**	.46**	.91	
Spirituality T1														
12. zWorkplace	0.37	0.99	.37**	.37**	.18**	.10	.26**	.19**	.29**	.34**	.34**	.46**	.99**	.93
Spirituality T2														

Notes: Listwise N for correlations = 231

Internal scale reliabilities appear along the diagonal in bold face type.

† Median reported. For age, 4 represents category 46-55 years; for tenure, 2 represents 5-10 years. + Mode reported for business unit, 3 represents homecare.

‡ Variable has been standardized

*p < .05 (2-tailed) **p < .01 (2-tailed).

Table 9 – Study 2 Means for Control and Training Groups

		Control Group		Training Group	
		Mean	SD	Mean	SD
1.	Age	4.00†	1.10	4.00†	1.05
2.	Tenure	2.00†	1.17	2.00†	1.08
3.	Business Unit	3.00+		3.00+	
4.	Emotional Well-being T1	5.58	.90	5.63	.95
5.	Emotional Well-being T2	5.78	.78	5.68	.92
6.	Healthy Behaviours T1	5.18	1.06	5.18	1.16
7.	Healthy Behaviours T2	5.04	1.09	5.16	1.15
8.	Physiological Well-being T1	4.23	.54	4.21	.56
9.	Physiological Well-being T2	4.15	.54	4.15	.58
1.	Spiritual Well-being T1	5.45	1.10	5.45	1.02
11.	Spiritual Well-being T2	5.52	1.01	5.49	1.07
12.	Transformational Leadership T1	2.48	.74	2.71	.75
13.	Transformational Leadership T2	2.40	.84	2.75	.78
14.	zWorkplace Spirituality T1	.08	.95	.04	1.02
15.	zWorkplace Spirituality T2	.09	.96	.04	1.02

Notes: Control group $N = 79$ Training group $N = 158$

† Median reported. For age, 4 represents category 46-55 years; for tenure, 2 represents 5-10 years.

+ Mode reported for business unit, 3 represents homecare.

As shown in Table 10, the null-model for transformational leadership at time 2 established the baseline for the $-2LL$ fit statistic at 582.83. Introducing the leader code variable and allowing intercepts to vary reduced the fit statistics to 569.34 ($\Delta-2LL = -12.96$). The addition of control variables, including leaders' time 1 transformational leadership scores (mean centered), as fixed effects improved the model fit, with the $\Delta-2LL$ statistic dropping dramatically to 366.17 ($-2LL = -208.94$). There was a positive main effect for time 1 leadership, i.e. $B = .63$, $t_{1, 230} = 18.92$, $p < .001$. When the leader group variable was added to the model as a fixed effect, training had a statistically

significant positive main effect on transformational leadership at time 2, i.e. the control group $B = -.14$, $t_{1,27} = 1.81$, $p < .10$ using a one-tailed test. Thus, the hypothesis that training would have a positive effect on employees' perceptions of transformational leadership behaviour was supported.

To test hypotheses 2a-2d, that (after controlling for leadership pre-test differences) transformational leadership at post-test will predict employees' [a] emotional well-being at time 2, [b] healthy behaviour at time 2, [c] physiological well-being a time 2, and [d] spiritual well-being a time 2, I again followed the recommendations of Springer (personal communication June 17, 2008) for multilevel analyses as outlined in detail in Study 1. These results are summarized in Tables 11-14.

For emotional well-being, the null-model established the baseline for the $-2LL$ fit statistics at 602.28. Introducing the leader code variable and allowing intercepts to vary did not alter the fit statistic. The addition of the transformational leadership at time 1 (mean centered) control variable did improve the model fit, bringing the $-2LL$ statistic down to 598.72 ($\Delta-2LL = -3.56$) and it was significant at $p < .001$. When the grand mean centered predictor transformational leadership at time 2 was added to the model as a fixed effect, it had a significant positive main effect on employee well-being, i.e. $B = .26$, $p < .001$. The $-2LL$ also improved, dropping an additional 4.79 to 593.93. Hypothesis 2a, that after controlling for pre-test scores transformational leadership at post-test would predict employees' emotional well-being, was supported.

Table 10 – Effect of Training on Leadership Ratings at Time 2.

	Fixed effects B	Fixed effects SE	-2LL	Δ -2LL†	Random effects variance	Residual variance	ICC[1]
Null			582.83			.67****	
Intercept	2.63****	.05					
Uncond.			569.34	-12.96	.18***	.52****	.25
Intercept	2.57****	.08					
Controls			366.17	-203.17	.02	.24****	.08
Intercept	2.59****	.18					
Age	.01	.03					
Tenure	.02	.03					
Business Unit	-.01	.04					
zTLT1	.63****	.03					
Leader Group			366.20	.03	.01	.24****	.06
Intercept	2.64****	.17					
Age	.01	.03					
Tenure	.02	.03					
Business Unit	-.01	.04					
zTLT1	.62****	.03					
Leader Group = 0†	-.14*	.08					

Notes: Listwise $N = 41$

† 0 denotes control group

† Model estimation by Restricted Maximum Likelihood hence significance test for change in -2LL due to additional fixed effects is not applicable.

* $p < .1$ (1-tailed) ** $p < .05$ (2-tailed) *** $p < .01$ (2-tailed) **** $p < .001$ (2-tailed)

Table 11 – Effect of Leadership on Employees’ Emotional Well-being.

	Fixed effect B	Fixed effects SE	-2LL	Δ -2LL†	Random effects variance	Residual variance	ICC[1]
Null			602.28			.77****	
Intercept	5.71****	.06					
Uncond.			602.28	-	.00	.77****	.00
Intercept	5.71****	.06					
Control			598.72	-3.56	.00	.75****	.36
Intercept	5.71****	.06					
zTLT1	.16***	.06					
Leadership Time 2			593.93	-4.79	.00	.72****	.48
Intercept	5.70****	.06					
zTLT1	-.04	.09					
zTLT2	.26***	.09					

Notes: Listwise $N = 233$

† Model estimation by Restricted Maximum Likelihood hence significance test for change in -2LL due to additional fixed effects is not applicable.

* $p < .1$ (1-tailed) ** $p < .05$ (2-tailed) *** $p < .01$ (2-tailed) **** $p < .001$ (2-tailed)

For healthy behaviour, the null-model established the baseline for the -2LL fit statistics at 721.84. Introducing the leader code variable and allowing intercepts to vary reduced the fit statistic to 720.47 (Δ -2LL = -1.37). The addition of the transformational leadership at time 1 (mean centered) control variable as a fixed effect did not improve the model fit, the -2LL statistic increased to 723.76 (Δ -2LL = 3.29). When the predictor, grand mean centered transformational leadership time 2, was added to the model as a fixed effect, it also did not have a significant positive main effect on healthy behaviour. The -2LL fit statistics deteriorated again, increasing by .85 to 724.61. Thus, hypothesis

1b, that transformational leadership at post-test would predict employees' healthy behaviour, was not supported.

Table 12 – Effect of Leadership on Employees' Healthy Behaviour.

		Fixed effect B	Fixed effect SE	-2LL	Δ -2LL†	Random effects variance	Residual variance	ICC[1]
Null				721.84			1.28****	
	Intercept	5.12****	.07					
Uncond.				720.47	-1.37	.08	1.21****	
	Intercept	5.10****	.08					
Control				723.76	3.29	.08	1.21****	
	Intercept	5.10****	.08					
	zTLT1	-.01	.08					
Leadership Time 2								
	Intercept	5.10****	.09	724.61	.85	.08	1.21****	
	zTIT1	-.13	.12					
	zTLT2	.15	.12					

Notes: Listwise $N = 233$

† Model estimation by Restricted Maximum Likelihood hence significance test for change in -2LL due to additional fixed effects is not applicable.

* $p < .1$ (1-tailed) ** $p < .05$ (2-tailed) *** $p < .01$ (2-tailed) **** $p < .001$ (2-tailed)

For physiological well-being, the null-model established the baseline for the -2LL fit statistic at 40.0. Introducing the leader code variable and allowing intercepts to vary did not alter the fit statistic (Δ -2LL = .00). The addition of the transformational leadership at time 1 (mean centered) control variable also did not improve the model fit, the -2LL statistic was unchanged. When the grand mean centered transformational leadership time 2 predictor variable was added to the model as a fixed effect, it did not have a significant positive main effect on employee well-being. The -2LL fit statistic

also deteriorated, increasing by 1.08. Hypothesis 1c, that transformational leadership at post-test would predict employees' physiological well-being was also not supported.

Table 13 – Effect of Leadership on Employees' Physiological Well-being.

	Fixed effect B	Fixed effect SE	-2LL	Δ -2LL†	Random effects variance	Residual variance	ICC[1]
Null			400.00			.32****	
Intercept	1.84****	.04					
Uncond.			400.00	.00	.00	.32****	
Intercept	1.84****	.04					
Control			403.85	3.85	.00	.32****	
Intercept	1.84****	.04					
zTLT1	-.03	.04					
Leadership Time 2			404.93	1.08	.00	.31****	
Intercept	1.84****	.04					
zTLT1	.04	.06					
zTLT2	-.10*	.06					

Notes: Listwise $N = 234$

† Model estimation by Restricted Maximum Likelihood hence significance test for change in -2LL due to additional fixed effects is not applicable.

* $p < .1$ (1-tailed) ** $p < .05$ (2-tailed) *** $p < .01$ (2-tailed) **** $p < .001$ (2-tailed)

Lastly, for spiritual well-being, estimation of the null model established a -2LL baseline fit statistic of 685.31. When the leader code variable was introduced and intercepts were allowed to vary, the fit statistic was essentially unchanged, i.e. 685.30 (Δ -2LL = -.01). The addition of the mean centered transformational leadership (time 1) control variable as a fixed effect did not improve the model fit, the -2LL statistic increased to 686.57 (Δ -2LL = 1.27). Model fit was also not improved with the addition of the grand mean centered transformational leadership time 2 predictor. The -2LL

increased by .71 to 687.28, and there was no positive main effect. Hypothesis 2d, that leadership would predict employees' spiritual well-being, was not supported by the data.

Table 14 – Effect of Leadership on Employees' Spiritual Well-being.

		Fixed effect B	Fixed effect SE	-2LL	Δ -2LL†	Random effects variance	Residual variance	ICC[1]
Null				685.31			1.10****	
	Intercept	5.50****	.07					
Uncond.				685.30	-.01	.00	1.10****	
	Intercept	5.50****	.07					
Control				686.57	1.27	.00	1.10****	
	Intercept	5.50****	.07					
	zTLT1	.10	.07					
Leadership Time 2				687.28	0.71	.00	1.08****	
	Intercept	5.50****	.07					
	zTLT1	-.02	.11					
	zTLT2	.15	.11					

Notes: Listwise $N = 233$

† Model estimation by Restricted Maximum Likelihood hence significance test for change in -2LL due to additional fixed effects is not applicable.

* $p < .1$ (1-tailed) ** $p < .05$ (2-tailed) *** $p < .01$ (2-tailed) **** $p < .001$ (2-tailed)

In summary, the first round of multilevel analyses was intended to test whether transformational leadership at post-test would predict employee well-being. Results showed that hypothesis 2a was supported by the data, but not hypotheses 2b, 2c and 2d. That is, transformational leadership was found to be a predictor of employees' emotional well-being, but not of employees' healthy behaviours, physiological well-being and spiritual well-being. These results will be discussed in more detail at the end of the chapter.

Mediation Analyses

To test the third set of hypotheses, I again conducted multilevel mediation analyses per Study 1. Specifically, I tested whether, after controlling for pre-test leadership scores, transformational leadership at post-test had an indirect positive effect, mediated through workplace spirituality, on the employee well-being outcomes. While the initial intention had been to assess mediation models for all four of the employee well-being outcomes, the fact that hypotheses 2b, 2c and 2d were not supported meant that there was no theoretical justification for continuing with these analyses. Accordingly, I proceeded with mediation analysis solely for employee emotional well-being.¹ These results are presented in Tables 14.

As previously referenced, after controlling for transformational leadership at time 1, transformational leadership at time 2 was directly and positively related to employees' emotional well-being, i.e. $B = .26$, $Z = 2.82$, $p < .01$. Controlling for transformational leadership at time 1, I regressed the workplace spirituality variable on transformational leadership. When the grand mean centered transformational leadership at time 2 predictor was added to the model as a fixed effect, it had a positive main effect on workplace spirituality ($B = 5.00$, $Z = 5.34$, $p < .001$). Thus the data supported the hypothesized relationship between transformational leadership and workplace spirituality, thereby meeting the requirement of step 2 of the Baron and Kenny (1986) protocol. Then, I sought to determine if, after controlling for transformational leadership (mean centered) time 1 and 2, workplace spirituality (mean centered) affected the emotional well-being outcome. Again statistically significant results were achieved. The addition

¹ Due to a recurring error message encountered when conducting the analyses in SPSS 14.0, i.e. that the final Hessian matrix was not positive definite, this last round of analysis was conducted using Systat 12.

of the workplace spirituality variable into the model as a fixed effect produced a positive main effect, ($B = .12, Z = 4.67, p < .001$). I conducted a visual check of the coefficients to determine whether there was full or partial mediation of transformational leadership time 2 on emotional well-being. Only the workplace spirituality variable remained a statistically significant predictor, suggesting full mediation of the effect of transformational leadership on emotional well-being at post-test.

