

Key Concepts : Subjectivity, Leadership

Subjectivity of Leadership Behavior for Nurse Manager in Hospital

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ABSTRACT

This study has been attempted using the Q methodology to clarify leader type of nurse managers that head nurses and general nurses recognize, and to clarify its relative relation.

Sixty-three statements were extracted through interviews with general and professional people interested in the subject of nurse leaders to extract the Q population. A total of 314 Q population was formed added with 251 questions extracted from related documents. Final 32 Q samples were selected by reorganization of 314 Q population after reexamining statements through inquiry of 1 professor of the nurse department, 2 students in course of nurse science masters degree and 2 students in course of doctoral degree. The P sample selection standard of this study were 25 nurses and 30 head nurses. Examination subjects themselves filled out 32 statements classified in a measure of 9 points from agreeable items to disagreeable items. Principal component factors were analyzed using the QUANL pc program after grading the contents of the P sample.

Nurses recognizing subjective structure for leader behaviors of nurse manager were analyzed to be 3 factors: vision presentation type, self-capability consideration type, relationship consideration type, and head nurses recognizing subjective structure were analyzed to be 2 types: task pursuit leader type, and concord pursuit type.

Nursing manager's leader behavior, expected by staff nurse are more complex and higher level which may combined with task pursuit leader type in concord pursuit leader of head nurse. Also according to Hersey and Blanchard theory(1977), the effectiveness of leadership becomes to be larger as the accordance rate between the behaviors of nurse leaders and followers reaction increase.

Two suggestions have been made based on the conclusion.

1. Studies on creating strategies in relation to development, management, selection of nurse leaders should be made based on this study.
2. There is a need for relative study of production and degree of similarity of leadership types based on this study.

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I. INTRODUCTION

1. The need for the study

Hospital management has worsened deeply by increase in medical materials due to the IMF after 1997 with competitive deepening of the medical market and disproportion of medical treatment. Furthermore, by changes in aspects of medical recipients such as decrease in medical service users, improvement in basic rights of public health and expectation of better quality medical service, not the hardships of hospital management but the question of survival of hospitals are being greatly raised. It is expected that especially for the 21st century, hospital management trend will follow centralization, classified by units or skills, and will be changed in the direction of emphasizing the effectiveness of the management and model towards more patient centralized hospitals that will respect the rights of patients (Yeun, 1995). Therefore, the ability of nurse managers of all levels to uplift nurse production and to lead them is needed, in order to prepare and help solve critical situations for hospital management in the 21st century.

This is the same as emphasizing the importance of how nurses who carry out realistic matters and achieve objectives of the organization as a part of the organization, recognize the behaviors of nurse leaders. Therefore, if nurses, as a part of the organization, can confirm the relative relation of actual image and value beliefs in relation to behaviors of the nurse leaders, this can contribute to the preparation of leadership model for nurse managers that should be newly changed.

In the flow of leadership study backgrounds following trait theory, behavioral theory, and situational theory, a factor that should not be passed over is how the subordinates understand the value and behaviors of their leaders (Kim,

1993). This is the same as emphasizing the importance of how the nurses in achieving goals of the organization of nurses working in the real matters understand the behaviors of nurse leaders. Therefore, preparation of creating new model nurse leaders can be attributed through confirming relative relationship of the real shape and value belief concerning behaviors of nurse leaders.

This study has been attempted using the Q methodology to clarify leader type of nurse managers that head nurses and general nurses recognize, and to clarify its relative relation. Q methodology is an appropriate methodology in subjectivity study of behaviors supposing that man can understand and express his actions by emphasizing subjectivity and individuality in human behaviors. And there is also an advantage of supplying understanding in depth and general about the main subject by objectification of subjectivity by systematically analyzing subjectivity state following the hypothetical formation logics (Kim, 1993).

2. Purpose of the study

Specific objectives have been formed to confirm the relative relation and to understand the structure by confirming leadership behaviors of head nurses and general nurses demand.

