

Servant Leadership Interventional Program and Its Influence on Job Crafting Among Head Nurses

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ABSTRACT

Background: Servant leadership is a style whereby the leader is first a servant, to serve others. The servant-leader shares knowledge and power by placing the needs of others first and creating an environment for followers' growth. **Aim of the study:** the study aimed to assess the effect of servant leadership training program on job crafting of head nurses. **Subjects and Methods: Research design:** A quasi-experimental research design was utilized in this study. **Setting:** The study was conducted at Zagazig University Hospitals, which include two sectors the Emergency sector and El-Salam sector **Subjects:** Convenience sample, All head nurses (n=100) who working in the above mentioned setting and they were divided randomly into two equal groups; study group and control group. **Tools of data collection** three tools were used for data collection (1) knowledge questionnaire test, which included head nurses' personal data and head nurses' knowledge test regarding Servant leadership (2) Servant leadership skills questionnaire. (3) Job crafting scale **Results:** There was a statistically significant difference in head nurses' knowledge and skills pre, post and follow up after applying Servant leadership training program. There was statistically significant relation between head nurses' knowledge and skills regarding Servant leadership and job crafting. **Conclusion:** The training program for head nurses was effective and improved their level of knowledge and skills also there was statistically significant relation between head nurses' knowledge and skills regarding Servant leadership and job crafting. **Recommendations:** A Servant leadership educational program is recommended to be recognized and implemented for all head nurses who in a management position in the nursing field in other hospitals. Hospital and nursing administrators should do their best for keeping and enhancing nurses' job crafting.

Keywords: Servant Leadership, Head nurses, job crafting.

INTRODUCTION

Servant leadership is a style whereby the leader is first a servant, to serve others. The servant-leader shares knowledge and power by placing the needs of others first and creating an environment for followers' growth. Nurse leaders may find themselves in situations to set aside their self-interest for the betterment of their followers. Recent research has strongly supported the servant leadership style as the most appropriate form of leadership for nursing (Maglione et al., 2021).

Servant leadership is defined as "excessive service to others, a holistic approach to work, fostering a feeling of togetherness, and the sharing of authority in decision-making". Servant leadership has several traits and features as paying attention, compassion, healing, consciousness, inducement, conceptualization, anticipation, stewardship, dedication to people's development and building a peaceful and well-developed community (Yasir et al., 2023).

The Servant leadership style has been proposed as a potential style to assist healthcare organizations in adapting to the ever-evolving work environment. Whether intentional or unintentional, a Servant leader demonstrates to team members that value others, and be receptive to new ideas and information. Each team member can learn and copy the good behavior of Servant leaders, and over time, the team can work together better. Servant leaders will improve the behavior of staff members; job crafting is done by their staff members to achieve common objectives, as nurses' job crafting enables staff to learn how to work together to mobilize resources. This implies that nurses have the freedom to determine the nature and process of their teamwork (Pradana & Suhariadi, 2020, Zhu et al., 2022).

Job crafting has been defined as employees' self-initiated adjustments to the task or the relational boundaries of their work that are intended to improve person-job fit. Furthermore, nurses' job crafting, as a group process, focused on what to craft and how to accomplish common objectives. Although theoretically similar to individual-level job crafting, nurses' job crafting is not just the mathematical sum of each nurses' job crafting behaviors. Job crafting has recently attracted academic interest due to its central role in healthcare organizations which is a critical potential for overcoming organizations challenges and path rapidly through changing circumstances for their survival and maintaining a professional work environment (Ding et al., 2020).

In addition, there are three types of job crafting: task crafting, relational crafting, and cognitive crafting. Task crafting involves altering the nature, quantity, content, or scope of tasks and work processes. While relational crafting refers to changes to the quality and/or quantity of social interactions at work, cognitive crafting refers to the changes to the way of one perceives the job. Besides, nurses' job crafting, as a dynamic negotiation between staff nurses, aids in the integration and updating of existing knowledge structures, as well as the mobilization of job resources to inspire a creative work environment (Carlucci et al., 2020).