Table 15 – Indirect Effect of Leadership on Employee Emotional Well-being.

		Fixed effects B	Fixed effects SE	Z
Path c' DV=EWBT2	Intercept	5.71****	.06	102.42
	zTLT1	-.04	.09	-.46
	zTLT2	.26***	.09	2.82
Path a DV=WST2	Intercept	.37	.70	.53
	zTLT1	-.43	.93	.46
	zTLT2	5.00****	.94	5.34
Path ab DV=EWBT2	Intercept	5.70****	.06	102.37
	zTLT1	-.05	.09	-.56
	zTLT2	.14	.09	1.45
	zWST2	.12****	.02	4.67

Notes: Listwise $N = 233$

* $p < .1$ (1-tailed) ** $p < .05$ (2-tailed) *** $p < .01$ (2-tailed) **** $p < .001$ (2-tailed)

Thus, one of the four hypothesized indirect relationships was supported by the data. The effects of transformational leadership on employees' emotional well-being were fully mediated by workplace spirituality.

Discussion

As outlined in the introduction to Study 2, the purpose of this research was three-fold: 1) to assess a training field experiment intended to enhance transformational leadership in leaders, 2) to confirm relationships between predictors and outcomes and 3) to establish causality in the proposed mediation model. The results provide some support in all three areas.

First, analysis of the pre- and post-test leadership ratings provides evidence that the training worked, supporting hypothesis 1. Employees of leaders who received transformational leadership training perceived their leaders as exhibiting more of these behaviours at post-test, than did employees of leaders who were not trained. Using a one-tailed significance test, as per Barling et al. (1996), this result stood even after the introduction of a statistical control for pre-training transformational leadership scores. This finding is in keeping with results from other transformational leadership training initiatives (Barling, et al., 1996; Kelloway, et al., 2000; Mullen & Kelloway, 2008), and as such provides additional support for the argument that leaders can enhance their leadership capabilities through training (Kelloway & Barling, 2000). This finding also responds directly to the call for longitudinal evidence of a positive main effect of leadership on employee well-being (van Dierendonck, et al., 2004). Given the reported billions spent on leadership training and development (Raelin, 2004), it is beneficial to know that training can change leaders' behaviour in positive ways that are noticeable to employees and, more importantly, enhance employees' well-being.

The results provide partial support for the hypothesized relationships between transformational leadership and the well-being outcomes. Transformational leadership

was a positive predictor of employees' emotional well-being, but not of employees' healthy behaviour, physiological well-being or their spiritual well-being. The finding of a mediation effect relative to employee well-being builds directly on the results on Study 1, where the effect of transformational leadership on employees' emotional well-being was also fully mediated by workplace spirituality. This finding is again consistent with the findings of scholars theorizing about such possible relationships (Benefiel, 2005a; Delbecq, 1999; Fry, 2003) or conducting empirical research that explores relationships between these phenomena (Arnold, et al., 2007; McKee, 2005). Again, while several studies have provided evidence of the effects of transformational leader on employee outcomes, such as organizational commitment and productivity, being mediated by workplace spirituality (Fry & Matherly, 2006; Fry & Slocum, 2008; Fry et al., 2005), I am not aware of any other studies showing such a relationship relative to employees' emotional well-being.

Another contribution of Study 2 is that it provides evidence of a causal relationship between transformational leadership, workplace spirituality and one of the four employee well-being measures that were used. This was the third purpose of this study. My analyses show transformational leadership does have a significant positive relationship with employee emotional well-being, but that the effects are realized through the mediating variable of workplace spirituality. This represents a new finding and, as such, provides one possible explanation for the process by which the effects of transformational leadership on employee well-being are realized. It would seem that employees whose leaders make them feel that their work contributions are meaningful and appreciated, that they are an integral part of a cohesive community and that they are

united with other employees by shared values around common goals, subsequently experience improved emotional well-being. If leaders are focused on developing such a work environment, then employees could be expected to feel more positive about their leaders and better supported by them. Perceptions of such support in and of itself has been suggested to positively influence well-being (van Dierendonck, et al., 2004).

Perhaps the positive feelings stemming from being well supported by their leaders help employees to buffer the effects of work related stress, as suggested by Offermann and Hellmann (1996). Their leader's actions could also help employees feel their identities are positive and cohesive, two themes that are frequently discussed in the workplace spirituality literature as being of prime importance to people, especially spiritually oriented individuals (McKee, Helms Mills, & Driscoll, 2008). More study is obviously warranted.

As with the previous study, Study 2 data did not support the hypothesized predictive relationships between transformational leadership and employee health behaviour, and physiological well-being. Since this is the required first condition to be met in mediation analyses (Baron & Kenny, 1986), this also meant that the hypotheses related to mediation of these two outcomes were also not supported. The non-significant finding relative to spiritual well-being was in contrast to Study 1 results. One possible explanation for this result is related to the spiritual well-being measure and previous complaints about ceiling effects (Hill & Pargament, 2003). That is to say, the measure is not sensitive enough to capture increases in this facet of well-being as employees are already reporting high levels of spiritual well-being, i.e. mean of 5.45 at time 1 on a 7 point scale.

As discussed in Study 1, another possible explanation might be that there are actually first and second order effects. That is, perhaps the effects of transformational leadership are experienced first relative to emotional well-being and it is only later, after these benefits have taken hold, that the second order effects, i.e. behavioural and physiological changes, are seen. Again, for example, under conditions of emotional stress, people can be prone to excessive smoking, eating or drinking. Often the very changes we need to improve our emotional state, such as exercise or increased rest, are those upon which we are least able to act (Kelloway & Day, 2005a). Improvements in healthy behaviour and physiological well-being are also likely influenced by other factors. For example in the studies where leader support was associated with smoking cessation (Väänänen, Kouvonen, Kivimäki, Pentti & Vahtera, 2008) and fatigue reduction (Åkerstedt, et al., 2004), there were other forms of support that also played a role, such as co-worker and family support. Perhaps these additional forms of support were missing for this sample of employees. As discussed in Study 1, the age of these employees may be a factor. Research has shown that well-being is at its lowest levels when men and women are in their mid to late 40s (Blanchflower & Oswald, 2007). Considering the sample demographics, the majority of employees participating in the study were in this age group. Gender may also be significant. The sample was primarily comprised of middle-aged women and, as discussed in Study 1, they are likely to be experiencing life stage related ailments, e.g. symptoms of menopause. The fact that many of the respondents were also involved in front line health care likely is a factor as well. Nurses, for example, are described as among the most overworked and stressed of workers (Cummings, et al., 2008). The very nature of their work environment is also

likely to be a primary cause of stress and work-related injuries. Unless significant changes occur in these environments, it may be unrealistic to expect these workers to report high levels of well-being of any kind.

In terms of limitations, this study has many of the same weaknesses inherent in Study 1, but I would suggest it has more strengths. For one, the design of Study 2 as a field experiment gives it greater external validity. The training and pre and post-testing were carried out with employees from a fully functioning organization. Leaders were randomly assigned to treatment and control groups, and neither employees nor leaders were aware of their assignment status. The time lag between survey periods was three months, which was in keeping with the Barling et al. protocol (1996) and found by others to be a sufficient length of time after which to post-test (Block & Manning, 2007; Mullen & Kelloway, 2008; van Dierendonck, et al., 2004). While this was enough time for employees to perceive differences in their leaders' behaviour, it was not so long that significant changes could occur in the organizational environment or in the subjects themselves. The most senior organizational leaders also committed to trying to maintain a stable environment during the research by limiting movement of leaders, restricting other training, etc. This commitment was in exchange for the entire research and training program being donated to the organization by the research team. As such, it was in their best interests to live up to this commitment and thereby minimize potential history and subject maturation effects. Although the assignment was not a true random assignment, the organization's human resources staff had that as their aim and only moved a small number of leaders to meet staffing needs or extraordinary

vacation/leave requests. For example, if leaders had come off a period of night shifts, this situation was considered when slotting them in for training.

Again, data were analyzed using multilevel modeling, an approach that allows for the simultaneous examination of several variables and their respective contributions to the model. This approach should provide greater confidence in the validity of the results. The sample of employees who had rated leaders was also reasonably large and diverse. The fact that this study was also longitudinal is an additional strength as it allows the inferences to be made about causality.

In terms of limitations, the same limitations apply from Study 1 relative to the reliance on self-report data and the appropriateness of surveys to explore such topics as well-being and workplace spirituality. However, unique to this study is the difficulty I had matching responses at time 1 and 2. Even though response rates at time 1 and 2 were good, i.e. 50% and 41% respectively, I was only able to match about half of those responses for an overall response rate of 24%. Leaders participating in the training sessions commented both they and their employees were confused about the need to complete two identical surveys. This was in spite of a concerted communication effort to explain the rationale. Survey fatigue may also have been a factor as employees were asked to complete surveys on two occasions in a relatively short time period. To limit instrumentation effects, the measures used in the pre- and post-tests remained the same; however, testing effects may still have resulted. The nature of the treatment and control groups may have introduced selection effects. As noted, the strategic business units selected for participation in the study were not grouped together randomly, but were grouped together because of physical proximity and logistical ease. Lastly, while I

controlled for transformational leadership scores at time 1, I did not control for outcome variables as well and this would have strengthened the analysis had I done so.

In conclusion, this second study replicates the result of a positive main effect for training, in keeping with several transformational leadership training studies. It also replicates and extends the results of my first study by reconfirming one pattern of association between transformational leadership, workplace spirituality and employee emotional well-being. As a result, the second study provided first time evidence of causal relationships between transformational leadership and workplace spirituality on employee emotional well-being.

Chapter 6 – Interview-Based Exploratory Study

Introduction

Study 3 was initiated almost a year after the completion of the last phase of the transformational leadership training. The study involved conducting in-depth interviews with selected training participants. The leader MLQ results were used to identify trainees who had experienced the most significant change in their direct-report ratings. These candidates were treated as extreme or deviant cases (Kemper, Stringfield, & Teddlie, 2003) and subjected to further qualitative analysis. Due to the sequential nature of the studies and the time required for in-depth analysis of Study 1 and 2 data, the interviews were conducted anywhere from ten months to a year and a half post-training.

The purpose of this third study was to build on the results of the second in order to acquire an in-depth understanding of the experiences of leaders whose leadership scores had improved most dramatically, as measured by mean differences pre- and post-test. Since transformational leadership was shown to be a predictor of employees' emotional well-being, I was interested in talking to these leaders to find out specifically what they had taken away from the training and what they acted upon, so I could understand more about the relationship between transformational leadership, workplace spirituality and employee emotional well-being. I was also interested in hearing about what might have assisted or detracted from their efforts to apply their training, as well as in learning about any perceived benefits or downsides of the experience, either for them personally or for their larger work group. As with many qualitative studies, the aim was not to produce generalizable findings, but rather to understand the individual experiences

of trainees and identify any common patterns or themes in those experiences (Silverman, 2000).

Method

Participants

Twelve individuals were approached to participate in the study. As noted, I used purposive sampling (Kemper, et al., 2003), or purposeful sampling as it is also called (Patton, 2002 as cited in Glesne, 2006, p. 34), to identify my interview candidates. Because two pairs of leaders had matching scores, these participants represented the leaders who were in the top 10, in terms of improvement in their average leadership score. Given their above average improvement in leadership ratings, I regarded these “extreme or deviant cases” as potentially “information-rich cases,” that is, cases from which I could “learn a great deal about issues of central importance to the purpose of the research” (Patton, 2002 as cited in Glesne, 2006, p. 34). The 12 individuals were contacted and invited to discuss their training experience. Through this process, I discovered one leader had left the organization, so I removed this individual from the sample. Three other leaders did not return repeated phone calls or emails over several weeks. From their lack of response, I concluded the individuals did not wish to participate in the study. Of the remaining eight leaders, all agreed to take part, but only seven leaders did participate as work scheduling and summer vacations proved an insurmountable problem with the eighth candidate. Of the seven final participants, five were female and two were male. They ranged in age from 26 to 55 years, with the majority being in the 46-55 age bracket. All worked full-time and their tenure with the organization ranged from 5 to 20+ years, with four having 16-20 years of service. Their

titles ranged from coordinator to manager, with the majority being supervisor. The majority of participants were from long-term care and corporate support services. In terms of their pre-test leadership ratings, these leaders covered a wide spectrum, ranging from 18th to 45th place from top to bottom, in a pool of 65 leaders.