- 1) Identifying the subjective structure of general nurses toward leadership behaviors of nurse manager.
- 2) Identifying the subjective structure of head nurses toward leadership behaviors of nurse manager.
- 3) Predicating characteristics by type of nurse leadership behaviors of nurse manager
- 4) Understanding the relative relation between head nurses and staff nurses towards the subjective structure of nurse leadership behaviors.

II. INQUIRY INTO PAST STUDIES

Leadership, by putting together opinions of various scholars, can be defined as exercising influence deliberately to make members of the organization participate positively in common goals of the organization (Dunnette and Hough, 1992, Kim, 1996, Kochen, 1978, Stogdill, 1949).

Recent nurse leadership related nurse documents are as following.

Christian & Norman (1988) confirmed the 10 roles of nurse leaders from studying 28 clinical leaders. They administrated finances, supported their team, managed changes in the organization, sustained the network, encouraged self development of their members, encouraged ownership of their organization members, controlled the size of the project, were excellent in giving advice, and finally exercised their role as a motivator and change promoter. Murray (1988), in the study to confirm the effective leadership characteristics of nurse administrator, stated that nurse administrator should be a middle aged married women with masters degree with plenty of clinical experience. The nurse administrator should be active in nurse organization, and should also participate in decision making and outer political activities.

Park (1997) stated that transformational leader, such as one who could put in high ideals and merits, motivate, be able to satisfy the high level of demand of subordinates and through mutual motivation and stimulation being able to achieve more than anyone expect, is required. Hwang (1998) based on the studies of Stogdill(1949), has confirmed the administration work ability and objectivity to become more important as one reached the top manager, creativity to middle manager and responsibility to first line managers as a result of studying characteristics of level of leaders for nurse managers.

Kim (1993), in the study to confirm the leadership behaviors that nurse manager and

staff nurses recognize and its accord rate stated that the accord rate won only 31% & the disaccord rate even reaches 19%. There needs to be more diversified studies made on behaviors of leaders based on the statement of Hersey and Blanchard(1977) stating that the leadership effect becomes to be larger as the accordance rate between the behaviors of nurse leaders and subordinates reaction increase.

III. RESEARCH METHODOLOGY AND DESIGN

The purpose of this study is to confirm the types of nurse leaders by understanding subjective structure of nurses on leadership behaviors of nursing.

Q statements about nurse leaders have been confirmed through in depth interviews, study of related documents and discussion process, and based on this, the Q methodology was applied to find out the structure of leadership behaviors of nurse managers that nurses recognize.

1. The process of this study

Q population: Sixty-three statements were extracted through interviews with general and professional people interested in the subject of nurse leaders to extract the Q population. A total of 314 Q population was formed added with 251 questions extracted from related documents.

Q sampling: Final 32 Q samples were selected by reorganization of 314 Q population after reexamining statements through inquiry of 1 professor of the nurse department, 2 students in course of nurse science masters degree and 2 students in course of doctoral degree.

P sample: The P sample selection standard of this study were 25 nurses and 30 head nurses working in hospitals of Seoul and Kyunggi area with informed consent in participating in this study.

Q sorting: Examination subjects themselves filled out 32 statements classified in a measure of 9 points from agreeable items to disagreeable items, arranging them into "No, I'm not", "Utterly not, or so-so, I'm not sure", and "Yes, I really do".

Data Analysis: Principal component factors were analyzed using the QUANL pc program after grading the contents of the P sample.

The best number of factors were confirmed by selecting the best concluded types that could be adequately explained from the extraction result attained through inputting various factors that were over Eigen value 1.0.

IV. RESULTS

A. Subjectivity structure of staff nurses for leader behaviors

1. The formation of Q type

There were 3 factors of leader behaviors that nurses recognized, the 3 factors occupy 75.5% of all variance and in specific, factor 1-64.2%, factor 2-5.9% and factor 3-5.4% respectively and rather high correlation among 3 factors was found. Factor weight and demographic characteristics for participants were same as Table 1.