Significance of the Study

Servant leadership focuses on the stabilization, growth and well-being of their staff, health organization, and communities to which they belong (Ebrahim, et al., 2024). Crafting of jobs enhances the employee-job relationship, which then leads to increased employee satisfaction and positive organizational consequences (Felder et al., 2024). Effective strong servant leadership is fundamental to several aspects in the organizational life which improves job crafting strength (Cummings, et al., 2020 & Gouda, et al., 2021). There are few international studies have focused on examination of the relation between Servant leadership and job crafting (Khan, et al., 2021)., but in Egypt there have been no studies implement training program regarding Servant leadership for head nurses and measure its effect on job crafting.

Through the researcher contacts with head nurses in Zagazig University Hospitals found that head nurses leaders don't apply servant leadership, job crafting in their different units, Therefore, it is very important to implement training program regarding servant leadership for head nurses to equip them with knowledge and skills about servant leadership and how to use servant leadership to increase job crafting.

Aim of the study:

The aim of the study was:

To assess the effect of servant leadership training program on job crafting of head nurses.

Research hypothesis:

- Head Nurses' knowledge and skills about servant leadership will be improved after implementation of training program.

- The job crafting level of Head nurses will be improved after implementation of training program.

Subjects and Methods:

Research design: A quasi-experimental design was used to achieve the aim of the present study.

Study Setting:

The study was conducted at Zagazig University Hospitals (academic hospitals), which include two sectors (The emergency sector and El-Salam sector) involving eight teaching hospitals. The total bed capacity of the hospitals is (2027 beds and 16 incubations).

Study Subjects:

Convenience sample, All head nurses (n=100) who working in the above mentioned setting and they were divided randomly into two equal groups; study group (50) and control group (50).

Sample size of head nurses (n=100) in the study setting.

Tools for data collection:

In order to fulfill the objectives of the study three tools were used to collect necessary data:

Tool 1: Servant leadership Knowledge questionnaire test (Pre / Post-Test): It consists of two parts as follows

Part 1: Personal characteristics of nurses, which included head nurses' age, gender, hospital name, educational qualification, years of experience, and attending previous training about servant leadership.

Part two: It was developed by the researcher based on review of related literature as (Avolio and Bass, 2004; Roberts & Mihai, 2005 and Mark, 2018). It included 68 questions divided into (37) question true or false questions and (31) multiple choice questions which included servant leadership definition, characteristics, skills, benefits and components.

Scoring system:

Responses of head nurses were scored (1) for correct answer and incorrect was scored (0). For each items of knowledge, the scored of this item were summed up and the total divided by the number of items, giving a mean score for the part. These scores were converted into percent score. Knowledge was considered:

- Satisfactory if percent score was 60% or more (41-68) points
- Unsatisfactory if less than 60% (0-40) points

Tool II: Servant leadership skills questionnaire

It was developed and observed by the investigator based on review of related literature as (Russell, 2016; Allen, 2019 and Mark, 2019) to assess head nurses' skills about servant leadership. It composed of 48 items about servant leadership skills

Scoring system:

Head nurses skills of servant leadership were observed as "done" which scored (1) and "not done" which scored (0). The scores of the items were summed up and the total divided by the number of the items, giving a mean score for the part. These scores were converted into a percent score. The skills were considered

- Adequate if the percent score was 60% or more (29-48) points
 - Inadequate if less than 60% (0-28)points

Tool III: Job crafting scale

It was developed by Tims et al., (2012) to measure job crafting level among nurses. It consists of 21 items grouped under four dimensions: structural job resources (5 items), social resources (5 items), hindering job demands (6 items) and challenge job demands (5 items).