Procedure

Interviews are described as “one of the most important sources of information” (Yin, 1994, p. 82) and “one of the most powerful” among the qualitative methods (McCracken, 1988, p. 9). Glesne (2006, p. 81) describes the particular strength of interviews as being to afford researchers “the opportunity to learn about what you cannot see and to explore alternative explanations of what you do see.” They allow for in-depth inquiry into how various phenomena are defined and experienced by individuals (Silverman, 2005), as well as how they are situated in their broader social and cultural context (McCracken, 1988). From a very practical perspective, interviews are also a very efficient data collection method, requiring less time than observation, participant observation or ethnography and, because of this, there is some concern that they are sometimes overused (Silverman, 2005). However, the primary reason for including this qualitative component of the research program was to gain the in-depth insights into the experiences of leaders and learn about relevant contextual factors that could not be garnered through the data collection method used in Studies 1 and 2. For such an application, open-ended interviews are deemed appropriate (Silverman, 2005).

The seven interviews comprising the study were conducted using McCracken’s (1988) long interview method, and lasted between 30 minutes and one hour and 15 minutes. To facilitate maximum participation, the interviews were held at a time and

location of the participant's choosing. The exchanges were semi-structured in that a series of "grand tour" questions, i.e. opening, non-directive questions, were posed, but new lines of inquiry suggested by the participants were also pursued (McCracken, 1988, p. 35). The use of grand tour questions is said to be effective as they "ask the interviewee for experiential detail that he or she can easily and readily answer" (Glesne, 2006, p. 84).

Each interview was audio recorded with the participants' permission. After interviews, field notes were made as a reliability check, following the recommendations of Spradley (1979 as cited in Kirk & Miller, 1986). These notes were used to refine the interview guide and identify avenues for exploration in subsequent interviews. For, as Glesne (2006) points out, it is important for researchers to be open to emerging questions. Developing insights or explanations were also captured at this time, and notes were made as to whether any significant new insights were surfacing. Since many of the same themes and ideas were being repeated in the interviews, I determined that I reached redundancy in the data collection and deemed it would be appropriate to stop interviewing and move to the analysis phase (Strauss & Corbin, 1998).

Transcripts of the interviews were produced so they could be coded using Strauss and Corbin's (1998) open coding method. An inductive approach was used such that all seven interview transcripts were read to first identify emerging themes, ideas, acts or events. Sentences and short paragraphs were selected as the most appropriate unit of analysis. These units were then examined more closely and compared to identify similarities and differences between the ideas, incidents, acts or events (Strauss & Corbin, 1998). I then created a coding sheet that grouped these themes, ideas, acts or events into related categories, and developed abbreviations for each coding item. These

formed the basis of a preliminary coding sheet. Using this sheet, I then read and coded three interviews. A small number of additional codes became apparent from this review, and I added them to the coding list.

To increase the validity of the analysis, I incorporated peer-review into my process (Glesne, 2006). My doctoral supervisor read and coded clean copies of the same three interview transcripts using the expanded coding sheet. We then compared results to assess inter-rater reliability (Weber, 1990). Agreement was reached on 78% of the coding. Discrepancies in coding were discussed and consensus was reached on the outstanding items. The coding sheet was revised to reflect changes (see Appendix O for final coding sheet) and I then coded all seven interviews a final time. While the preliminary coding was done manually on hard copies of the transcripts, the next phase of coding was done using electronic copies of the transcripts. Code abbreviations were typed into the transcription, and then the units of analysis were grouped under the selected categories. Lastly, a separate version of each transcript was created that stripped out any uncoded information and left only coded participant statements. Per Miles and Huberman (1994), a data matrix was then created incorporating representative excerpts from participant interviews under the designated categories and sub-themes.

Results

As noted earlier, the purpose of the interviews was to understand the individual experiences of trainees and identify any common patterns or themes in those experiences. Analysis of the interview data suggested a number of themes. In recognition of the fact that my participants were the best judges of their experiences and can best articulate what

it meant to them, I support the presentation of themes with extensive quotes from the participants.

Limited Unaided Training Recall – All of the interview participants remembered participating in the training, but they had difficulty recalling many specifics without prompting. When asked what they did recall, two spoke about the logistical aspects of the training, such as the location, room set-up and details about the presenter. For example Melissa² commented, “I enjoyed the training, I enjoyed [John]³ and the way he did the class, but I don't remember the details about what we talked about.” Two recalled that there was discussion of people having different leadership styles, and Henry made a comment about the general approach of transformational leaders being to demonstrate “positive attitude and treat people with respect.” Only one participant referenced the goal setting aspect of the training, even though it represented a full half-day of the program and was the aspect trainees were to focus on once back to work:

Oh yeah, I have memory of that, and I have some memory of some of the approaches of some of the things that we did there, you know, trying to figure out what type of leader you are, and how you lead and how you could maybe set some goals to do things differently. [Kate]

Interestingly, one participant still remembered the difficulty in making the transition from work to training mode, saying:

It was in the Penthouse. I remember being up there, sitting at circular tables with people. Um, I know we were working, we had to leave work and go so it was hard to shift gears, because you had to go from down here doing a thousand things

² To protect the identity of participants, fictitious names have been created.

³ Names have been changed to protect the identity of individuals named by participants.

and you were transported and were supposed to be thinking about all these other things, and forget what you had been dealing with. [June]

Overall, the initial recollections of training specifics tended to be limited, including such comments as “Yes, and it's hard to remember what the training was...” from Patty, or “Not a lot to tell you the truth” from Sonya, and the following:

I don't remember a lot, I can tell ya. I guess, you know, everybody has their own style; I guess I remember talking about that. Do I remember exactly what they were and how they differed? No. I can't remember that. [Bill]

Specific Recall Improves with Prompting – As noted above, only one participant appeared to have top of mind recall of any specific training related content. When recall of specific transformational leadership principles was explored with five of seven participants, not one of them was able to define transformational leadership or recall one of its four dimensions. When they were identified by their labels, e.g. idealized influence, participants were sometimes successful in describing them. This was more often the case when the label was self-explanatory, i.e. intellectual stimulation or individualized consideration. Occasionally it seemed that participants were not actually recalling specifics, but rather trying to infer the meaning from the name. For example, with regards to individualized consideration, where a leader recognizes the existence of employees' individual needs for both achievement and growth, and works with each employee one-on-one to achieve that, June said: “Um, I'm not sure, but everybody is an individual, and you have to treat them like an individual. And everybody's different, very different, so your approach has to be different for everybody.”

With some prompting, such as a brief description of the dimension, participants seemed better able to discuss the dimension and more importantly to describe relevant behaviours. For example, when asked how a leader might demonstrate intellectual stimulation, which speaks to the leader's ability to stimulate employees to innovate and develop new and creative ways to look at challenges and problems, almost all interviewees were able to correctly respond that such a leader would adopt a questioning approach with employees. For example, several participants volunteered they could ask: "What do you think you should do?" and Kate expanded saying: "What do you think about that? How would you handle it? What are your thoughts?" Two other trainees summed up the thrust of this dimension, saying:

Encourage staff to revisit problems. Help with problem solving. So you're not going in and saying, "I'm doing this, it doesn't matter what you think. I'm doing this and everybody has to be on board." If there are more of their ideas, it works better. [Sonya]

Well, the response was to, ah, basically let them solve the problem themselves, like work with them and say, you know, "What are your ideas on it?" "What do you think will work?" And, ah, let them bring it forward, and see if they can problem solve it themselves and come up with the answers and basically all you do is encourage them. [Bill]

Similarly, knowledge of the behaviours of a leader demonstrating individualized consideration was also generally very good. For example, Sonya explained: "Well, I guess everybody's different. Everybody has a different role to play, and a different personality, different needs, different wants. And you have to deal with them one on

one.” Here, one participant recalled the specific details of the training session where we had discussed one thing a highly valued leader had done relative to individualized consideration:

I think the one thing that really stayed with me was the story of the man who came in every morning and spent time talking to the staff and how, when the staff reflected on him, that they felt he was a really good manager and he didn't do anything except have a talk with them in the morning and be personable with them. [Kate]

The situation was somewhat different when it came to discussions of idealized influence and inspirational motivation. Interviewees did not seem able to describe behaviours representative of these principles quite as easily and in many cases not at all. For example, in trying to describe idealized influence, which concerns the behaviour of leaders and the ways in which they role model appropriate behaviour for the rest of the organization, June said: “Oh I remember that term...ohhh...I don't know...idealized influence...I suppose that is all stuff that we learned in the past too. It's the ideal, the ideal, not the reality, it's a goal.” Later in trying to sum up inspirational motivation, which speaks to the ways in which a leader helps employees find meaning in their work by displaying optimism and enthusiasm and involving employees in envisioning positive future states, June clearly struggled again in coming up with a explanation: “Oh, man, inspirational motivation. I am not on it today, it's not a good day.”

Interestingly, the two trainees who had the most comprehensive recall of all the transformational leadership principles were front line employees' supervisors who had risen through the ranks of the organization and who had had no previous leadership

training. One in particular had very good top of mind recall of the essential ideas behind each principle. For example, in describing the role of inspirational motivation and intellectual stimulation he commented:

To try and motivate people. Give them, give them hope, or you know, and the reason for being motivated. Let them do the thinking. Get them more involved in the whole process, and you know, like you say, then it becomes ownership if you let them do part of it. And, just ask for their suggestions, that's the best way to do things. [Henry]

And then idealized influence:

Well I think as the supervisor, as the leader, you should be a role model for them. And with giving them respect, and everything, then it's given back to you, and they just don't think you don't know what the hell you're talking about. You know what you're doing, and you know why. [Henry]

Training Viewed as Focusing on Already Familiar Content but Presentation Style was Effective – Of the seven leaders, only three referenced having had previous formal leadership training. In discussing the training session however, most (5 of 7) expressed that the content was already familiar. This is evidenced by such comments as this one from Patty: “there were a lot of things that I already knew” and from Kate: “It's not anything new.” Or, as June explained:

I had taken other leadership courses, so I felt a lot of this was not new. And it had been a couple of years before, not a long period of time, I'd say two years before that. And, so I really felt it was not new to me. Not that you can't learn new things, but it wasn't new information to me.

Melissa raised that the way content was presented helped give it impact: “I guess I just remember sitting there thinking, ‘God that makes sense.’ And, when someone puts it to you in the way that it was presented, it made sense.” Henry echoed this comment, touching on the facilitator’s effective use of stories:

Yeah, he had a lot of stories. A lot of stories, a lot of interesting things. I thought when he was doing the training he was bringing it back to a lot of his own situations, um, so therefore you were taking the information first hand, and it was like a true experience. And he's giving it to you. And if it worked for him, hopefully it will work for you.

The Difference Between ‘Knowing’ and ‘Doing’ Good Leadership – Several participants highlighted the disconnect between knowing what a good leader should do and actually acting on that knowledge. Melissa commented: “I guess it reinforced things that I already knew, um, but don't practice” and Kate shared this opinion, saying “I think a lot of what he said are things that you just don't think about, but they're not anything new. It's not anything new, it's things that you already know, it's just that you don't apply it.” June touched on the problem of leading by rote: “Even though a lot of it was not new, some of it was presented in a different way. It just makes you stop and think about all the things that you do automatically sometimes.” Or, as Sonya explained:

And when you go around to courses and sessions, you know, a lot of them are things you've touched on before. “Oh, right, I forgot about doing that. I'd forgotten that was brought up somewhere along the line before.” Because I know what I should be doing, and what I should not be doing, and that type of thing.

Two of the leaders stressed that respect for others, one of the core tenets of transformational leadership, was something they already believed in and tried to enact. Henry noted when reflecting on his learning from the training: “I think I have a little bit more knowledge and a little different approach to people. I don't think it's respect because I've always had a lot of respect for everybody.” And, in a more detailed manner, Patty commented:

I know how to manage, I know how to be a good leader, and you know, I know how to be respectful to people. I know all those things, and that's the way I try to work day to day, and that's how I was raised, that's just core beliefs that I have.

[Patty]

Goal Recall Surprisingly Good – When the focus of the conversations turned to the personal goals the trainees had set for themselves, the situation was markedly different. Six of the seven trainees had very good recall of anywhere from one to three goals. This was the case even though it was clear from the exchanges with trainees that they had not reviewed their goal sheets in advance of our meetings. The one trainee who could not recall her goals was the only one to consult her goal sheet during the interview.

The best recall was of goals related to individualized consideration, followed by intellectual stimulation. All seven of the participants reported they had set goals related to individualized consideration and they were most often the first goals to be mentioned. From the discussion of such goals, it was evident that, as instructed, participants had set small, doable and very specific tasks for themselves. Many were focused on increasing their visibility and personal interaction with staff in small ways as demonstrated by Kate comment: “I remember one of my goals was that I was going to make sure I went out

every morning and said hello to people before I started work.” Melissa shared one of her goals was: “I’m going to do a walk-about every day, or three times a week.” Three others elaborated in more detail:

One of the other ones was to, you know, try to talk to one employee at least once a day or, you know, and communicate with them and talk about how they’re doing and if they’re enjoying what they’re doing with their job or whatever. Try to keep them interested and make sure that they’re satisfied with what they’re doing, and if they have any problems or issues, they can bring them forward. [Bill]

As I said, I’m trying to be spending more visual time with the staff. Five minutes. Sometimes five minutes is plenty. They don’t want you in their face all day, either. And you know, I don’t have time to spend all day with them. But, you give them attention, and it helps. You find out what individuals want and you help them achieve. Sometimes, it even gets personal. [Sonya]

Yeah, it was to increase visibility and I was going to do that by visiting the evening shifts at least once a week. Not every day because that would be impossible. The other thing was, I was going to go back to my staff, and ask them exactly what they wanted from me, in regards to visibility and how often they wanted me to come. [Patty]

For three of the leaders, their recall was limited exclusively to individualized consideration goals. June explained that it was the one goal that really mattered to her:

I had planned to sit down a couple of days a week, just take five or ten minutes, go in the staff lounge, and maybe sit down and go through goals with the staff, see

if there's anything new, or just to touch base with them. ... I don't remember if I did five, that's the only one that sticks in my mind. I guess to me that was the really important one, and the one that I really, really wanted to do. I can't remember the others. I don't think I did them.

