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Original research article

The impact of self-leadership and organizational commitment on the performance of Covid-19 nurses

Komang Ayu Mustriwati [1], Putu Sudarmika [2] *, I Made Candiasa [3]

[1] *Sanglah Central General Hospital, Nursing Department, Denpasar, Indonesia*
[2] *Sanglah Central General Hospital, Research and Development Department, Denpasar, Indonesia*
[3] *Ganesha University of Education, Science Education, Singaraja, Indonesia*

Abstract

Aim: The Covid-19 pandemic has become a global health problem and, as leading service providers, nurses are expected to retain self-management skills and a commitment to the hospital. The research objective was to determine the effect of self-leadership and organizational commitment on the performance of nurses who served in the Covid-19 treatment ward.
Methods: A descriptive-analytic study using a cross-sectional research design was conducted. A total of 52 nurses were given a questionnaire that had been pilot tested for reliability and validity.
Results: The study found that self-leadership and organizational commitment simultaneously affected the performance of the nurses ($p = 0.009$). The partial effect of self-leadership on nurse performance obtained a significance of $p = 0.044$. Organizational commitment also obtained a partial effect on nurse performance ($p = 0.025$).
Conclusions: Self-leadership and organizational commitment have a positive and significant effect on the performance of nurses in the Covid-19 ward. This research expands on nursing management science knowledge and literature. Recommendations for considering the management of nursing personnel in Covid-19 wards are also discussed. Overall, self-leadership and attention to organizational commitment greatly impact optimal productivity and nurse performance.

Keywords: Covid-19; Nursing management science; Nurse performance; Organizational commitment; Self-leadership

Introduction

On December 31st, 2019, in Wuhan, China, a case of pneumonia sparked one of the deadliest pandemics of the 21st century. Coronavirus Disease 2019 (Covid-19) continued to grow outside of China (CDC, 2020), and now, daily cases and deaths threaten every nation around the globe. The treatment of Covid-19 patients in large hospitals requires a slightly different mechanism to other diseases, this is due to the high transmission rate of the infectious Covid-19 virus (Kemendagri, 2020). Early detection and the sorting of patients showing symptoms of Covid-19 must be carried out from the moment patients enter the hospital. As the front line and initial point of contact with patients, hospital triage is vital to the detection and prevention of further cases. Infection prevention control is also a vital integrated part of clinical management and must be applied from the start of triage and during patient care (PDPI, 2020).

Located in Bali, Indonesia, Sanglah Central General Hospital is one of the largest referral hospitals on the island that is leading the treatment of Covid-19. Sanglah Hospital has dedicated its Nusa Indah ward as a specialized base for the care of

Covid-19 patients. The infectious nature of the virus requires intensive management of nursing personnel; thus, the ward is equipped with adequate human resources. As the leading service providers of the hospital, nurses at Sanglah Central are expected to retain self-management skills and commitment to the hospital. These factors are expected to lead to an elevated work ethic and improved daily performance.

Performance is a tangible behavior that can be measured and defined by the achievements produced by employees. Nurse performance is vital to achieving hospitals' goals, as nurses are at the forefront of providing service to clients. A hospital's nursing assessment model, based on professional nursing practice, can be evaluated using performance appraisal tools (Huber, 2002). One such tool is designed based on the areas of nursing practice, namely; the nursing process, collaborative practice, management leadership, professional development, and continuing education. As listed above, the nursing process is one area that can be evaluated, and it consists of linear stages: nursing assessment, nursing diagnosis, planning, implementation, and evaluation.

Several studies describe the factors that play a role in improving nurse performance, namely self-will, self-efficacy, and motivation. These three factors encapsulate the concept

of self-leadership in the workplace. Mandagi et al. (2015) describe self-leadership as developing one's abilities based on the belief that one must lead oneself before leading others. Effectively, one must strive to build the capacity to act, allowing one to live life effectively. In other words, self-leadership is the process of the individual influencing him or herself by encouraging the management, observation, and reflection of his or her thoughts and behavior.

Studies conducted in the field of self-leadership have shown that self-leadership strategies have a positive effect on the lives of individuals. According to research findings, self-leadership strategies contribute to the effectiveness of participants in problem-solving and in overcoming negative feelings, and lead to healthier and better living conditions (Yun et al., 2014). Individuals who can act as self-leaders experience growth, job satisfaction, and positive feelings. Self-leadership was also found to be negatively correlated with fatigue but positively correlated with psychological empowerment. Individuals who are self-leaders have the ability to use adaptive coping abilities (Wang et al., 2016). In a sense, self-leadership enables more effective self-management and self-influence. Therefore, individuals with self-leadership strategies have knowledge of how to manage themselves and what road maps to follow in different situations. In addition, self-leadership strategies serve as an effective mechanism for individuals to deal with situations in a healthy manner. In this context, self-leadership can be associated with self-esteem and life satisfaction.