Scoring system:

Nurses responses were measured on a five-point Likert scale ranging from 1 strongly disagree, 2 disagree, 3 Neutral, 4 agree,

5 strongly agree. The scores of each dimension were summed and the total divided by the total score of this dimension. The total scores for each dimension ranged from (5-25) except hindering job demands ranged from (6-30). These scores were multiplied by 100 to be converted into percent score. The total level of job crafting among nurses considered:

- Low job crafting if the score less than 50%.
- Moderate job crafting if the score range from 50% to 75%.
- High job crafting if the score more than 75%.

Content Validity and Reliability:

Validity:

The questionnaire was translated into Arabic, and then content and face validity were established by panel of five experts: all professors were from nursing administration department at the faculty of nursing, Zagazig University. Experts were requested to express their opinions and comments on the tool and provide any suggestions for any additions or omissions of items. According to their opinions all recommended modifications were performed by the researcher.

Reliability:

Three tools were tested for their reliability using Cronbach's alpha. The values were revealed as

Name of tool			Cronbach's alpha
Servant leadership questionnaire	Knowledge		0.70
Servant leadership skills questionnaire			0.8925
job crafting scale			0.82

Pilot study:

A pilot study was carried out on 10% of head nurses (10) to test the tools feasibility, understandability and to estimate the time consumed for filling in the forms. A brief explanation of the purpose of the study was provided to every participant in the pilot study, and then they were provided with a copy of the study tools. The time consumed in answering the questions was about 20-30 minutes for each tool. These head nurses were included in the main study sample. The necessary modifications were done according to the answers and comments made by head nurses.

Field work:

Field work of this study was executed in 2 months from the beginning of June 2024 to the end of July 2024. The researcher applied the training program for study group at clinical areas in zagazig university hospitals. The training program designed for this study has been implemented through 12 sessions. These sessions lasted for 24 hours; 9 hours theory, and 15 practical hours. It was difficult to take the whole number of head nurses in the study group at the same time, so the head nurses were divided into groups, all sessions were repeated to all groups until 50 head nurses completed the entire 24 hours of instructions.

The program consisted of two main parts, the first theoretical part covers knowledge about servant leadership such as; definitions of servant leadership, the nature of servant leadership, characteristics of servant leadership, elements of servant leadership, importance of servant leadership, purposes of servant leadership and general skills of servant leadership (communication skills, Listening skill, Empowerment skill, Stewardship skill, Persuasion skills, Motivation skills, Delegation skill, Team building skill, problem solving skill and Decision making skill).

The second part is practical in the form of giving situations for head nurses who are leaders in there clinical units. head nurses in each group are asked to read situation, the researcher assigned a group leader randomly to assist in distributing roles on head nurses per each group, then head nurses play their roles according to situation; head nurses play roles by rotation to learn how to deal according to assigned role.

At the end of each session, the researcher used group discussion to develop the appropriate skills of servant leadership of head nurses and to gain feedback. The researcher evaluated their servant leadership skills used in dealing with different situations by using observational checklist. The program was given on three days per week for each group about eight weeks. The researcher used various teaching methods to attract head nurses' attention and motivate them to participate such as lectures, group discussion, brainstorming, role play and situation. The teaching media included: power point, white board, video, and a copy of the program which covered theoretical and practical information about servant leadership.

Administration and Ethical consideration:

- An official letters obtained from the dean of faculty of nursing at Zagazig University to Chairman of board of directors at Zagazig University Hospitals to request permission and cooperation for conducting this study, then oral official permission from the nursing director of each hospital and from the head nurses of each unit after explaining the nature and the aim of the work. The study was approved by the Ethics Research Committee at the Faculty of Nursing; Zagazig University. The verbal explanation of the nature, purpose, and benefits of the study was performed by the researcher to head nurses included in the study sample. Oral and written consent were taken from subjects and reassured them about the confidentiality and anonymity of the study. They were informed about their right to refuse or withdraw from the study at any time without giving a reason.