<Table 1> Factor weight and demographic characteristics

Factor	Item No	Factor Weight	Age	Marital Status	Education	Experience (Year)
1	V.5	2.4876	30	S	BS	6
	V.22	2.1422	29	S	BS	5
	V.4	2.0864	32	S	MS	8
	V.19	1.8330	29	S	AD	5
	V.21	1.3576	35	M	BS	5
	V.25	1.3466	30	S	MS	6
	V.17	1.2729	29	M	AD	5
	V.23	1.0803	28	S	BS	4
	V.20	0.8789	23	S	AD	2
	V.13	0.8567	32	S	AD	7
V.15	0.6531	29	S	AD	4	
2	V.16	1.8223	28	S	AD	4
	V.14	1.5541	29	M	MS	5
	V.2	1.5003	30	M	BS	6
3	V.7	2.1093	26	S	AD	2
	V.9	2.0356	34	M	AD	10
	V.3	1.9967	26	S	AD	2
	V.10	1.8160	25	S	AD	3
	V.8	1.7826	28	M	BS	4
	V.12	1.6627	25	S	AD	1
	V.18	1.2746	28	M	AD	5
	V.11	1.2110	28	S	BS	4
	V.1	1.2046	29	S	AD	4
	V.6	0.7946	28	S	AD	3
V.24	0.7526	27	S	MS	3	

2. Typological analysis of leader behaviors recognized by staff nurses

1) Factor 1 : Vision presentation type

A total of 6 from 11 study participants of factor 1, who have graduated from 4 year universities,

The most positively agreed to this statements were as follows in order (Table 2). Nurse manager 'is matured with high education and cultivation' ($z=1.49$), 'needs to encourage her followers with capacious insight to achieve the goal' ($z=1.37$), 'needs to have affirmative and desirable nursing image' ($z=1.22$), 'must be a person of position for strong leadership' ($z=1.19$), 'must keep continuing to develop professional knowledge and various skills' ($z=1.04$).

The statements, most positively disagreed of factor I were as follows in order. The nurse manager 'is not always needed an ability to control environment' ($z=-1.74$), 'may sometimes enforce to decide her task without other opinions' ($z=-1.67$), 'needs to have an

attitude to accommodate previous instances to solve problems accordingly' ($z=-1.61$), 'does not always be necessary an expert on interpersonal relationship skill' ($z=-1.53$).

The following is the statement that factor 1 more positively agreed compared to other factors,

Factor 1 can be recognized as nurse leaders who are mature in character with desirable role model, a person with professional knowledge and skills in addition to their academic degree who can lead their members to acquire their goals and a person who is always confident in the leader position. Unmarried participant number 5 with 6 years of clinical experience after her graduation is the best example of this factor (factor weight : 2.4876). Participant No. 5 explains her views for a nurse leader as "Nurse leader is a nurse. They should be an appropriate role model as a senior and should be able to represent her team. She should always be confident in any places or situation in order to show her status in other departments."

<Table 2> Array of Z-score and statements for factor 1

Item No	Statements	Z - score
30	Is matured with high education and cultivation	1.49
17	Needs to encourage her followers with capacious insight to achieve the goal	1.37
29	Needs to have affirmative and desirable nursing image	1.22
26	Must be a person of position for strong leadership	1.19
1	Would be preferably advanced in age	1.04
5	Is not an expert on unique professional knowledge and skills	-1.02
13	Does not always be necessary an expert on interpersonal relationship skill	-1.53
20	Must be cold with powerful authority	-1.58
23	Needs to have an attitude to accommodate previous instances to solve problems accordingly	-1.61
27	May sometimes enforce to decide her task without other opinions	-1.67
19	Is not always needed an ability to control environment	-1.74

Nurse manager needs an ability to support and control all members for achievement of goal. Therefore she must become a person of positive position and leads the organization with confidence and desirable aim of nursing. But in this case it doesn't mean that she should carry on with love only. For these reasons factor I is named as vision presentation type.

2) Factor 2 : Self-capability consideration type

There were 3 people with experience over 4 years classified in this second type. Most positively agreed statement for factor 2 participants are as following (Table. 3).