The promotion of self-leadership can help with developing a stronger sense of identity - who you are, what you can do, and what you can become (Browning, 2018). In combination with communication skills, emotions, and the behavior of employees, self-leadership can be an effective way to improve workplace practice (Browning, 2018). Neck and Houghton (2006) found that self-leadership is also useful for elevating self-regulation, social cognition, self-management, control management, intrigue, and motivation. It also increases commitment, independence, creativity, innovation, trust, cooperation, and job satisfaction. Self-leadership behaviors are important because it not only has a positive impact on business and organizational management, but can also stimulate organizational commitment (Qodriah et al., 2019).

Organizational commitment can be expressed as the condition in which an employee links themselves to an organization and its goals and hopes to maintain his or her membership in the organization (Robbins, 2006). In the literature and practice, organizational commitment is a behavior that is widely discussed and researched. This is because organizations need employees who have high organizational commitment so that organizations can continue to endure and improve their services and products – especially during tumultuous times such as the Covid-19 global pandemic. Self-leadership and organizational commitment are investigated in this study in order to determine their effect on the performance of nurses, especially those working in the Covid-19 ward at Sanglah Central General Hospital in Denpasar, Bali. The ward was selected by the investigators as it specializes in handling patients with high infection risks. As the risk of this infection could infect the nurses themselves, staff must work with high alertness and self-protection. These conditions caused by the intensity of Covid-19 can affect a nurse's performance psychologically. Thus, it is vital to demonstrate how self-leadership and organizational commitment can improve nurse efficacy in treating Covid-19.

Materials and methods

This paper details a descriptive-analytic study that utilizes a cross-sectional research design. The study began by identifying the characteristics of nurses working at the Nusa Indah Covid-19 ward of Sanglah Central General Hospital over thirty days. Next, participants were asked to self-assess their work performance by completing a questionnaire based on self-leadership and organizational commitment concepts. Random sampling was used to identify the 52 nurses included in this study. We developed three questionnaires through expert testing and respondent testing. Firstly, the nurse performance questionnaire was developed based on nursing theory – which includes assessment, planning, diagnosis, implementation, and evaluation. Secondly, the self-leadership questionnaire was developed based on the concept of self-leadership – which includes self-awareness, self-direction, self-control, and self-completion. Lastly, the organizational commitment questionnaire was developed based on factors related to organizational commitment, including job satisfaction and work experience. The questionnaire was available online so participants could fill it in at a suitable time. The results of reliability testing of each variable are more than 0.60, so the variables of self-leadership, organizational commitment, and nurse performance can be used to conduct research. The data analysis technique used descriptive statistics, and multiple linear regression analysis.

Results

This study involved 52 nurses who served in a Covid-19 treatment ward.

Table 1. Characteristics of the respondents

Category	Respondents ($n = 52$)
Age (mean, SD)	31.17 ± 7.13
Employment status (n, %)	
Goverment employees	18 (34.6%)
Non goverment employees	34 (65.4%)
Educational status (n, %)	
Nursing diploma	37 (71.2%)
Undergraduate nursing	15 (28.8%)

Table 1 details the demographics of the respondents in this study. The average age of the respondents was 31.17 years (SD: 7.13). In terms of employment status, 18 respondents (34.6%) were government employees, whilst the remaining 34 respondents (65.4%) did not fall under government employment. A majority of participants held a Diploma in Nursing (37 respondents 71.2%) compared to the 15 participants with a Bachelor's in Nursing (28.8%). A data normality test using the Kolmogorov–Smirnov or Shapiro–Wilk test calculated self-leadership as a value of $p = 0.150$, organizational commitment as a value of $p = 0.165$, and nurse performance as a value of $p = 0.051$. The results of the normality test indicate that all data is normally distributed, as the tolerance value of 0.993 is greater than 0.10 and the value of variance inflation factor (VIF) is 1.007 less than 10. This means that there is no multicollinearity in the regression model in this study.

Table 2 shows self-leadership and organizational commitment with a value of $p = 0.009$ and an F value of 5.245. Self-leadership and organizational commitment simultaneously affect the performance of nurses. The t value can be seen from the results of data processing coefficients. The results of the t value are presented in Table 3.

Table 3 shows the partial effect of self-leadership on nurses' performance. The p-value is 0.044, so it can be concluded that self-leadership has a partial effect on nurses' performance. The influence of organizational commitment on the performance of nurses obtained a p-value = 0.025. From these results, it can be concluded that organizational commitment has a partial effect on nurse performance.

