**Review Article**

**Nursing Leadership and Impact on Workplace Stress: The Role for Social Intelligence and Leader Personality**

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**Abstract**

Acceptance that the workplace can have a negative effect on employee well-being as well as organizational outcomes has become widespread. Traditional stress management interventions have focused on the individual employee by appraising stress levels and modifying coping strategies, however the relationship between leaders and employees is thought to be one of the most common stressors in organizations. Personality as an aspect of leadership style has been noted to influence employee well-being. In addition, the workplace by nature is a social environment where a leader’s perception of their social self as well as the needs of their employees can impact their relationship and ultimately an employee’s experience of distress. The objective of this concept paper is to offer perspectives to positively inform nursing leadership roles.

**Keywords:** Nursing leadership; Personality; Social intelligence; Workplace stress

**Introduction**

Employee stress management is a critical issue both from the perspectives of occupational health as well as organizational outcomes and goal attainment. Evidence links work stress with negative psychological and physiological health outcomes as well as absenteeism and job performance [1-5], a principal stress researcher, identified that the key factor in individual and organizational health is the presence of good relationships between members of a group. Workplace stress management interventions are traditionally focused on the stressed individual and are targeted to modify individual stress appraisal and coping strategies. Offermann and Hellmann [3] offer a view that supports stress prevention efforts through greater understanding of leadership practices, suggesting that leader behavior is amenable to increased self-awareness and training. In a similar study Kelloway, et al. [6] examined leadership impact on follower well-being and determined that there would be considerable value in providing education to leaders about how to engage in more positive interactions with employees. This article is intended to provide different perspectives for nursing leaders to consider in recognizing, possibly preventing, and buffering employee stress.

**Personality and Leadership Impact**

Personality traits generally refer to individual differences in the characteristic patterns of the way an individual may think, feel, and behave. Although there has been some debate about the relationship of personality to situational influence [7], personality is generally regarded to have a trait-like nature remaining consistent across adulthood and possessing longitudinal predictive power [8-10].

Higgins and Kram [11] noted that personality as an individual difference can impact the establishment of relationship development such as between leader and employee. Martins and Coetzees [12] support this viewpoint noting the influence of leader personality traits on various outcomes including the followers’ experiences of quality of work life. Personality as a particular element of leadership style can influence affective well-being and levels of stress for employees [2]. Challenging healthcare organizational missions can carry hopes for successful outcomes but also an inherent potential for stress, anxiety, and other possible negative results. The role of the nursing leader in these organizations may involve not only rational work expectations but also entail complex interactions. Anxiety of organizational members may be triggered by the complexities of the work environment and personal achievement demands that can be tempered by many factors, one factor being leadership. Guerin [13] identifies that the role of leadership when handled poorly can yield negative consequences; a follower’s experience of stress may greatly increase regressive and defensive dynamics which in turn can decrease the capacity for actual productive energy and creativity. Studies have shown that the leader follower relationship is one of the most common causes of stressors in organizations [14], whereas positive relationships with supervisors are related to lower levels of reported stress and turnover intention [15]. Several studies have suggested that positive supervisory behavior has a significant impact on employee well-being, and that a relationship-oriented leadership style is most important for follower well-being. [1,16]. Subordinates who identify their leaders as demonstrating higher levels of considerate behavior reported decreased stress [17]. Lornuud, et al. [18] discuss factors that can be detrimental or beneficial to employee well-being and describe leadership as being crucial. As an illustration, leadership was identified as an important consideration when exploring the causes of psychological stress in the offshore petroleum industry [19]. Similarly, Hogan, et al. [20] note that the great majority of employees, representing multiple occupational groupings, indicate that the most stressful part of their job involved interactions with their immediate supervisors. Dierendonck V, et al. [16] note that the social context in organizations, especially the relationship with one’s supervisor, is consistently connected to individual well-being. Bass and Avolio’s [21] research indicates that leaders directly impact work stressors through interpersonal relations.