<Table 3> Array of Z-score and statements for factor 2

Item No	Statements	Z - score
28	Has to have an ability to evaluate objectively nursing situation apart from her	1.80
4	Needs logical thinking ability with rational wisdom	1.74
30	Is matured with high education and cultivation	1.59
15	Must be a person to take responsibility for all problems in the organization	1.46
8	Needs to have an ability to solve any conflicts in her organization	1.27
32	Could guide a creative decision making	1.24
26	Must keep continuing to develop professional knowledge and various skills	1.03
5	Is not an expert on unique professional knowledge and skills	-1.42
23	Needs to have an attitude to accommodate previous instances to solve problems accordingly	-1.43
13	Does not always be necessary an expert on interpersonal relationship skill	-1.57
	Must be cold with powerful authority	-1.93

The nurse manager 'has to have an ability to evaluate objectively nursing situation apart from her' ($z=1.80$), 'needs logical thinking ability with rational wisdom' ($z=1.74$), 'must be a person to take responsibility for all problems in the organization' ($z=1.46$), 'needs to have an ability to solve any conflicts in her organization' ($z=1.27$).

Most positively disagreed statements for factor 2 are as follows in order. The nurse manager 'must be cold with powerful authority' ($z=-1.93$), 'does not always be necessary an expert on interpersonal relationship skill' ($Z=-1.57$), 'needs to have an attitude to accommodate previous instances to solve problems accordingly' ($z=-1.43$).

The statements that factor 2 disagreed

strongly compared to other factors were : The nurse manager 'may sometimes enforce to decide her task without other opinions', 'needs logical thinking ability with rational wisdom', 'needs to have an independent power with own strong will', 'needs to have an ability to solve any conflicts in her organization'. They didn't seem to have a need for being a role model for other nurses nor their cooperation.

Therefore, this type of nurses feel that their knowledge and skill to be more important than external symbolic factors as a nurse leader. And for them to be objectively assessed in their leadership abilities, they had to be smart, rational, creative in solving problems, and possess the ability to present directions and were able to think logically.

The best example of factor 2 is participant No. 16 (factor weight : 1.8223), who is a graduate from associate college with 4 years clinical experience. She expressed her views for nurse leadership as "Nurse manager need to be smart and able to think logically in order to carry on the nursing matters harmoniously."

Nurse manager needs to guide creative decision making through rational thought for proper execution of jobs in independence and inflexible will. Therefore she sometimes needs to push forward for fulfillment of the aim instead of encouraging members and control the

environment. This compels nurse manager feel to keep self-developing for strong leadership.

This shows the characteristics of factor 2 and named to be self-capability consideration type.

3) Factor 3 : Relationship consideration type

The participants that fell into this category were 8 associate college graduates, 2 university graduates and 1 master degree undergraduate from a total of 11 nurses.

Most agreed statement for factor 3 participants were as following. (Table. 4)

<Table 4> Array of Z-score and statements for factor 3

Item No	Statements	Z - score
28	Has to have an ability to evaluate objectively nursing situation apart from her	1.61
15	Must be a person to take responsibility for all problems in the organization	1.34
14	Takes well care of others and execute her job with plenty of love	1.15
26	Must keep continuing to develop professional knowledge and various skills	1.08
17	Needs to encourage her followers with capacious insight to achieve the goal	1.08
7	Needs to have an ability to support and collaborate its member and others	1.07
6	Needs active communication skills for good relation with other division	1.06
13	Does not always be necessary an expert on interpersonal relationship skill	-1.35
23	Needs to have an attitude to accommodate previous instances to solve problems accordingly	-1.46
19	Is not always needed an ability to control environment	-1.62
20	Must be cold with powerful authority	-1.94
27	May sometimes enforce to decide her task without other opinions	-2.03

Nurse manager 'has to have an ability to evaluate objectively nursing situation apart from her'(z=1.61), 'takes well care of others and execute her job with plenty of love', (z=1.15), 'needs to have an ability to support and collaborate its member and others' (z=1.07), 'needs active communication skills for good relation with other division'(z=1.06).

Most disagreed statements for factor 3 were as following in order. The nurse manager 'may sometimes enforce to decide her task without other opinions'(z=-2.03), 'must be cold with

powerful authority'(z=-1.94), 'does not always be necessary an expert on interpersonal relationship skill'(z=-1.35).