Two other trainees whose focus was primarily individualized consideration recognized this was an area where they needed to place some emphasis. Kate acknowledged "And I knew that that was lacking in what I did..." and Melissa concurred: "Um, that's probably the biggest thing that I need to get more involved, need to get my face out there."

Intellectual stimulation was the other major area where this group of trainees reported they had made some efforts. Five of seven trainees discussed a goal that had an intellectual stimulation focus so that, rather than simply volunteering the answer to an employee's question, they used other tactics to try and actively engage their employees in finding the solution. For example, participants noted:

Oh, one thing I did do, I try consciously to do, is that if someone comes to me and I try to get them – normally I would just give them the answer – but I will try and walk them through it. [Melissa]

I guess one of my other ones was to, you know, listen and ah, to the employees, and hope that they, you know, bring good ideas forward and that kind of thing. And have them try to solve problems rather than me saying that this is what we gotta do, and that kind of thing. [Bill]

And another trainee identified it as second on her list of priorities:

I think the stimulation, maybe. Like I said, with changes and things, you know, trying to facilitate this change here. So really, you have to work on this one. You know, “What do you think we're going to do about that? How are we going to get people to realize that this is what we need or what we have to do? How do we get through to them?” And you know, some of them shake their head and say, “Well, I don't know.” But then someone else has always got an idea. “Maybe if we did this, or maybe if we did that.” And sometimes it's like, “Oh my God, that's simple,” but yeah, it can work. [Sonya]

Idealized Influence was an area where a few of the participants reporting making efforts. Two trainees said they set goals related to role modeling. For example, one leader in a very demanding role talked about how she seldom took for a real lunch and tended to eat at her desk instead. Recognizing that this was not healthy for her and was setting a bad example for her staff, Patty set a goal to not eat her lunch at her desk so as to take a real break from work and have some down time: “And the other thing I decided to do was to take time for me once a day.” The second leader also set a goal that was focused on changing personal behaviour. In this case her supervisor had pointed out a need to model appropriate leadership behaviour. This goal was related to addressing conflict early and not practicing avoidance:

One of my big things here, and this is still something that I have trouble with, I don't like conflict and crisis. If I can avoid, I will. There's things you can't avoid... Right, but I know I have to do it. And it's a part of my job, and it needs to be done to fix what's going on. [Sonya]

The area of inspirational motivation was the one that drew the least amount of attention from these trainees. Only Henry discussed a goal related to this area:

There's a lot of negativity in the [department name] at times in certain individuals, and what I try is try to work with them and let them know that not everything is negative, that things are positive. And, when they do something that's positive, let them know it's positive. And I point it out to them – “See what I mean, not everything's all negative. There are positive things that can come.”

TFL Training Application Often Deliberate, Strategic – From the conversations with participants, it was clear that leaders were often very deliberate in their application of their training. In some cases this seemed to be because the leaders were trying to change their behaviours and this required a concentrated effort to make sure it happened. Here's how one leader, who arrived at work much earlier than her staff and who had a tendency to enclose herself in her office and work the whole day, described her attempt to change that pattern:

I made myself go out there every morning and spend some time talking to people and saying, “How are ya?” or you know, “How are your kids? Are you going on vacation?” Just making conversation and things like that. [Kate]

Similarly, Bill focused on establishing personal rapport with employees before launching immediately into a work related request:

I think listening to them, and communicating with them a little more, talking about things that were also not involved with work. “How ya doing?” or, “What did you do last night?” That kind of thing, or what went on over the weekend. I find that they tend to open up a little more when you do that kind of thing than if

you just approach them with, “Well, we got to deal with this and we have to come up with an idea.”

Another leader, Sonya, also had to break established patterns, but these appeared to be more cognitive ones. She described using self talk, such as telling herself “You know, well, I'm gonna try and remain positive about that” or “I'm not gonna judge until I know.” This was in an effort to herself to remain more positive in her outlook about work and her work environment.

In another case, one of the participants wanted to increase her visibility and she was very up front with her employees about that and strategic in terms of how she handled visibility with her day and night time staff. The deliberateness of her actions is evident in her discussion of goal implementation:

Yeah, it was to increase visibility and I was going to do that by visiting the evening shifts at least once a week. Not every day because that would be impossible. The other thing was, I was going to go back to my staff and ask them exactly what they wanted from me in regards to visibility and how often they wanted me to come. And that was primarily the day shift. [Patty]

Two other leaders appeared very strategic in their attempts to apply aspects of their training relative to specific individuals. For example, two trainees discussed the fact that they had employees with very negative mindsets and these individuals often had a detrimental impact on the mood of the rest of the work group. Henry commented his focus was: “behavioural problems with individuals, and that's where I spent a lot of time.” Sonya described in detail her efforts to work with a “negative” employee and give her personalized attention:

I make a point of going to her. I always do every day, and saying, "Oh, hi..." She works 12-hour shifts, so she's off a couple days. "Well, what did you do on your days off? Did you have your little grandson?" Because he is the light of her life. So I try to feel my way in, but I want to make it time for her and I, so she knows that I care and that I'm interested. I try to, I really do, try to push that with her. Even more so than with the others, I do try to talk a little with everybody, but my main focus is her, to set the tone for everybody else for the day. Because I find if I don't, she can be very, well not malicious, that's not the right word, but negative. To the rest of the staff as well, and it can be very trying for everybody. You know, "I don't want to be here if she's here." So, for me, it's giving that little bit of extra attention. It's one of those things that she needs, that everybody needs, I guess. [Sonya]

Some of the participants also had direct supervisors who had been through the training. They commented that they were often aware that their leaders were actively implementing their training. June noted: "I think in the back of my head I thought, 'Oh, you went to leadership training'" and Melissa commented: "I could see evidence of my supervisor – certainly with the walk-about. So he does make a deliberate attempt, by saying 'Good morning.'" Two other leaders spoke in more detailed terms about the deliberate efforts made by their supervisors to change their own behaviour:

Yeah. I've seen [Janice] do it. I've recognized sometimes when she's doing some things that we've learned in training. She now always stops by in the morning to say hello. She used to sporadically, but now she always does. [Kate]

Peer/Leader Support and Organizational Changes Promoted Success – From discussions with trainees it was clear there were also factors that helped leaders succeed with their adoption of the transformational leadership style. Several noted the benefit of peers also having taken the training as helpful as it created a common reference point and a consistent approach with employees. Sonya phrased it this way: “So, he's using it, [she's] using it. We're all trying to use the same concept, and we all try to talk about it sometimes” and, as a result “everybody's on the same sort of page now.” Patty explained it this way:

So I think that that helped that everybody had to do leadership training, or the transformational leadership training at the same time, it put everybody in the same mind set. And it made everybody a little bit more forgiving of people's mistakes I think, which was very good because it was a little bit of a punitive place to work, for a while.

Similarly, Sonya commented that when her group was having difficulty with issues it was helpful to be able to draw on their common training, saying “...especially when we have staff meetings, of course, we all get going and you try to bring it in focus: ‘Okay, did we go for nothing, or are we really going to practice some of this stuff?’”

Other trainees commented on the changes their own leaders had made and how that had then facilitated their own changes. For example, Bill noted “I think he's given us a lot more responsibility in the way that, you know, you solve the problem and come up with an idea and solve it. More than I think before.” Patty elaborated in considerably more detail:

I should say too that my [leader] has very much improved in the last two years in regards to transformational leadership. I'd say she's done probably the best out of the whole facility. She's done a very good job because we were pretty honest too when we, you know, did her survey. So, she's done well, so that's also helped us... I think because [Tina] changed so much... we had the ability to change because she let us be, she let us do our job.

Henry, a front line supervisor, perceived the leadership style change, and the focus on goals, as being organization wide, as reflected in the following comment:

Where I found before, and this is right from the top down, "I'm the president, and this is what you're gonna do." "I'm the vice-president, and this is what you're gonna do." And everybody had different visions as you went from the director to the manager and then down to the supervisors, and I think now it's looked at as everybody's equal. And I think that's a good thing because just because you're the president, you're no different than I am, and I'm no different than the guy washing floors. And that's what I think. Everybody should be treated the same, but everybody's different, and everybody has a different job to do and nobody could do the job without the rest of the people. And I think that's a lot of the change over the last year. Everybody's talking about principles, goals, values. So everybody's got goals to do, everybody's got principles, you know, values, which is good.

Several other leaders commented on organizational changes that were made before and after the training implementation phase and on how these changes had improved their situations. In particular, two leaders saw their span of control decrease

and they felt that this was important to their success. One noted, “I feel like I've made a difference with [department] staff, but again, I'm saying that's part of getting to deal with them more. You know, more individual time, and more time to spend with them.”

Another trainee was even stronger in her belief that the structural changes made her success possible:

But again, my portfolio changed so dramatically that I have time to invest in people over here, whereas I didn't at the time of the initial transformational leadership...if I had wanted to do everything I had set out to do, two years ago, and had maintained the same portfolio, I don't think the gains would have been as significant. [Patty]

Personal and Organizational Factors Inhibited Sustained Efforts – While it was clear this group of leaders had some success implementing their goals, trainees also spoke about many factors that inhibited their ability to sustain their transformational leadership efforts. These could be categorized into personal and organizational inhibitors. For example, several participants commented that their own attitudes and personalities were sometimes problematic. For some, it was occasionally a matter of just remembering the new focus, for as Sonya noted: “And it's so easy to forget. You really have to remind yourself. Just back up, and try to do it the right way.” For Kate it was a matter of convincing herself that successful implementation of her goals, especially her goals related to increasing her personal interactions with staff, were important:

I won't say that I don't want to do that, it's not that I don't want to do that, but it felt like a waste of time at first. It felt like, “Oh, I have so much to do today and I don't have time to do it, so I have to get back.” Like, this is wasting my time.

Personal work style was also sometimes problematic for leaders, especially those trying to focus on intellectual stimulation where the leader is required to help employees through the problem solving process:

I work hard...like I'm a person that needs to be busy, so I work all the time. And I'm more of a 'tend to do things myself' – rather than take the time to explain or describe what I want to other people. [Kate]

Those trying to model good leader behaviour also found that challenging at times:

I still find it very difficult at times to step away from things, certain functions. And staff are asking me, and I'm about to give my opinion, and I have to say, "No, you have to go find your supervisor. If you can't find her, come back and find me." I still find that difficult, because I want to do that right away. I have to help you right away. [Sonya]

In terms of organizational challenges, one of the most cited was work overload. Six leaders touched on workload as making it difficult to focus on their leadership goals. For example, in reflecting on the few times she was able to devote some one on one time with staff, June commented:

And, I really thought it was great, and I really wish it was something I could do, but the reality of it is that you can't. And even once a week, or once every second week would be good, but I mean, it seems like every day something happens and you lose that little window.

Staffing shortages was another big drawback. As June commented, "If one person is gone, all you can do is give out pills and do the necessary things, and hope that nothing else happens. You don't see the staff the same." Or, as Patty relayed it, "Again,

it was a little difficult because you want to be a good leader, and it's hard to be a good leader when you only have 50% of your complement; you're struggling.”

Two participants touched on the problem of competing priorities relative to sustaining their leadership effort. Melissa noted that, while it was a prime focus for a time within the organization, she felt it was pushed aside in favour of other initiatives: “I just think that we, that you, get going on something and then three other things happen and the ball gets going. And, it's not the hot issue of the day anymore.” June leader raised the challenge of having too many conflicting priorities and not having time for them all, saying:

And, again, if I had more time I could do more, but I feel sometimes that my hands are tied, and I really can't do, I can't be a leader. I mean, I'm always a leader, I guess, in my role, but some days I feel like I could do so much more if I wasn't torn in so many directions.

Patty, the one leader who had set a personal goal related to making time for a real lunch break, found that she could not sustain this seemingly modest goal because of her heavy workload and lack of control over her job, and her disappointment was obvious:

I failed horribly at that, even though I meant to. And I felt very strongly about that, when I did look at my goal planning and that sort of thing, just so I wouldn't be so frantic and that sort of thing when I was talking to people. And that I wasn't going to be so busy, and that I would be able to let myself down to give people more, and it didn't happen.