Table 2. Results from the analysis of the effect of self-leadership and organizational commitment

Model	Sum of squares	df	Mean square	F	Sig.
Regression	301.229	2	150.614	5.245	0.009
Residual	1407.079	49	28.716		
Total	1708.308	51			

Table 3. Results from the analysis of the effects of self-leadership and organizational commitment on nurse performance

Variable	t	95% CI	p
Self-leadership	2.068	0.0015–1.031	0.044
Organizational commitment	2.314	0.071–1.004	0.025

Discussion

The effect of self-leadership on nurse performance

Leadership in nursing is a concept that must be studied more deeply. As Veisová and Tóthová (2010) have described, nurses use self-leadership to benefit not only the goals of patients and families, but self-leadership may also help the nurse to unconsciously achieve their own personal goals. The results of this study have shown that self-leadership has a partial effect on the performance of nurses with a p-value = 0.044. Self-leadership is the process of influencing and leading oneself to control one's behavior using a specific set of strategies. One's efforts are focused on achieving goals, enabling challenges and specific goal setting for other employees to complete – even during unpleasant situations (Müller and Niessen, 2019; Neck and Houghton, 2006). Self-leadership is also related to emotional intelligence. As discussed by Alabdulbaqi et al. (2019), emotional intelligence characteristics such as self-regulation – in tandem with other factors – produce different work results. So, nurses need to be trained in developing their emotional intelligence to help improve their self-leadership development (Alabdulbaqi et al., 2019). Self-leadership has also been understood to be a process of self-evaluation and self-influence in which individuals identify and replace ineffective behaviors to help increase personal accountability and improve professional performance (Kyguoliene and Ganusauskaite, 2017).

Self-leadership consists of several strategies in which individuals may use a series of cognitive, behavioral, and emotional strategies to help manage their behavior, influence and lead themselves (Neck and Houghton, 2006; Unsworth and Mason, 2012; Uzman and Ilknur, 2019). These strategies are called behavioral-focused strategies, natural reward strategies, and constructive thinking strategies.

Neck and Houghton (2006), Unsworth and Mason (2012) and Uzman and Ilknur (2019) describe such strategies used to achieve self-leadership:

1. *Behavior-focused strategies* may include self-observation, goal setting, self-appreciation, and self-correcting throughout their work. Behavior-focused strategies centre on behaviors that help individuals determine ineffective actions through self-reflective consideration. These strategies may help individuals to focus on their behavior; therefore, more opportunities to modify their behavior may arise. Behavioral-focused strategies consist of behaviors such as: observation, gratification, punishment, setting personal goals, and reminders. Self-observation helps individuals to become aware of their behaviors. Through self-observation, individuals can identify when, why, and how to present certain behaviors. Self-gratification means a person may reward themselves mentally or physically. These rewards may positively influence an individual's actions and may lead to new achievements. Setting personal goals and reminders can help to create, maintain and accomplish realistic long- and short-term goals.

2. *Natural reward strategies* emphasize the enjoyable aspects of a task or activity being carried out. Tied to emotional intelligence, natural reward strategies involve highlighting the fun and satisfying aspects of a job or task and overlooking any unpleasant or difficult aspects, thereby increasing the satisfaction gained from the task or job. Through natural reward strategies, it is more likely that any negative experiences involved in fulfilling tasks are suppressed and positive experiences are encouraged.

3. *Constructive thinking strategies* involve the creation and maintenance of functional patterns of thought. Through a process of self-analysis, individuals can identify, face, and respond more rationally. Constructive thinking strategies consist of imagination, self-talk, and evaluating beliefs and assumptions. Constructive thinking strategies focus on the reasoning of the individual and involve rearranging thoughts according to whether they are healthy or not. These strategies aim to identify and change unhealthy thoughts that are based on false beliefs and hypotheses. Thus, constructive thinking strategies are strategies that include considering non-functional assumptions and beliefs, speaking to oneself positively, and mastering one's performance. These strategies help individuals control their emotional state by identifying and limiting irrational and unrealistic beliefs, thereby improving performance. Constructive thinking strategies help individuals to feel better by using positive statements to build positive atmospheres where no harm comes to their sense of identity.

The effect of organizational commitment on nurse performance

In this study, organizational commitment had a partial influence on the performance of nurses (p = 0.025). Organizational commitment is observed when employees connect to an organization's goals and hope to maintain membership in the organization (Robbins, 2006). In organizations, organizational commitment is a behavior that is widely discussed and researched. This is because organizations need employees with high organizational commitment to continue to survive and improve the services and products provided. A hospital is a complex organization that is resource-intensive; and one such resource is human resources. Nurses are the largest human resource in the hospital. Human resources in an organization are one approach to improve service quality; nursing personnel also spearhead services in the hospital. By improving human resources, organizations may increase performance and value within the organization. To achieve quality services with high performance, professional nursing staff must work on their intellectual, technical, and interpersonal abilities, as well as practice standards, whilst paying attention to ethical and moral principles (Nursalam, 2011).