In case of factor 3, nurse manager should be able to assess objectively the nursing situations, be responsible in happenings in her profession, be able to think in the position of subjects and work with a loving mentality, be able to achieve cooperation from her subordinates and communication with other departments, and finally should not turn down her subordinates' opinions and do her work as if she was a

dictator using her power in her custody.

The statements of strongly agreed compared to other factors were as follows. The nurse manager 'takes well care of others and execute her job with plenty of love', 'needs to have an ability to support and collaborate its member and others', 'needs active communication skills for good relation with other division'. On the other hand statements of strongly disagreed compared with other factors were as follows. The nurse manager 'may sometimes enforce to decide her task without other opinions', 'needs logical thinking ability with rational wisdom'.

The best example of factor 3 is participant No. 1 (factor weight : 2.1093), who is a graduate from college with 4 years experience. She expressed her views for nurse leadership as "Characteristics of nurse leaders can come alive only based on loving mentality", "If one keeps

using her authorities, nurses under her will not have any freedom nor will they be able to show their ability."

Therefore, nurse manager needs active communications with supporting members in full of love for obtaining all members collaboration not for her capability or confidence. And also she need not be always required bright brain, rational and logical thought and independent and invincible will. For these reasons, factor 3 is named relationship consideration type.

4) Consensus views of leadership behaviors of nurse manager

Statements recognized among nurses that they felt important among related statements of three factors of nurse leaders mentioned above are as same as Table. 5.

<Table 5> Consensus statements among three factors

Item No	Statements	Z - score
28	Has to gave an ability to evaluate objectively nursing situation apart from her	1.46
30	Is matured with high education and cultivation	1.30
15	Must be a person to take responsibility for all problems in the organization	1.14
26	Must keep continuing to develop professional knowledge and various skills	1.05
32	Could guide a creative decision making	.84
5	Is not an expert on unique professional knowledge and skills	-1.23
13	Does not always be necessary an expert on interpersonal relationship skill	-1.49
23	Needs to have an attitude to accommodate previous instances to solve problems accordingly	-1.50
20	Must be cold with powerful authority	-1.82

As a result, most nurses recognize that the nurse manager, the expert of cultivated character with responsibility should keep self-developing and good relations with others for objective evaluating of nursing environment and settlement of all problems independently.

B. Subjective structure of head nurses for leader behaviors

1. The Formation of Q type

The 2 types occupy 72.1% of all variance and in specific, type 1-67.7%, and type 2-4.3% respectively, rather high correlation between 2

<Table 6> Factor weight and demographic characteristics

Type	Item no.	Factor weight	Age	Marital status	Education	Experience(year)
I	V.11	2.6908	40	M	MS	15
	V.5	2.4992	44	S	MS	20
	V.18	2.4158	36	M	MS	12
	V.10	2.1959	35	M	BS	10
	V.29	2.1137	37	S	MS	13
	V.23	2.0117	40	M	MS	17
	V.22	1.8003	39	M	MS	16
	V.12	1.7798	36	M	MS	12
	V.16	1.6129	33	M	BS	9
	V.2	1.5925	39	M	MS	18
	V.6	1.5127	33	M	BS	9
	V.13	1.5016	33	M	MS	9
	V.9	1.4225	34	M	MS	10
	V.8	1.2773	36	M	BS	12
	V.20	1.2126	38	M	MS	14
	V.27	1.2033	35	M	BS	12
	V.15	.9510	37	M	MS	13
V.28	.9265	43	M	MS	19	
II	V.19	2.6164	40	S	MS	16
	V.26	2.3532	37	S	MS	14
	V.21	1.5758	38	M	MS	14
	V.14	1.4384	36	S	MS	12
	V.7	1.2837	33	M	BS	9
	V.17	1.2201	37	M	MS	13
	V.3	1.1786	40	S	MS	16
	V.4	1.1113	39	M	MS	15
	V.24	1.0986	44	M	MS	15
	V.30	1.0610	32	S	MS	8
	V.25	1.0221	43	M	MS	18
	V.1	.8859	43	M	AD	18

types was found. Factor weight and demographic characteristics for participants were same as Table. 6.