**Leadership, Stress and Social Intelligence**

Given the interactional nature of the health care workplace, leadership occurs in a decidedly social context. Very often the issues that leaders encounter stem from the dynamics that occur within the social system of the workplace as well as the interaction between that system and its environment [22]. Leadership involves a set of relationships including the leader and follower, in an interaction process that extends beyond the individual [23]. The leader’s perception of their social self as it relates to followers is a fundamental element of the leadership process, as the accuracy of a leader’s perceptions regarding follower needs can directly impact the relationship [23]. An element of leadership that potentially impacts these relationships is social intelligence. Defined as “the ability to understand the feelings, thoughts, and behaviors of persons including oneself, and to act appropriately upon that understanding” [24]. Social intelligence is believed to be essential to leadership because it connects the person and situation aspects of leadership [25].

Social intelligence contains two aspects: social perceptiveness - a leader’s ability to be aware of and sensitive to followers’ needs, goals, and problems; and behavioral flexibility - which indicates a leader’s willingness and ability to respond appropriately as needed to a variety of situations [22]. Socially intelligent leaders are aware of the social situation they are involved in - including the needs of others - and they demonstrate flexibility to behave in response to the needs of varying social situations. Stichler [26] noted that nursing leaders with well-developed social intelligence will lay the foundation for a relationship-centered experience that positively affects the health and well-being of those in the work environment. Mumford, et al. [27] maintain that a relationship exists between personality and social intelligence.

**Workplace Stress**

Pearlin [28], notes that studying stress and its effects provides an opportunity to measure the extent to which individual well-being is related to structural systems such as the work environment. Work as a structural context includes specific roles such as leader and follower. Pearlin notes that these roles do not act in isolation but rather are part of a larger grouping which includes key interpersonal relationships. Upon becoming problematic, these relationships can cause stress and the chronic strains most often reported are interpersonal conflicts within role sets [28]. Psychological distress, depression, and burnout are most commonly noted to describe mental health problems in the workplace. Psychological distress may overlap with the symptoms of depression and burnout and thus is more general in its definition and measurement. This form of distress may be defined by a set of psychophysiological and behavioral symptoms such as anxious or depressive reactions, irritability, sleep disturbances, and a decline in intellectual abilities [29]. Research in this area has highlighted two main factors that may explain psychological distress in the workplace. The first of these factors points to the position of the individual in the occupational structure, and the second associates’ psychological distress in the workplace with the conditions experienced by an individual in their own job, which include relationships with leadership.

**Leadership and Personality**

Personality is a useful framework to understand leadership given the association between behavior and personality [30-32]. Leader personality trait research has primarily focused on leader emergence and effectiveness; however, the study of other applications of leader personality particularly the leader follower relationship has received little examination. Hogan and Holland [33] described the importance of aligning leadership personality dimensions with relevant outcomes in an effort to highlight significant leadership personality/outcome relationships. Kaiser and Hogan [34] further argue that personality, as expressed in behavior, affects employees. In this regard Yukl [35] notes the need for of investigations of leaders’ skill and personality traits in relation to leader flexibility in adapting behavior.

It has been suggested that the relationship between a leader’s behavior and subordinates work related stress has not been adequately examined [36]. In addition, Stordeur, et al. [37] maintain that supervisory behavior plays a major role in safeguarding or shielding the negative effects of work stressors, however only a few empirical studies document this relationship. Moreover, most of the studies that do examine the leaders’ role in workplace stress focus on particular leadership styles such as transformational or transactional, but do not measure or consider the potential impact of a leader’s personality.

**Discussion and Implications for Nursing Leadership**

Workplace stress management is frequently described as having a critical impact on psychological and physiological health outcomes of employees, as well as being related to productivity and organizational outcomes. The workplace is a social environment influenced by relationships between leaders and followers. Leadership has been found to have an impact on follower well-being [2]. Positive relationships between the leader and follower are noted to be related to lower levels of workplace stress. Leader personality as expressed in behavior affects employees; however, leader personality has historically been used only to examine leader effectiveness and emergence.

Social intelligence connects the person and personality of the leader with the environment in which leadership occurs. Leader behavior is impacted by personality and social intelligence. Well-developed social intelligence can contribute to relationship centered leadership experiences that have positive effects on well-being [26]. Developing an enhanced sense of personality and social intelligence impact can contribute to leadership growth and development.

Individuals come to nursing leadership positions with given traits, such as personality and social intelligence that may influence leadership interactions. The interrelationships between these traits and their potential impact on followers’ distress have not been studied and yet many authors indicate the need for further examination.

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