Benefits of Training Application Both Direct and Indirect – In discussing the benefits of the transformational leadership training program, it was clear that all

participants felt there were many and that they were substantive. In analyzing the comments from participants, the direct benefits related to both trainees and their employees were obvious. For example, several leaders commented that communication had improved with their staff and they felt a greater sense of connectedness. For example, Bill said, "I think there is better communication between the guys and me. I think listening and the communication is better..." Kate expanded on this theme, saying,

You know, I did become more connected, I think. I feel like I did. I don't know what they would say about that, but yeah, I did feel like I became more connected. Just by making the effort of going saying, "How are you doing today?"

Melissa talked about the training providing an opportunity to connect with leaders from other parts of the organization and this contributing to "better relationships" in the organization overall. June elaborated saying:

"It sort of helps you understand their point of view. We're dealing with dietary and housekeeping, and everybody, so sometimes it does give you a bit more insight into what their jobs are like and what they're going through. So I think it's certainly worthwhile."

This improved connection and communication also seemed to translate into better work situations for some participants. As Patty noted: "What seemed to have an impact was probably people being more open, and listening more, and being a little bit more realistic about things that can be achieved." In fact, this leader found that her employees' expectations for contact with her weren't nearly as high as she'd expected, nor as high as her leader's expectations. As she explained,

Our [boss] had given all of us ... what we had to do to be more visible, and so we busted our rear ends to do it. So, when I actually went to my staff and asked what they wanted, it was totally at the other end of the spectrum from what the expectation was for us to do. [Patty]

Participants touched on several benefits that were specific to their employees. Leaders who worked to increase their visibility and one-on-one time with staff sensed that their efforts were appreciated and this fueled their desire to keep working at it. June noted, "So I'd say, you know, they were happy and that's why I'd really like to do it more often. The staff did appreciate it." Patty echoed that comment saying, "You know they were happy that I made the effort to go see them specifically one on one and ask what they needed from me." This personalized attention and the active efforts to involve employees more in problem solving also seemed to heighten employees' desire to get involved. Sonya explained it this way: "You could find the interest from people as soon as you would say, "Well, what do you think, guys? What do you think we should do about this?" Leaders who had made such efforts on the intellectual stimulation front also spoke of their employees as becoming "a bit more empowered," as being "more motivated," and as being "happy" at the chance to play a more active role. Sonya seemed to feel there was a positive impact on the quality of the work done by people: "You know, and when you're brainstorming things, there's always somebody that's got new ideas. And you just learn so much from it. All the little things to make yourself better, and your work place better." One leader commented that involving his staff in problem solving and decision making about work process changes made subsequent changes easier for both him and his staff. As Bill explained,

... It's funny because it's a circle sometimes. Kinda, when they first started with someone, like if you wanted to change something they were very much against change, but then when they were more involved, you know, they did it. And the next time you went to change something, they were like, "Well, we could do it just like we did before, this could work in this spot, or this area." And you're like, geesh, that kind of thing.

Other leaders described how their efforts to work with "difficult" employees had a ripple effect, benefiting a larger group of employees. The extra attention devoted to these "negative" employees seemed to improve their mood, and there was an indirect benefit for their coworkers and, in one case, the leader acknowledged a personal benefit. In discussing the impact of strategically targeting her "negative" employee, Sonya noted:

But I do find a difference in her, I definitely do. And I think the change of my approach towards her and how I deal with her has made a difference. Or at least I think it has. It's made a difference for me. In my feeling toward that I'm accomplishing something. That, I must have done something.

Henry, who had also worked at trying to improve the outlook of one of his more negative staff, found his efforts engendered improvements both in the employee and his larger work group. He described the situation this way:

I have one person who's really changed a lot. Yup. I was surprised when there was, when other people actually, other staff members, made comments about how this person changed... I would probably say about six staff came to me and said how this person changed. And I think it's good for that person.

Discussion

As the researcher with a vested interest in the success of the training, I was initially surprised and dismayed at the limited recall of my interview participants. However, upon reflection I came to feel that I was rather naïve in my expectations of any significant recollections after a year or more had passed. I had been continuing to live with my training study, but my participants had had to return to their already busy work schedules and much had transpired in the intervening months. It was clear from our exchanges that all had put some effort into implementing their leadership development goals, and that they had experienced success and failure because of both personal and organizational factors.

From the interviews it was obvious that participants felt that good leadership really is not that complicated. During the opening exercise of the training session, the facilitator asked each group to reflect on their life experience and to think of a teacher, coach, parent, friend or boss who they thought were effective leaders, and then asked participants to identify the behaviours that made them good leaders. Participants were readily able to volunteer dozens of things that such individuals did to make themselves stand out as good leaders. When asked, these same trainees were equally able to think of examples of poor leaders they had encountered and to describe the behaviours that made them less desirable as leaders. The point the workshop facilitator was making is that we have all experienced good and bad leadership in our lives, and we can differentiate between the two quite easily. Similarly, Alvesson and Sveningsson (2003b) have argued that leadership is perhaps not the complex and complicated practice we sometimes make it out to be, and the comments from participants support this thesis.

As noted, five out of seven leaders said they had not really learned anything new during the training or that the content was very familiar. Two commented that good leadership begins with fundamental respect for people, which was a value they felt that they already possessed. Perhaps it was this sense that they had “heard it all before” or that they already had the fundamental values associated with good leadership that contributed to the leaders’ inability to recall much of the specifics of the training. No doubt, the time interval and the lack of any formalized training reinforcement program also played a role here. Miller, Umble, Frederick, and Dinkin (2007) found such support programs, including coaching, mentoring and team-based work assignments post-training, were important for solidifying learning and creating important social networks to support developing leaders. While some of these networks did seem to develop informally, there was no concerted effort to make this happen.

From the interview data, it is evident that the transformational leadership dimensions that participants were best able to recall were individualized consideration and intellectual stimulation. (The first relates to the leader’s ability to recognize the existence of employees’ individual needs for both achievement and growth and then work with each employee one-on-one to achieve that. The latter speaks to the leader’s ability to stimulate employees to innovate and develop new and creative ways to look at challenges and problems.) The one individual who was able to recall substantive amounts of content relative to all four dimensions had never been exposed to such training before and it seemed to “stick” with him. The leaders who had had other leadership training did not seem to be able to differentiate this training from their other sessions. It was also clear when we discussed transformational leadership that the formal

labels (e.g. idealized influence or intellectual stimulation) were not useful as recall agents. Perhaps the terms are too theoretical or esoteric in nature and not accessible enough to leaders.

Given the very limited recall of the overall training session and its content, I was surprised by the ease with which many trainees could recall one or more of their goals. Upon reflection, however, I realized this was the one component of the training that had required very personal engagement. Since the majority of these trainees said they had also acted actively worked on applying their goals, this training program content had been reinforced with practice and thus more likely to be easily accessible. This finding seems to provide support for the need for ongoing reinforcement of the content to help trainees apply their goals in their daily activities and to make those lasting linkages with the program content (Block & Manning, 2007; Miller, et al., 2007).

The fact that the majority of goals recalled by trainees were related to individualized consideration and intellectual stimulation is also interesting. The course facilitator did stress these two dimensions in the training, particularly the individualized consideration dimension, and it would appear trainees replicated this emphasis in their goals. Several of the individualized consideration goals were related to increasing leaders' casual interactions with staff and getting to know them as people with interests outside of work. Several participants talked about being confined to their desk all day trying to keep pace with the paperwork, and losing touch with their employees and the work they were doing, and wanting to rectify this. Others noted that this type of employee interaction was not something they had previously viewed as a priority, but agreed it had been beneficial in terms of breaking down barriers and improving personal

relationships. The fact that many of the goals were so basic in nature, saying hello or engaging in casual conversation with staff, was very much in keeping with the directives given by the workshop facilitator. In the literature, there is discussion that such behaviours can serve to enhance the leader's approachability and that this in turn can create perceptions in employees' minds that the leader is more supportive (Offermann & Hellmann, 1996).

It is interesting that few of the participants spoke about goals related to idealized influence and inspirational motivation. Again, idealized influence refers to the leader's ability to be an effective role model, speaking openly about important organizational values and acting consistently in accordance with those values in the hopes of fostering similar behaviour in employees. Inspirational motivation focuses on the leader's ability to inspire employees by speaking positively about the future, by underlining the importance of everyone's role in helping the organization reach its goals and by helping employees understand the contribution they must make. Only two participants mentioned idealized influence goals and only one specifically referenced an inspirational motivation goal. While it is true the other areas were emphasized more by the facilitator, leaders were encouraged to set three to five goals in total and to try to set at least one goal in all four areas. It is not clear whether leaders did not set goals in these areas, or simply could not recall them.

In some respects, the idealized influence goals seem to be among the more personal leader goals in the sense that, in executing them in the workplace, they require the leader to reveal more of themselves to their employees, for example in terms of their personal values, beliefs, decision-making approaches, etc. Perhaps these leaders did not

feel they could set or implement goals along these lines. As a supporting facilitator during the training sessions, I found it was hardest to give participants advice on how to develop idealized influence goals, and how to express them in very concrete, actionable terms.

As to inspirational motivation, perhaps the leaders did not feel they could credibly set or implement goals related to this dimension. From the interviews, it was clear that several of the participants were working under very difficult circumstances, such as working shorthanded on a regular basis and being responsible for too many staff in too many locations. Perhaps these leaders were themselves having difficulty making sense of such work situations and remaining positive in the face of such challenges. Perhaps they did not feel they could not make efforts to inspire and motivate their staff under such circumstance and still maintain their personal integrity. I did not specifically pursue this line of questioning, and the participants did not volunteer any comments relative to this issue.

While all seven participants had broader ambitions, the goals they were most successful in implementing were somewhat more modest. They focused to a large degree on establishing better connections with people, and giving them opportunities, albeit small ones, to be actively involved in problem solving to help offer better care or service. Considering the conceptualization of workplace spirituality in this study, these leaders could be said to be fostering connectedness and community, and perhaps even the meaningfulness of work. Linking these findings to those of Studies 1 and 2 makes for an interesting proposition. The leaders I interviewed were among those who had experienced the most significant increases in their leadership ratings, and both Studies 1

and 2 demonstrated that increased transformational leadership behaviour did enhance employees' emotional well-being. The increased ratings and behaviour changes together suggest that perhaps leaders should first focus on ensuring they master these two dimensions of transformational leadership before attempting others. That is, perhaps leaders should focus first on behaviours to do with individualized consideration and intellectual stimulation. The literature does offer some support for such an argument.

From their qualitative studies with managers, Alvesson and Sveningsson (2003b) have learned that some of the more apparently "trivial acts" performed by managers, such as chatting informally with employees and listening attentively to them, are actually perceived by employees as being significant. Employees of such managers are said to feel more visible, less anonymous, more respected and part of the team (Alvesson & Sveningsson, 2003b). It is not much of a stretch to suppose that employees who feel more visible, more respected and part of the group (here I could substitute "community") would experience improvements in their sense of emotional well-being.

I believe the study data support the statement that all participants found acting on their leadership goals difficult. As was actually mentioned explicitly by two participants, they already knew what "good leadership" was all about, but six of seven participants mentioned their job or their own personalities sometimes impeded their success.

Gilbreath and Benson (2004), and Kelloway and Day (2005a) highlight many of the job characteristics that can negatively impact the health of a workplace, and participants identified several of the same issues in our interviews. For example, they cite workload and work pace, work scheduling, and job control as issues. Others mentioned other initiatives that displaced the focus on transformational leadership and made sustaining a

focus on improving their leadership difficult. Block and Manning (2007) touch on this same issue and highlight the importance of having senior leaders adopt a long-term view on leadership development. While the problems of increasing job demands are not likely to disappear, and in fact have been documented to be on the rise due to the increasing complexity of work environments (Tsui & Wu, 2005), the results of this study suggest that leaders can still combat the negative effects of these issues with small, genuine leadership acts, by recognizing someone's good work, taking the time to truly get to know employees or by genuinely listening to them. Such actions can also easily be supplemented by looking for ways to draw on employees' talents and knowledge to help them make meaningful contributions in their work settings. The data would suggest the benefits of such efforts are numerous.

In talking about what they perceived to be positive outcomes of the study, several leaders referenced improved communication and collaboration. Others mentioned that simply getting to meet and interact with leaders from other parts of the organization helped break down barriers, and a few participants mentioned having a common leadership approach as being helpful. These points are all in keeping with the findings of other health care leadership studies (see e.g. Block & Manning, 2007; Miller et al., 2007). Miller et al. found specific evidence that support programs, consisting of coaching and mentoring, and team-based work assignments post-training were particularly helpful in solidifying leader learning and in developing important social support networks. No ongoing support or post-training assignments were included as part of this program, but most participants did acknowledge some ongoing support would be beneficial.

One additional and very important benefit of the training was the positive effects that seemed to accrue to entire work groups as a result of leaders focusing on difficult or negative employees. As mentioned in the results, at least two leaders strategically and deliberately made such efforts, and improvements were noticed by other employees in the work unit. One leader even noted that the improved relations with her “problem employee” had produced positive benefits as well for herself. She felt better about the way she was dealing with this individual, and the improvement influenced her future interactions with the employee. This latter finding is consistent with previous research suggesting that subordinate well-being and leader behaviour are linked in a feedback loop (van Dierendonck, et al., 2004). In this case, the trainee’s actions improved the situation, and there were spillover benefits to other employees. Van Dierendonck et al. (2004) report that in some situations the reverse is true. They describe a *loss spiral*, a term coined by Hobfoll (1988), whereby relations between a leader and an employee continue to deteriorate because increases in employee’s negative feelings subsequently feed decreases in leader’s supportive behaviours; this interaction further feeds the employee’s negativity and so on. The researchers stress that leaders need to be made aware of how their behaviour potentially affects their relations with employees, and they need to be trained in how to break such downward spirals. This study suggests that transformational leadership behaviours, particularly individualized consideration, may be one viable option for leaders dealing with negative employees.