2. Typological analysis of leader behaviors recognized by head nurses

1) Type I : Task pursuit leader type

Participants classified in the first type are 16 married and 12 university graduate or undergraduate in masters degree from the total of 11.

Refer to Table 7, most positively agreeable statements were as follows. The nurse manager 'needs to encourage her followers with capacious insight to achieve the goal' ($z=1.29$), must keep continuing to develop professional knowledge and

<Table 7> Array of Z-score and statements for type I

Item No	Statements	Z - score
17	Needs to encourage her followers with capacious insight to achieve the goal	1.29
26	Must keep continuing to develop professional knowledge and various skills	1.28
8	Needs to have an ability to solve any conflicts in her organization	1.22
4	Needs logical thinking ability with rational wisdom	1.19
28	Has to have an ability to evaluate objectively nursing situation apart from her	1.18
32	Could guide a creative decision making	1.13
21	Must be a person of position for strong leadership	1.06
12	Is not always treated as a respectable person in professional field	-1.07
3	Must not be necessary a higher degree if she is capable of	-1.08
5	Is not an expert on unique professional knowledge and skills	-1.31
13	Does not always be necessary an expert on interpersonal relationship skill	-1.39
19	Is not always needed an ability to control environment	-1.55
23	Needs to have an attitude to accommodate previous instances to solve problems accordingly	-1.62
27	May sometimes enforce to decide her task without other opinions	-1.78
20	Must be cold with powerful authority	-1.82

various skills ($z=1.28$), needs logical thinking ability with rational wisdom ($z=1.19$), has to have an ability to evaluate objectively nursing situation apart from her' ($z=1.18$).

Most disagreeable statements in type I were as follows. The nurse manager 'must be cold with powerful authority' ($z=-1.82$), 'may sometimes enforce to decide her task without other opinions' ($z=-1.78$), 'needs to have an attitude to accommodate previous instances to solve problems accordingly' ($z=-1.62$), 'must not be necessary a higher degree if she is capable of' ($z=-1.08$), 'is not always treated as a respectable person in professional field' ($z=-1.07$).

The characteristics of this type are that they recognize nurse leaders to be able to objectively assess the nursing situations and themselves, encourage her subordinates, and have ability to think logically for their own development.

The statements that show strongly negative characteristics are 'needs logical thinking ability with rational wisdom', and 'takes well care of

others and execute her job with plenty of love'. The other hand, the statement that shows strongly positively characteristics are 'needs to encourage her followers with capacious insight to achieve the goal'.

Therefore, type I feels that nurse leaders should be smart and able to think logically, excellent in resolving troubles of their organization, and be able to achieve the goals of the organization through encouragement and insights. But, ethics or loving mentality was not considered to be as important as others.

Participant No. 11 (factor weight : 2.6908), unmarried and with 15 years of experience, represented type I. She expressed her views for nurse leadership as "She should have strong responsibility with creative and critical thinking being able to continuously develop to make their organization active."

Nurse manager in type I should need to encourage all members and control its environment for fulfillment of the aim.

Therefore she must try to be a person of proper position and keep continuing self-developing for withdrawal any conflicts in the organization through proper rational thought. Therefore, this type has been named the task pursuit leader type.

2) Type II : Concord pursuit type

Participants classified in the second type area total of 12. Among them, 7 are unmarried and for academic background, 1 university graduate, 1 associate college graduate and the rest are currently or are graduates of masters degree.