Nurses are the decision-makers of whether or not health services are provided to patients. This is due to nurses being the dominant staff (50–60%) of hospital personnel and their role of caring for and attending to patients 24 hours a day (Fitria et al., 2015). Organizational commitment and employee work attitudes are conceptually advanced compared to job satisfaction and other job variables. This is because organizational commitment reflects the overall composition of the organization. Commitment is the foremost element embedded in the systems of an organization to administer mutually agreed strategic applications. When successful, these strategic applications demonstrate a strong sense of belonging from all components of the organization. Research conducted by Khan et al. (2010) states that one of the determinants of performance is organizational commitment.

The influence of self-leadership and organizational commitment on nurse performance

The results of this study showed that self-leadership and organizational commitment simultaneously affect the performance of nurses (p = 0.009). Neck and Houghton (2006) state that self-leadership is useful for building self-regulation, social cognitive, self-management, control management, intrigue motivation, and for producing commitment and independence, creativity and innovation, trust, cooperation, positive influence, and job satisfaction, psychological empowerment, and self-efficacy. Not only do these behaviors produce positive experiences for the nurses and surrounding staff and patients, but the behaviors are also important as they manifest in organizational commitment (Qodriah et al., 2019).

Performance is a tangible behavior that is exhibited as achievements that are produced by employees associated with their role in the organization. According to Mangkunegara (2010), the factors that influence performance are the ability factor and the motivation factor. Psychologically, employees' abilities consist of potential abilities (IQ) and reality abilities (knowledge and skills). In the context of nursing performance in hospitals, a nursing assessment model that is based on professional nursing practice can be evaluated using performance appraisal tools (Huber, 2002). These appraisal tools are designed based on the areas of nursing practice, namely; the nursing process, collaborative practice, management leadership, professional development, and continuing education. As listed above, the nursing process is one area that can be evaluated and consists of linear stages, those being; nursing assessment, nursing diagnosis, planning, implementation, and evaluation.

Performance is organizational behavior that is directly related to the production of goods or delivery of services. Performance is often thought of as the achievement of a task, where the term task itself comes from the thought of activities required by workers. Performance, especially in the workplace, is the result of the quality and quantity achieved by an employee in carrying out their duties in accordance with the responsibilities assigned to them. Performance is also the result of work performed by an employee to achieve organizational goals (Fitriani and Basukiyatno, 2018). Performance may motivate employees to carry out tasks and responsibilities effectively and efficiently so that any conflicts and challenges that occur within the organization can be resolved (Sudarmanto, 2014; Tangkeallo, 2018).

Conclusions

Self-leadership and organizational commitment have a positive and significant effect on the performance of nurses working in the Covid-19 ward at Sanglah Central General Hospital. Nurses must have self-leadership and high organizational commitment so that it has an impact on productivity and performance. This research is expected to provide additional knowledge and literature in improving nursing management science. For research institutions, it is hoped that this research can become a basis that is considered in the management of nursing personnel, especially for those in charge of the Covid-19 patient care wards. It is hoped that this research can lead to further research on improving nurse performance.

Conflict of interests

The authors have no conflict of interests to declare.

Approval letter

This research has been approved with the number LB.02.01/XIV.2.2.1/4311/2020.

Dopad self-leadershipu a loajality vůči organizaci na výkon sester při léčbě Covid-19

Souhrn

Cíl: Pandemie Covid-19 se stala globálním zdravotním problémem a od poskytovatelů zdravotních služeb, sester, se očekává, že si udrží dovednosti self-managementu a loajalitu vůči nemocnici, ve které pracují. Cílem výzkumu bylo zjistit vliv self-leadershipu a loajality vůči organizaci na výkon sester, které sloužily na odděleních pro léčbu Covid-19.

Metody: Byla provedena deskriptivně-analytická studie využívající design průřezového výzkumu. Celkem 52 sester dostalo dotazník, který byl pilotně testován na spolehlivost a validitu.

Výsledky: Studie zjistila, že self-leadership a loajalita vůči organizaci společně ovlivnily výkon sester (p = 0,009). Částečný účinek self-leadershipu na výkon sester získal významnost p = 0,044. Loajalita vůči organizaci také získala částečný účinek na výkon sestry (p = 0,025).

Závěr: Self-leadership a loajalita vůči organizaci mají pozitivní a významný vliv na výkon sester na odděleních pro léčbu Covid-19. Tento výzkum rozšiřuje vědecké znalosti a literaturu o ošetřovatelském managementu. Rovněž jsou diskutována doporučení týkající se vedení ošetřovatelského personálu na odděleních Covid-19. Celkově má self-leadership a loajalita vůči organizaci značný dopad na optimální produktivitu a výkon sester.

Klíčová slova: Covid-19; loajalita vůči organizaci; self-leadership; věda o managementu v ošetřovatelství; výkon sestry

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