I will end this section by closing on one important finding relative to the feedback aspect of the training program. In one of the interviews, a participant shared at length how traumatic an experience it was for her to receive feedback as part of the study. In

her case, she found it difficult because her ratings were unfavourable, and she felt that this was due in large measure to the structural constraints she was working under, i.e. having too many staff who were working around the clock and in multiple locations, and to recent performance issues that had been resolved with a firing, in one case, and formal discipline action in another. The training facilitator had coached those of us providing trainee feedback to ask pointed questions about the work environment, and, in particular, about possible labour relation issues, before sharing the employee feedback so as to be able to put leadership ratings into their proper context. Having prepared the feedback report, I had spoken in advance with the person handling this trainee meeting to emphasize the importance of asking those preliminary questions in this case. However, even after the feedback was carefully positioned in the context of the work climate, the trainee did not take the feedback well. She explains it best in her words:

And you know, I remember after I got the feedback, I remember going, I was watching my [child] play hockey and I was crying in the stands watching because I was so upset. And it still upsets me now, because it was so out of my control. Because I knew I couldn't fix it because it was too big.

The emotion this individual felt is evident in the comments and it was even more so in the personal exchange we had. This experience obviously had a profoundly negative impact on her for it to be so “fresh a wound” almost 18 months after the fact. Having conducted more than 50 of the leader debriefings, I know that other leaders were also very stressed about receiving feedback, as was evidenced by comments they made during our exchanges. At the conclusion of our meetings, many voiced such things as “well that wasn’t so bad” or “that was easier than I expected.” In contrast, other leaders

were disappointed that they did not receive a summary rating from employees and voiced that concern as well. These leaders either did not have any direct reports or did not have a sufficient number of employees completing an evaluation to receive this feedback.⁴ Several of these individuals commented that the feedback aspect was the one component of the program they felt would have been of most value, as there was little opportunity to get such feedback in their work environment. This underlines the importance of finding ways to give leaders feedback on their performance, and incorporating a feedback component into a training intervention is one logical way of doing so (Offermann & Hellmann, 1996; van Dierendonck, et al., 2004). Other research also suggests that feedback works well in combination with other learning methods to solidify trainee learning (Miller et al., 2007). That said however, the experience recounted by my participant highlights that formal feedback components need to be handled with extreme care. I was personally dismayed that a training initiative that was intended to increase employee well-being should have so negatively affected the well-being of one of my participants. However, Sparr and Sonnentag (2008), who have studied the supervisor-employee feedback relationship, have found that if employees do not work in an environment where they receive frequent and high quality feedback from an appropriate source that they trust, then receiving feedback can be a very negative experience. Not surprisingly, perceived lack of control over such information, as was the case with my participant, only worsens the situation and can result in increased work-related anxiety, depression and turnover intentions (Sparr & Sonnentag, 2008).

⁴ For a leader to receive a mean employee rating, he or she had to have had three or more employees providing a leadership rating. This minimum was set to protect the anonymity of respondents.

Lastly, I would like to emphasize the benefits of a mixed method approach relative to this research program. As I have mentioned previously, established leadership scholars have been encouraging the use of mixed methods for some time (Alvesson & Sveningsson, 2003a; Bass, et al., 1999; Berry & Cartwright, 2000; Conger, 1998), particularly for leadership training assessment (Antonakis, et al., 2003); however, few scholars have actually done so. Rereading and analyzing the transcripts from these interviews brought these very personal exchanges back to life, and I was immediately struck by the value of interviews as a data collection method. As noted in the introduction of Study 3, interviews are a powerful method for use by the qualitative researcher (McCracken, 1988). In this study, they afforded me valuable insights into the training experiences of Northwood leaders, as well as of the very important social and cultural factors that affected them as they acted on what they had learned. These were important insights that I did not derive from actively participating in the collection and analysis of data from the preceding two studies.

Potential Limitations

This study was based on interviews with seven participants from a pool of 65 trainees. While my initial goal was to interview the 12 leaders whose leadership scores put them in the top 10 for average score increase, this proved to be more difficult than I expected. Had the timing of the interviews been closer to the end of the surveying, I might have received greater participation. But I also feel that the time delay helped inform the results by serving as a test of just what leaders were able to recall from the training after an extended period. The fact that so many of the interviews surfaced the

same issues and themes increases the validity of the findings, as does the high level of inter-rater reliability achieved during the coding process.

I do however acknowledge that, like all methods, interviews have some inherent limitations. Interview participants are human and as such are prone to incomplete recall, and problems of articulation (Yin, 1994). Offsetting this is the fact that they are the “experts” on their experience. They know what they learned and what they did as a result. The fact that I conducted all the interviews myself also ensured some consistency in the approach and the questioning. As well, having participated in all aspects of the training and having ongoing contact with organizational members, I was able to establish my trustworthiness as a researcher, which also helps to increase participants’ willingness to “speak fully and frankly” (Glesne, 2006, p. 102). My prolonged engagement with the organization and role as a participant observer in the actual training also afforded me additional knowledge that I was able to draw on during the analysis and write-up stage. At times, I sought to validate participant comments with my organizational sources, similar to the use of “local facilitators” in ethnographic research (Glesne, 2006, p. 74). Through careful questioning, so as not to reveal the identity of any of my participants, I was able to secure details about groups affected by organizational realignments, other training initiatives and the like. I was able to confirm that such changes were not widespread and/or actually occurred after the post-test data collection, and so they did not likely affect the integrity of the research program in significant ways. These are important verification methods to address validity issues (Glesne, 2006).

I feel it important to add that these interviews were all completed with leaders and as such we are not hearing from one very important audience, namely the employees

themselves. It would have been revealing to juxtapose leader interview comments with those of employees, but this aspect was not included as part of this study.

In summary, the findings from this study suggest that the leaders I interviewed did make concerted efforts to implement at least one or two of their leadership development goals post-training. These leaders placed the greatest emphasis on goals related to individualized consideration, followed by efforts to improve their use of intellectual stimulation, but placed little to no emphasis on idealized influence or inspirational motivation. All of the leaders found implementing their goals to be challenging, to a large extent because of already heavy workloads and other organizational priorities, but also in a few cases because of their own personalities and views. The fact that leaders received the same training organization wide was seen as being helpful because it ensured more of a consistent approach and helped to improve communications within and between groups, but post-training support was seen as lacking. In most cases, leaders were able to identify tangible benefits arising from their efforts to act on leadership goals, the benefits that accrued to their staff and to themselves.

Chapter 7 – General Discussion

When initiating any new research endeavour, scholars are expected to be able to provide a strong rationale for their inquiry. In doing so, they are required to be able to answer questions relating to the need for their study, its possible contributions to academe and the practical relevance of their findings. They must also meet the highest possible standards of research design and analysis. I believe my research program responds to each of these requirements.

As outlined in the introduction, the research program presented in this document was developed in response to repeated calls from scholars in the domains of leadership, workplace spirituality and employee well-being to explore the processes by which leadership affects employees in their work environments.

In conducting research that explores the relationship between transformational leadership, workplace spirituality and employee well-being, I had hoped to extend our current understanding of all three phenomena. To do so, I tested a hypothesis that the effect of transformational leadership on employees' well-being is mediated by workplace spirituality, I assessed the longitudinal effect of a transformational leadership training intervention on employees' perceptions of their well-being, and I explored in more depth the experiences of leaders who were trained and succeeded in applying the principles of transformational leadership on the job. As was demonstrated in the literature review, few studies have been published that empirically demonstrate a relationship between transformational leadership, workplace spirituality and employee well-being, but there is considerable theoretical support to suggest that such a relationship exists. My first two studies now provide additional empirical support of this relationship.

Study 1 replicated and extended the findings of scholars who have linked transformational leadership with workplace spirituality and positive employee outcomes such as job satisfaction (McKee, 2005) and organizational commitment and productivity (Fry & Matherly, 2006; Fry & Slocum, 2008; Fry, et al., 2005; Milliman, Ferguson, Trickett, & Condemni, 1999; Milliman, et al., 2003). Its cross-sectional data provided more direct support for the finding of Arnold et al. (2007) that the effects of transformational leadership on employees' psychological well-being are mediated by perceptions of the meaningfulness of work. The study also extended these findings by introducing multiple measures of well-being, finding evidence of transformational leadership having an indirect positive effect on employees' spiritual well-being. The two hypotheses related to positive associations between transformational leadership and more behaviourally- and physically-oriented outcomes, namely healthy behaviours and physiological well-being, were not supported by the data.

The findings of Study 2 built directly on those of Study 1. Designed as a field experiment, this longitudinal study assessed a training intervention to enhance transformational leadership. My analysis revealed that there was a positive main effect for training, with employees of trained leaders reporting higher levels of transformational leadership behaviours than the employees of leaders who were not trained. This effect held even after controlling for time 1 leadership scores. Further analyses also demonstrated partial support for the remaining study hypotheses. Similar to Study 1, Study 2 showed transformational leadership was a positive predictor of employees' emotional well-being, but not of healthy behaviour or physiological health. New to this study, however, was a non-significant finding for the effect of transformational

leadership on spiritual well-being. As with Study 1, I also found support for the hypothesized mediation model, but only relative to one of the outcomes. The effect of transformational leadership on employees' emotional well-being was fully mediated by workplace spirituality. The data did not produce significant findings relative to the healthy behaviour, physiological well-being or spiritual well-being outcomes.

In Study 3, I used interviews and drew on my personal observations from four years of experience as an external researcher with the organization to explore in a much deeper and more personal way the experiences leaders had with the training and with implementation of their leadership development goals. The interview data revealed that this particular group of leaders, who had experienced the greatest improvement in their transformational leadership scores, had focused primarily on goals related to individualized consideration, with efforts to improve their use of intellectual stimulation being a secondary priority. All participants recounted challenges in implementing their goals and these ranged from their already existing heavy workloads to competing organizational initiatives. The leaders identified a number of benefits arising from the training initiative, including greater consistency in leadership approach, improvements in communications, and, in a few cases, overall improvements in work unit relations.

In summary, each of these studies provided insights into the process through which transformational leadership, workplace spirituality and employee well-being are related. The first two studies build directly on each other to demonstrate that workplace spirituality mediates the effects of transformational leadership on employees' perceptions of their well-being, specifically relative to emotional well-being. Leaders interested in enhancing this aspect of employee well-being should consider efforts to foster a sense of

community within their organizations, look to underline the meaningful contribution employees are making in their daily work and highlight the linkages between the organization's values and those of their employees. Study 3 suggested that two effective and relatively easy ways for leaders to influence their employees' emotional well-being are to demonstrate individualized consideration for employees and to use intellectual stimulation to actively involve employees in work, to create a greater sense of ownership and sense of contribution, and to create meaning in their work.

Implications for Research

Methodologically, my research makes several contributions as well. Few leadership studies examine the leader development experience from the perspective of both leaders and their direct-reports (Alvesson & Sveningsson, 2003a, 2003b). I have done so and the studies inform each other quite effectively. Along this same vein, leadership scholars have also encouraged the use of data collection methods over and above surveying (Conger, 1998). My research demonstrates the strengths of using multiple data collection methods. For example, using the interviews to explore what "successful" trainees did to increase their leadership scores generated some interesting insights relative to the kinds of goals upon which leaders worked and the benefits that accrued as a result. The interviews also highlighted some real and important issues relative to training application and feedback, including the challenges of heavy workloads, competing priorities and the importance of understanding the feedback environment. These would not have surfaced had I limited my data collection strictly to surveys.

As noted in Chapter 2, organizational scholars are being encouraged to use multilevel modeling for analysis of leadership studies. Studies 1 and 2 were analyzed using this method, and as such are among a small number of leadership studies to have done so. It is hoped that this more sophisticated approach to multiple regression and mediation analyses further enhances the credibility of the studies.

Future Research

At least five potentially interesting areas might be particularly worthwhile to focus on in future research. First, as noted, there were no significant findings relative to the behavioural and physiological well-being measures. However, scholars mapping out research agendas for those interested in healthy workplaces (Kelloway & Day, 2005b) have stressed the need to use multiple indices of health, including physical and behavioural ones. Before this avenue of investigation is abandoned, more work obviously needs to be done to see if non-significant findings with other measures are replicated. Given the factors outlined to affect the well-being of the primarily female health care workers, perhaps studies in other settings, such as service or office workers, should be attempted.