<Table 8> Array of Z-score and statements for type II

Item No	Statements	Z - score
26	Must keep continuing to develop professional knowledge and various skills	1.38
24	Should have conclusive nursing ethics and sincerity	1.29
28	Has to have an ability to evaluate objectively nursing situation apart from her	1.23
14	Takes well care of others and execute her job with plenty of love	1.15
29	Needs to have affirmative and desirable nursing image	1.12
3	Must not be necessary a higher degree if she is capable of	-1.10
12	Is not always treated as a respectable person in professional field	-1.20
23	Needs to have an attitude to accommodate previous instances to solve problems accordingly	-1.24
19	Is not always needed an ability to control environment	-1.56
13	Does not always be necessary an expert on interpersonal relationship skill	-1.59
5	Is not an expert on unique professional knowledge and skills	-1.67
27	May sometimes enforce to decide her task without other opinions	-1.89
20	Must be cold with powerful authority	-1.92

Refer to Table 8 for most positive agreed statements for participants in this category, the nurse manager 'must keep continuing to develop professional knowledge and various skills' (z=1.38), 'should have conclusive nursing ethics and sincerity' (z=1.29), 'takes well care of others and execute her job with plenty of love' (z=1.15), 'needs to have affirmative and desirable nursing image' (z=1.12).

On the other hand, the statements positively disagreed for type II were as follows : The nurse manager 'must be cold with powerful authority' (z=-1.92), 'may sometimes enforce to decide her task without other opinions' (z=-1.89), 'is not an expert on unique professional knowledge and skills' (z=-1.67), 'does not always be necessary an expert on interpersonal

relationship skill' (z=-1.59).

The characteristics of this type of nurse leaders can be recognized to continuously develop themselves to acquire professional knowledge and skills while facing her affiliates lovingly with devotion and ethics, rather than turning down their opinions and using her authorities.

The statements that show strongly positive characteristics were : The nurse manger 'takes well care of others and execute her job with plenty of love', 'needs to have affirmative and desirable nursing image', and 'should have conclusive nursing ethics and sincerity'.

The statements that shows strongly negative characteristic compared to type I were 'needs logical thinking ability with rational wisdom'.

and 'needs to have an ability to solve any conflicts in her organization'.

Therefore, type II can be recognized to be nurse leaders who continuously develop themselves for their personal knowledge and skills, working with loving mentality and devotion to be able to think in other people's position, rather than solving problems of their organization by thinking logically and rationally.

The best example representing type II is participant No. 19 (factor weight : 2.6164), who is an unmarried head nurse with 16 years of experience, currently doing her masters degree. participant No. 19 expressed her views for nurse leadership as "Because the basic

concept of nursing is giving, one cannot but think in the place of others. You can't lead nurses if you don't do this. Because character of person changes, unless you are continuously positive, you cannot give decent love."

Nurse manager in type II should lead all members on desirable nursing image with perfect nursing ethics and sincerity for good relations with others. Therefore nurse manager should be required an ability to control nursing environment with plenty of love instead of only being an expert in logical and rational thought. For these reasons, type II were named to be concord pursuit type.

<Table 9> Consensus statements among two factors

Item No	Statements	Z - score
26	Must keep continuing to develop professional knowledge and various skills	1.33
28	Has to have an ability to evaluate objectively nursing situation apart from her	1.20
32	Could guide a creative decision making	1.04
17	Needs to encourage her followers with capacious insight to achieve the goal	.91
24	Should have conclusive nursing ethics and sincerity	.88
21	Must be a person of position for strong leadership	.83
3	Must not be necessary a higher degree if she is capable of	-1.09
12	Is not always treated as a respectable person in professional field	-1.13
23	Needs to have an attitude to accommodate previous instances to solve problems accordingly	-1.43
5	Is not an expert on unique professional knowledge and skills	-1.49
13	Does not always be necessary an expert on interpersonal relationship skill	-1.49
19	Is not always needed an ability to control environment	-1.56
27	May sometimes enforce to decide her task without other opinions	-1.84
20	Must be cold with powerful authority	-1.87

3) Consensus views of head nurses for nurse leaders

Common importance the both of these types recognize can be seen in Table 9.

The important thing is that nurse manager is an expert of full of knowledge and education,

should evaluate nursing environment objectively and solve all problems independently. Therefore the nurse manager could guide a creative decision making to all members through continuous self-developing instead of wielding her authority.

V. DISCUSSION

Nurses recognizing subjective structure for leader behaviors of nurse manager were analyzed to be 3 factors, and head nurses recognizing subjective structure were analyzed to be 2 types.

Mutual relationship of leadership behaviors perceived by staff nurses and head nurses are as following.