Statistical Analysis:

All data were collected, tabulated and statistically analyzed using SPSS 20.0 for windows (SPSS Inc., Chicago, IL, USA 2011). Quantitative data were expressed as the mean \pm SD & median (range), and qualitative data were expressed as absolute frequencies (number) & relative frequencies (percentage). Paired test was used to compare between paired variable of normally distributed. Repeated measure anova was used to compare between multiple paired variable of normally distributed. Percent of categorical variables were compared using Chi-square test or Fisher Exact test. Pearson's correlation coefficient was calculated to assess relationship between various study variables, (+) sign indicate direct correlation & (-) sign indicate inverse correlation, also values near to 1 indicate strong correlation & values near 0 indicate weak correlation. All tests were two sided. p-value < 0.05 was considered statistically significant (S), and p-value \geq 0.05 was considered statistically insignificant (NS).

Results:

Table (1): shows personal characteristics of head nurses, it is clear from the table that slightly less than one half of head nurses in the study and control groups were in the age group 46 to 50 years old (44% & 46% respectively). All of head nurses in the study and control groups were females, had Bachelor degree in nursing, more than half of them had 22-26 years of experience (52% & 54% respectively). As well, the highest percentages of head nurses in the study and control groups worked at Internal medicine hospital and Outpatient clinics (28%, & 60% respectively). Regarding to head nurses' previous training, no one of them had attended previous training before this program about servant leadership.

Figure (1): displays knowledge levels of head nurses regarding servant leadership throughout the program phases in the study and control groups. It is clear from the figure that the highest percentage of head nurses had unsatisfactory knowledge level regarding servant leadership before program implementation in both study and control groups (92%, 96%, respectively). Conversely, immediately after program implementation all of head nurses in the study group had satisfactory level of knowledge about servant leadership (100%) compared to 4% of head nurses in control group. Additionally, three months after the program implementation, the most head nurses in the study group had satisfactory level of knowledge about servant leadership (98%) compared to 0% of head nurses in control group, so the program improved head nurses' knowledge regarding servant leadership. Hypothesis one accepted.

Figure (2): It can be observed from figure 2 the majority of head nurses had adequate level of skills regarding servant leadership in study group (86%), despite one half of head nurses had adequate level of skills and other half of them had inadequate level of skills in control group before the program implementation (50% & 50% respectively). While after the program implementation, 96% of head nurses in the study group had adequate level of skills regarding servant leadership compared to control group only 56% of them had adequate levels of skills. In addition, three months after program implementation 96% of head nurses in the study group had adequate levels of skills regarding servant leadership compared to control group only 52% of them had adequate level of skills. Hypothesis one accepted.

Table (2): demonstrates mean score of dimensions of head nurses' Job crafting throughout program phases in the study and control groups, it is clear from the table that mean score of all head nurses' Job crafting dimensions in the study group increased throughout program phases, with a highly statistically significant difference in their Job crafting dimensions in both pre post, and pre-follow up phases of the program at P-value= (0.000 & 0.000) respectively. On the other hand, there was a highly statistically significant difference between study and control groups in all Job crafting dimensions immediately after the program implementation and three months after program implementation in favor of study group, at P-value= (0.000 & 0.000) respectively.

Figure (3): displays that slightly more two thirds of head nurses had moderate level of Job crafting in study group (68%), despite slightly more two thirds of them had low level of Job crafting in control group before the program implementation (68%). While after the program implementation 96% of head nurses in the study group had high level of Job crafting compared to control group

(2%) of them had high levels of Job crafting. In addition, three months after program implementation 98% of head nurses in the study group had high levels of Job crafting compared to control group none of them had high levels Job crafting. Hypothesis two accepted.

Table (3): shows Correlation among head Nurses ' knowledge and Skills regarding Servant leadership and Job crafting throughout the program phases implementation in the study group. The current table shows there was statistically significant relation between Servant leadership's knowledge and Job crafting before program implementation at P-value= (0.001). In addition, there was statistically significant relation between Servant leadership's Skills and Job crafting before, after and three months after program implementation at P-value= (0.000, 0.000, 0.000) respectively.