It is very interesting that the majority of participants in Study 3 focused their efforts on goals related to individualized consideration and intellectual stimulation, and that these were also the leaders who were perceived by their employees as exhibiting the greatest change relative to their transformational leadership behaviours. Does this suggest then that there is a hierarchy of the four principles? In other words, does this study suggest that above all, what is important to employees is a leader who demonstrates interest and concern for them as individuals and, secondly, who provides opportunities

for intellectual engagement and development. Or is it simply the case that individualized consideration and intellectual stimulation are the transformational leadership behaviours that are easiest for developing leaders to enact and for their employees to perceive? Or is it that idealized influence and inspirational motivation are leadership behaviours that are more difficult for leaders to understand and subsequently display? Perhaps leaders have to be at different stages in their development to enact these behaviours comfortably and credibly. Perhaps leaders seeking to develop such behaviours need more support or different training.

I have discussed this issue with my training facilitator and he commented on the fact that the results of his personal training evaluations vary depending on the level of the leaders attending the sessions. He noted that his focus on individualized consideration and intellectual stimulation is well received by leaders who are in entry or mid-level leadership roles, but that is not necessarily the case with executive leaders. His training colleague, who places more of an emphasis on inspirational motivation and idealized influence in his sessions, is far better received by the executive leaders. This suggests that higher level leaders may perceive a hierarchy in terms of the leadership behaviour they themselves should exemplify. It would be interesting to pursue these questions in a more detailed manner with other groups of participants at different stages of their careers and leader development.

Thirdly, and somewhat related to the previous point, the fact that the trainees with the least prior exposure to formal leadership training had the best recall of the training content, and that the majority of the leaders experiencing the biggest gains in their average leadership scores were front line leaders, was striking. Does this suggest that the

training had more impact on these individuals? Does it mean these individuals were more receptive to learning because they had not had prior opportunities? Did they work harder at goal implementation as a result and have greater success? Did their title and exposure to front line employees make a difference? It would be beneficial to determine if the same scenario holds with a larger group of trainees or if this is something particular to the individuals from this study. This might provide valuable data for organizational development practitioners who have limited educational budgets and need to know to whom to devote their scarce resources. Do they focus first on developing “new” leaders, and then look for other ways to train (or perhaps in some cases retrain) those leaders who have already participated in formal training?

Related to all of this issue is the question of leader gender. While both male and female participants in this study seemed to put equal emphasis on the dimensions of transformational leadership, Arnold and Loughlin (2004) argue that researchers should examine the components separately as there may well be sex differences, particularly with regards to individualized consideration. Eagly, Johannesen-Schmidt, and van Engen (2003) confirmed in their meta-analysis that the largest differences attributable to sex were relative to the individualized consideration scale. It would be worthwhile to reexamine the data from Studies 1 and 2 to determine whether sex differences relative to the dimensions do exist in the data sets, and if the effects on well-being differ as a result.

The feedback aspect of training programs also warrants further attention. Of those leaders in the top 10 for improved leadership scores, more than half had participated in a one-on-one meeting post-training. It would be worth exploring whether the feedback session influenced the leaders’ efforts. Miller et al. (2007) reported that

leaders in their study said retrospectively that receiving feedback on their leadership was one of the most important parts of the program. Even though Kelloway et al. (2000) found in one study that the combination of training and feedback did not increase trainees' transformational leadership behaviours, this might warrant further investigation, especially relative to the leader's sense of self-efficacy and well-being.

Lastly, the focus of this research program was on the effects transformational leaders have on their employees' well-being. Study 3 suggests that leaders who focused on employees who were particularly negative or problematic saw improvements in these individuals, followed by additional spillover benefits for their larger work groups. Perhaps these leaders were successful in breaking the "loss spirals" discussed by van Dierendonck, et al. (2004) and Hobfoll (1988), where relations between leaders and negative employees otherwise deteriorate because increases in employee's negative feelings subsequently feed decreases in leader's supportive behaviours, leading to increased employee negativity and so on. This could be a particularly fruitful area in which to conduct further research to see whether the effects on individual and work group well-being are as significant as the interview data suggests. A study could explore what effect leaders who are trained to deal with such loss spirals can have on the well-being of the "problem" employee and the larger employee work group, as well as any possible effects on the leader's own personal well-being. Given the richness of the data from the interview study, it could be very insightful to conduct a qualitative study in this area and juxtapose leader interview comments with those of employees.

Implications for Practice

Several valuable insights arising from this research have practical significance and might benefit those responsible for planning, delivering and assessing leadership training programs. The first such insight is the importance of advance planning related to training programs.

The actual training done in this study was delivered over an eight-month period, but it involved many months of pre-planning and evaluation at the end. Completion of surveys pre- and post-training was obviously integral to the success of this research. Despite major efforts to ensure good communication about the rationale for completion of two copies of the same questionnaire, response rates and anecdotal comments made by leaders in the Study 2 control groups made it clear that the need to repeat the same questionnaire was not well understood. Organizations wanting to evaluate training programs with pre- and post-test data need to find ways to ensure employees understand why this repetition is so critical to evaluation efforts. As mentioned previously, employees also need to understand that low response rates also limit the facilitators' ability to provide valuable feedback to trainees, and this feedback can be an important part of training program success.

It is clear from participants in Study 3 that there were factors that inhibited leaders from participating effectively in the training program and, perhaps more seriously, from having greater success with their goal implementation. Not all of these factors can be addressed, but some could be. First, the timing and location of training sessions need to be carefully considered. We elected to conduct the training in one full day and one half day, but there were many comments that the full day involved too much sitting for health

care workers used to being on the go. We also had a combination of morning and afternoon sessions to accommodate shift workers. Employees who had worked the morning and then attended the afternoon session commented on session evaluations forms that it was harder to transition from working to the classroom. One of the interview participants echoed this concern. We also had a combination of on-site and off-site sessions, and not surprisingly the off-site sessions were preferred by trainees. If cost is not a huge issue, as it was for this not-for-profit organization, the off-site sessions would seem to be the preferred route.

Organizations, especially large and diverse ones considering big training initiatives, might do well to survey leaders in advance of any detailed planning or programming. With a very brief instrument, the organization's human resource and education staff could collect valuable data about the management/leadership experience of their staff as well as their previous exposure to leadership development programs. This data could be used to help place together leaders who are at similar stages of development and deliver cohort appropriate content. These cohorts could also potentially serve as post-training support groups.

The challenges leaders face in implementing their training on the job needs to be recognized as well. This need was evident from the participant interviews and has been documented by others conducting leadership training studies in the health care sector. Block and Manning (2007) have pointed out the need for senior organizational leaders to provide tangible, long-term support for such initiatives, and I would echo their comments. The timing of leadership training interventions needs to be carefully considered, in particular with respect to the issue of sustaining the effort. If other big

organizational initiatives loom large on the horizon, such as a formal accreditation program, organizational leaders should reconsider their plans for leadership development. Trying to implement two large and potentially competing initiatives is likely to create added stress for employees and reduce possible benefits to the organization. Trainees also need to be supported with other activities to reinforce their learning. This support was not included as part of this training initiative and it is one aspect that participants did agree was missing from the program. Other training programs of leaders in the health care sector have reported success with team-based learning assignments focused on real organizational problems, as well with as the ongoing coaching and mentoring noted earlier (Block and Manning, 2007; Miller et al, 2007). Such program elements would help to reinforce learning.

Potential Limitations

As discussed at the conclusion of each study, each data collection method has inherent weaknesses. It is hoped that the combination of data collection methods, as well as the quasi-experimental design of Study 2, help counter-balance the negatives. Another potential limitation of this research program is that it was applied research carried out in a fully functioning organization which did not “stand still” during the time of my studies.

Other scholars have also noted that studying workplace spirituality in a health care setting might also be problematic because healthcare workers can be expected to be sensitized to spiritual issues through their constant contact with the sick and dying, and through their awareness of the social values of the health care sector (Duchon & Plowman, 2005). However, it is equally likely that they would be better able to articulate and reflect on this phenomenon because of their experience, and this makes the sector

especially appropriate for studies of workplace spirituality. Further study of this area in other work settings would obviously shed light on this issue.

By way of closing, I would like to come full circle, back to the introduction. As I noted there, even though an estimated \$50 billion is spent annually on leadership development programs in North America (Raelin, 2004), such training initiatives have rarely been assessed with formal criteria (Burke & Day, 1986; Collins & Holton III, 2004; Saari, et al., 1988). Not surprisingly, given the lack of funding in the public sector, health care researchers doing leadership training studies have reported rigorous program evaluations are even more rare in their sector (Block & Manning, 2007), but are also very much needed considering the importance of the health care sector to the health of the overall population. There are many reasons for this lack of applied research. Testing the effects of training in a fully functioning organization with a large employee population is rare because of management concerns about cost and disruption (Frese, et al., 2003). Although I know leaders and managers at Northwood would concur that my research program added costs and additional work burdens, I believe the training program and the insights generated from its evaluation will offset those negatives. The future research agenda I have suggested here could also help scholars to uncover new learning about leadership, its developmental process and its impact on employee well-being, so there may be additional gains made there in the future. I believe my suggestions about practice will help organizational leaders and trainers plan more effectively and set more informed priorities relative to the knowledge or skills needed in their leadership development programs. Such information could enhance the delivery and ultimately improve the trainees' learning experiences.

Considering the study from the perspective of organizations and their employees, I believe my work will ultimately benefit them. Again, as noted at the outset, we spend half of our waking life at work (Wrzesniewski, 2002) and yet, for many, that work experience is not that positive. The layoffs and restructurings that occur have a negative effect on the mental health of many employees (Mohamed, et al., 2004). The fact that people are also having to work longer and more intensely (Tsui & Wu, 2005) is also taking a toll on people, with such negative outcomes as stress, sickness, injury and even workplace violence (Naylor, 2004). More than 10 years ago, Quick et al. (1997) described such occupational stress as a “leadership challenge” for those concerned with the well-being of their employees, and yet researchers and organizations have been slow to respond to the challenge of finding effective ways of promoting the well-being of their employees. My research has demonstrated that transformational leadership training, in combination with a work environment where employees feel they are appreciated members of a work community with shared organizational values, will ultimately make the time we all spend as “workers” more positive and enriching for our spirits, minds and bodies.

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Appendix A – Information Letter from Organizational Leaders to Employees

To: Long-term Care and Asset Management employees
From: Susan Dempsey and Jim Todd
Date: November 1, 2005
Re: Transformational Leadership Training Evaluation

As you may have heard, about 100 pre-selected employees from the Long-term Care and Asset Management groups will be participating in transformational leadership training sessions put on by the Sobey School of Business at Saint Mary's University. This training will start in November and continue through until February.

The folks at Sobey will be formally evaluating the effects of the training, and would like you to help by completing the attached confidential pre-training questionnaire regarding a co-worker you are currently working with. Please return the questionnaire ASAP in the business-reply envelope no later than November 11. (You may also place it in the confidential mailbox at the Centre Desk. These will be collected personally by Margaret McKee, Sobey School of Business.)

If you have any questions regarding the survey, you may contact Margaret McKee, Sobey School of Business, at 496-8790.

Thank you!

Appendix B – Invitation to Participate and Informed Consent

Northwood Transformational Leadership Training Assessment Invitation to Participate and Instructions

Northwood has partnered with the Sobey School of Business at Saint Mary's University to offer transformational leadership training to staff in Long-term Care and Asset Management. To help us evaluate the effectiveness of the training, the Sobey Business School training team would like your help in assessing the leadership style of the following trainee:

(Label with trainee name to go here)

Please take the 25-30 minutes required to complete the attached questionnaire and return it in the postage-paid return envelope provided. Completed surveys should be submitted no later than November 12, 2005.

All information collected in this study will be kept strictly confidential and anonymous. Your identity will in no way be associated with your answers to the questions. Furthermore, the results of this study will be presented at a group level so individual participants cannot be identified. Your participation is completely voluntary. You may withdraw from this study at any time without penalty.

By completing the questionnaire you are indicating that you understand the above information and agree to voluntarily participate in this study.

If you have any questions, please contact the principal researcher Margaret McKee at (902) 496-8790, or by email at margaret.mckee@smu.ca. You may also contact Dr. Cathy Driscoll at (902) 420-5282 or by email at cathy.driscoll@smu.ca.

This research has been reviewed and approved by the Saint Mary's University Research Ethics Board. If you have any questions or concerns, you may contact Dr. John Young at ethics@smu.ca, Chair, Research Ethics Board.

Appendix C – Notice to Staff to Encourage Survey Completion

Phase Two of Leadership Training Set to Begin

In just over two weeks, the next group of leaders from Long-term Care and Assisted Living, and Facilities Services will begin their leadership training. Like the 45 folks who participating in the November training sessions, the second group of 50 people will take part in a one and a half day training session led by Dr. Kevin Kelloway of the Sobey School of Business at Saint Mary's University. They'll learn about leadership approaches and then meet one-on-one with a member of the training team to review their personal leadership profile. Employees from across Long-term Care and Facilities Services can play a valuable role in this process.

Within the week, surveys will be sent out to employees across Long-term Care and Assisted Living, and Facilities Services. Staff will be asked to provide feedback on specific employees and, if enough employees respond, this feedback will be shared with the leaders participating in the training. In the last round of surveying, almost 300 people provided feedback on leadership practices within Northwood. If a trainee had three or more people completing an assessment of their leadership approaches, the information was summarized and shared with them in a confidential meeting. Trainees who received this feedback commented that it was a very helpful and important part of the process.