First, in the case staff nurses of the factor 1, nurse manager needs an ability to support and control all members for achievement of goal. Therefore she must become a person of positive position and leads the organization with confidence and desirable aim of nursing. But in this case it doesn't mean that she should carry on with love only.

The factor 1 compared to other factors, is shown to have a need for academic background with professional skills and knowledge and a status as a confident leader. This is supported in the study made by Murray et al, (1998). It was reported in the study of confirming the expectations of their colleagues for the characteristics of nurse leaders to be middle aged married women with plenty of clinical experience. It was also emphasized in the study of leadership characteristics of nurse leaders made by Taylor (1995) for nurse leaders to be able to present vision and achieve intimate relationship between people of all status. And leaders were also emphasized to give a chance to their affiliates in sharing this vision.

In the case of the factor 2, nurse manager needs to guide creative decision making through rational thought for proper execution of jobs in independence and inflexible will. Therefore she sometimes needs to push forward for fulfillment of the aim instead of encouraging members and controlling the environment. This compels nurse manager feel to keep self-developing for strong leadership. This is supported by the study of recognition of nurse leaders characteristics by

class of nurse leaders made by Hwang (1998), stating that objectivity and working ability to become more important as nurses reach higher levels in status.

The factor 3 is recognized that nurse manager needs active communications with supporting members in full of love for obtaining all members collaboration not for her capability or confidence. Therefore she need not be always required bright brain, rational and logical thought and independent and invincible will. This is supported by 10 roles of clinical leaders made by Christian & Norman (1988). Network maintenance, encouraging developments, managing changes in the organization, and team encouragement roles of clinical leaders were mentioned. Transactional leadership (Kim & Park, 1997) of sharing valuable resources with each other to achieve the goals of the organization are similar to this factor.

In the case of head nurses are as following.

The type I, which is the task pursuit type was recognized to be smart and able to think logically, excellent in resolving troubles of their organization, and be able to achieve the goals of the organization through encouragement and insights.

The type II, which is the concord pursuit type was recognized to have clear work ethics, work with a loving mentality, thinking in other people's position, and try to lead their affiliates with accord. It is thought to be similar to the study made by Taylor (1995), which emphasizes that leaders are ethical, respect others and always respect contribution of other people.

The consensus views of nurse leaders recognized by staff nurses are that nurse leaders should have professional skills and knowledge with character maturity. They should always be creative in solving problems without overusing their authorities and have good relationships with other people.

In relationship of perceived leader behaviors

between staff nurse and head nurse, leader behaviors, which is perceived by staff nurse are mainly factor of vision presentation, include factor of self-capability consideration, type of relationship consideration. Leader behaviors of head nurse are mainly task pursuit type, include concord pursuit leader type. Therefore, factor of vision presentation are involved in task pursuit leader type, involved concord pursuit leader type. On the other hand, factor of self-capability of staff nurse is related with task pursuit leader type of head nurse and type of relationship consideration staff nurse is related with concord pursuit leader type of head nurse.

There were little differences of nurse leader between staff nurses and head nurses. Staff nurses emphasize 'character maturity with adequate general knowledge and basic culture, while head nurses emphasize 'presenting direction through creative decision making'. Through this, staff nurses found character important in the role model of nurse leaders for nurse leaders.

It is thought to apply various approaching method for each type in finding the 'ideal' role model of nurse leaders.

VI. CONCLUSION & SUGGESTIONS

This study may conclude as follows. Nursing manager's leader behavior, expected by staff nurse are more complex and higher level which may combined with task pursuit leader type in concord pursuit leader of head nurse. Also according to Hersey(1977) and Blanchard theory, the effectiveness of leadership becomes to be larger as the accordance rate between the behaviors of nurse leaders and followers reaction increase. To achieve the staff nurse's demands on leadership behaviors and to increase the productivity as an outcome, leadership training program is necessary to educate a desirable leader behavior vision presentation.

Two suggestions have been made based on

the conclusion.

1. Studies on creating strategies in relation to development, management, selection of nurse leaders should be made based on this study.
2. There is a need for relative study of production and degree of similarity of leadership types based on this study.

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