To help us ensure even more trainees get feedback, everyone who receives a survey is encouraged to take the time to complete the assessment. With the surveys, Saint Mary's University will also be formally evaluating the overall effects of the training. Since the leadership training is part of Northwood's overall strategic plan, this information can be used to see if the training is helping meet the organization's priorities.

Completed surveys should be submitted no later than February 24. Employee can drop them in the mail or leave them in the confidential mailbox near the Northwood Centre reception desk. (These will be collected personally by Margaret McKee, Sobey School of Business.)

If you have web access, you can complete the survey on-line at <http://athena.smu.ca/survey/nwood/leadership.htm>.

If you have any questions regarding the survey, contact Margaret McKee, Sobey School of Business, at 496-8790.

Appendix D – Survey Items used to Assess Emotional Well-being

General Health Questionnaire, Goldberg, D. P. (1972).

1	2	3	4	5	6	7
Not at all	A little	Once in a while	Sometimes	Fairly often	Often	Frequently or always

During the last 6 months, ...

1. Have you been able to concentrate on whatever you're doing?
2. Have you lost much sleep from worry? (recoded)
3. Have you felt you were playing a useful part in things?
4. Have you felt capable about making decisions about things?
5. Have you felt under strain? (recoded)
6. Have you felt that you couldn't overcome your difficulties? (recoded)
7. Have you been able to enjoy normal day-to-day activities?
8. Have you been able to face up to your problems?
9. Have you been feeling unhappy and/or depressed? (recoded)
10. Have you been losing confidence in yourself? (recoded)
11. Have you been thinking of yourself as a worthless person? (recoded)
12. Have you been feeling happy, all things considered?

Appendix E – Survey Items used to Assess Healthy Behaviour

Francis (2005)

1	2	3	4	5	6	7
Strongly Disagree	Disagree	Disagree Somewhat	Neutral Don't Know	Somewhat Agree	Agree	Strongly Agree

During the past 6 months, ...

1. I exercise for at least 30 minutes 3 times a week.
2. I sleep 7-8 hours a night.
3. I eat a well-balanced diet.
4. I eat breakfast every day.
5. I often skip meals. (recoded)
6. I get regular medical check-ups.

1	2	3	4	5	6	7
A lot less than usual	Less than usual	A bit less than usual	About the same	A bit more than usual	More than usual	Much more than usual

During the past 6 months, ...

1. How often have you consumed caffeinated beverages or caffeine supplements?
(recoded)
2. How often have you smoked cigarettes? (recoded)
3. How often have you consumed alcoholic beverages? (recoded)
4. How often have you used over-the-counter drugs such as sleep aids or pain killers
(e.g., ibuprofen or acetaminophen such as Advil or Tylenol)? (recoded)

Appendix F – Survey Items used to Assess Physiological Health

Johnston et al. (1995); Derogatis & Cleary (1977)

1	2	3	4	5
Never	Seldom	Sometimes	Often	Very Often

During the past 6 months, how often have you experienced ...

1. Nausea or upset stomach? (recoded)
2. Pain in your lower back? (recoded)
3. Headaches? (recoded)
4. Pain in the heart or chest? (recoded)
5. Faintness or dizziness? (recoded)
6. Numbness or tingling in parts of your body? (recoded)
7. A lump in your throat? (recoded)
8. Trouble getting your breath when not exercising or working hard? (recoded)
9. Hot or cold spells? (recoded)
10. Heavy feelings in your arms and legs? (recoded)

Appendix G – Survey Items used to Assess Spiritual Well-being

Paloutzian and Ellison (1982) ©

Existential Well-being

1	2	3	4	5	6	7
Strongly Disagree	Disagree	Disagree Somewhat	Neutral Don't Know	Somewhat Agree	Agree	Strongly Agree

Sample items:

1. I feel unsettled about my future. (recoded)
2. I feel very fulfilled and satisfied with life.
3. I believe there is some real purpose for my life.

Religious Well-being

1	2	3	4	5	6	7
Strongly Disagree	Disagree	Disagree Somewhat	Neutral Don't Know	Somewhat Agree	Agree	Strongly Agree

Sample items:

1. I have a personally meaningful relationship with God or a Higher Power.
2. I don't get much personal strength and support from God or a Higher Power.
(recoded)
3. I feel most fulfilled when I'm in close communion with God or a Higher Power.

Appendix H – Survey Items used to Assess Transformational Leadership

Multifactor Leadership Questionnaire © Bass and Avolio (1995)

0	1	2	3	4
Not at all	Once in a while	Sometimes	Fairly Often	Frequently if not always

Sample Items:

The person I am rating.....

1. Talks about their most important values and beliefs.
2. Treats me as an individual rather than just as a member of a group.
3. Gets me to look at problems from many different angles.
4. Emphasizes the importance of having a collective sense of mission.

Appendix I – Survey Items used to Assess Workplace Spirituality

Meaningful Work (May, Gilson & Harter, 2004)

1	2	3	4	5
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree

1. The work I do on this job is very important to me.
2. My job activities are personally meaningful to me.
3. The work I do on this job is worthwhile.
4. My job activities are significant to me.
5. The work I do on this job is meaningful to me.
6. I feel that the work I do on my job is valuable.

Sense of Community (Milliman, Czaplewski & Ferguson, 2003)

1	2	3	4	5	6	7
Strongly Disagree	Disagree	Disagree Somewhat	Neutral Don't Know	Somewhat Agree	Agree	Strongly Agree

1. Working cooperatively with others is valued at Northwood
2. I feel part of a community here at Northwood.
3. I believe people support each other here at Northwood.
4. I feel free to express my opinions.
5. I think employees are linked with a common purpose.
6. I believe employees genuinely care about each other at Northwood
7. I feel there is a sense of being part of a family working at Northwood

Values Alignment (Cable & Judge, 1996)

1	2	3	4	5
Not at all	A little	Somewhat	Very much	Completely

1. To what degree do you feel your values “match” or fit with this organization and the current employees in this organization?
2. My values match those of the current employees in this organization.
3. Do you think the values and “personality” of this organization reflect your own values and personality?

Appendix J – Study 1 Factor Analysis of Workplace Spirituality Index

Item	Meaningful Work	Sense of Community	Values Alignment
The work I do on this job is very important to me	.842		
My job activities are personally meaningful to me	.839		
The work I do on this job is worthwhile	.825		
My job activities are significant to me	.827		
The work I do on this job is meaningful to me	.889		
I feel that the work I do on my job is valuable	.770		
Working cooperatively with other is valued at Northwood		.691	
I feel part of a community here at Northwood		.836	
I believe people support each other here at Northwood		.812	
I feel free to express my opinions		.694	
I think employees are linked with a common purpose		.628	
I believe employees genuinely care about each other at767	
I feel there is a sense of being part of a family working at858	
To what degree do you feel your values "match" with the current organization and the current employees?			.791
My values match those of the current employees			.845
Do you think the values and "personality" of this organization reflect your own values and personality?			.778
Eigen value	3.84	5.80	1.29
% of Variance	27.22	26.37	14.69
Reliability (Cronbach's Alpha)	.90	.91	.84

Appendix K – Sample Trainee Feedback Report

Trainee: #X (initials)

	Self Assessment	Subordinate Assessments (12)	Group Score
Laissez-Faire	0.25	.21	.75
Management By Exception (Passive)	0.75	.56	1.08
Management By Exception (Active)	1.00	1.06	1.86
Contingent Reward	3.25	3.05	2.38
Intellectual Stimulation	3.00	2.95	2.37
Inspirational Motivation	3.00	3.02	2.46
Idealized Influence (Attributed)	3.25	3.37	2.62
Idealized Influence (Behaviour)	3.25	3.40	2.33
Individualized Consideration	3.50	3.25	2.28
Extra Effort	3.67	2.83	2.07
Effectiveness	3.50	3.44	2.70
Satisfaction	3.50	3.62	2.84

Difference of .3 or more between scores considered a meaningful difference.

Results only provided if three or more subordinate assessments provided.

Appendix L – Study 2 Factor Analysis of Workplace Spirituality Index T1

Item	Meaningful Work	Sense of Community	Values Alignment
The work I do on this job is very important to me	.784		
My job activities are personally meaningful to me	.824		
The work I do on this job is worthwhile	.772		
My job activities are significant to me	.815		
The work I do on this job is meaningful to me	.859		
I feel that the work I do on my job is valuable	.740		
Working cooperatively with other is valued at Northwood		.602	
I feel part of a community here at Northwood		.735	
I believe people support each other here at Northwood		.805	
I feel free to express my opinions		.694	
I think employees are linked with a common purpose		.748	
I believe employees genuinely care about each other at789	
I feel there is a sense of being part of a family working at778	
To what degree do you feel your values "match" with the current organization and the current employees?			.793
My values match those of the current employees			.750
Do you think the values and "personality" of this organization reflect your own values and personality?			.704
Eigen value	4.06	4.35	2.14
% of Variance	27.18	25.37	13.36
Reliability (Cronbach's Alpha)	.93	.93	.84

Appendix M – Study 2 Factor Analysis of Workplace Spirituality Index T2

Item	Meaningful Work	Sense of Community	Values Alignment
The work I do on this job is very important to me	.763		
My job activities are personally meaningful to me	.836		
The work I do on this job is worthwhile	.789		
My job activities are significant to me	.862		
The work I do on this job is meaningful to me	.867		
I feel that the work I do on my job is valuable	.776		
Working cooperatively with other is valued at Northwood		.617	
I feel part of a community here at Northwood		.795	
I believe people support each other here at Northwood		.869	
I feel free to express my opinions		.739	
I think employees are linked with a common purpose		.715	
I believe employees genuinely care about each other at856	
I feel there is a sense of being part of a family working at867	
To what degree do you feel your values "match" with the current organization and the current employees?			.761
My values match those of the current employees			.859
Do you think the values and "personality" of this organization reflect your own values and personality?			.624
Eigen value	4.33	5.05	2.10
% of Variance	27.09	31.58	13.15
Reliability (Cronbach's Alpha)	.92	.92	.85

Appendix O – Interview Guide

Opening Question

- Tell me a little about your supervisory role here at Northwood
 - How long have you worked in such a role?
 - How would you describe your leadership approach?
- What do you think makes a good leader?
- What is satisfying about being a leader? What is not so satisfying?
- How would you grade yourself as a leader?

Key Questions

- What did you think of the leadership training?
 - Describe the experience for me.
- What did you learn during the training?
 - What's the thing that most surprised you?
 - What changes did you decide to make as a result of your training?
 - How did you actually do that on the job?
- Did doing the training affect the way you feel about yourself as a leader?
 - If yes, how?
- What kinds of leadership development goals did you set?
 - Which goals did you actually implement?
 - Which goals seemed to have the most impact on staff?
 - Why do think that was so?
 - Were some goals easier to implement than others? If yes, why?
 - Were you supported in trying to implement your goals? If yes, how?
- How did your staff react to your new leadership behaviours?
 - How did your new behaviours affect your work team?
 - What changes did you notice in individuals or the group?
 - What kind of comments did employees make to let you know they were aware of things changing?
 - Do you think your new behaviours made employees feel more part of the team? If yes, how?
 - Do you think it changed the way staff looked at their job? If yes, how?
 - Do you think it changed the way employees felt about working at Northwood? If yes, how?

Thank participant. Reiterate if they are interested in receiving a copy of the results from the paper that I would be pleased to send them an email copy.

Appendix P – Interview Coding Sheet

Training Recall

- General Training Recall (GTR)
- Transformational Leadership (TFL) Recall (TLR)
- Intellectual stimulation (TLR-IS)
- Idealized influence (TLR-II)
- Individualized consideration (TLR-IC)
- Inspirational motivation (TLR-IM)
- Goal Recall (GR)

Transformational Leadership (TFL) Examples

- Intellectual stimulation (TLEG-IS)
- Idealized influence (TLEG-II)
- Individualized consideration (TLEG-IC)
- Inspirational motivation (TLEG-IM)

Training Application (TAPP)

- Successes (goal attainment) (TAPP-S)
- Challenges (TAPP-C)
- Strategic application (focused or prioritized) (TAPP-SA)
- Peers and supervisors doing TFL (TAPP-PEERS)
- Informal leaders doing TFL; PCWs needing training (TAPP-IL)

Training Reinforcers/Supporters

- Structure/Span of control/chain of command TR/S-SSC
- Broader culture change TR/S-CC
- Training aids (physical reminders) TR/S-TA

Training Detractors/Impediments/Constraints

- Structure/Span of control/chain of command TD-SSC
- Workload (time/staffing shortages) TD-WK
- Other leadership styles (mothering, command & control) TD-OLS
- Sustaining TFL effort TD-SUS
- Nature of work (pressing health care issues) TD-NW

Training Impact/Benefits

- Direct TI/B-D
- Indirect (mood contagion; appreciative) TI/D-I

Confounds

- Other organizational training OOT