Table 1: Personal and job characteristics of Head Nurses (n=100).

Personal characteristics	Study group		Control group		χ^2	P-value
	No	%	No	%		
Age in years						
40 to 45 year	16	32	9	18	1.57	0.814
46 to 50 year	22	44	23	46		
51 to 56 year	12	24	18	36		
Mean \pm SD	48.06 \pm 4.19		49.00 \pm 3.23			
Gender						
Male	0	0	0	0	–	–
Female	50	100	50	100		
Years of Experience						
16 to 21 year	11	22	10	20	6.60	0.158
22 to 26 year	26	52	27	54		
27 to 31 year	13	26	13	26		
Mean \pm SD	24.22 \pm 3.55		24.14 \pm 3.23			
Educational qualification						
Nursing Diploma	0	0	0	0	–	–
Nursing Technical Institute	0	0	0	0		
Bachelor	50	100	50	100		
Master	0	0	0	0		
Doctorate	0	0	0	0		
Hospital name						
Pediatric hospital	8	16	0	0	–	–
Internal medicine hospital	14	28	0	0		
Cardiac and Chest hospital	10	20	0	0		
Obstetrics and Gynecology hospital	5	10	0	0		
Economic hospital	13	26	0	0		
Accident hospital	0	0	7	14		
General Surgery hospital	0	0	13	26		
Outpatient hospital	0	0	30	60		
Have you ever attended any program on servant leadership?						
Yes	0	0	0	0	–	–
No	50	100	50	100		

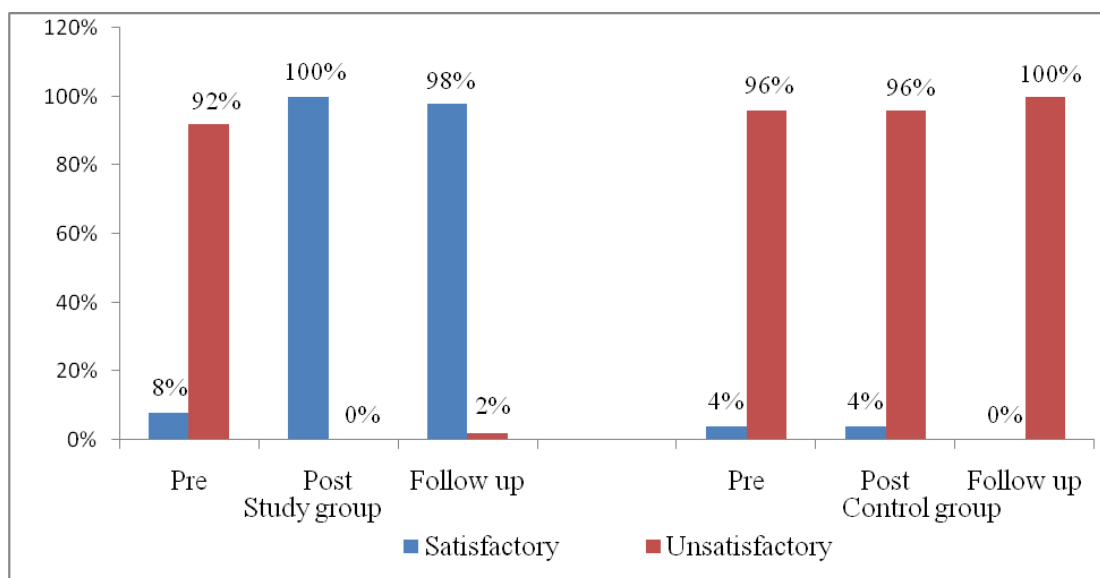


Figure (1): knowledge levels of Head Nurses regarding Servant leadership throughout the program phases in the study and control groups (n= 100)

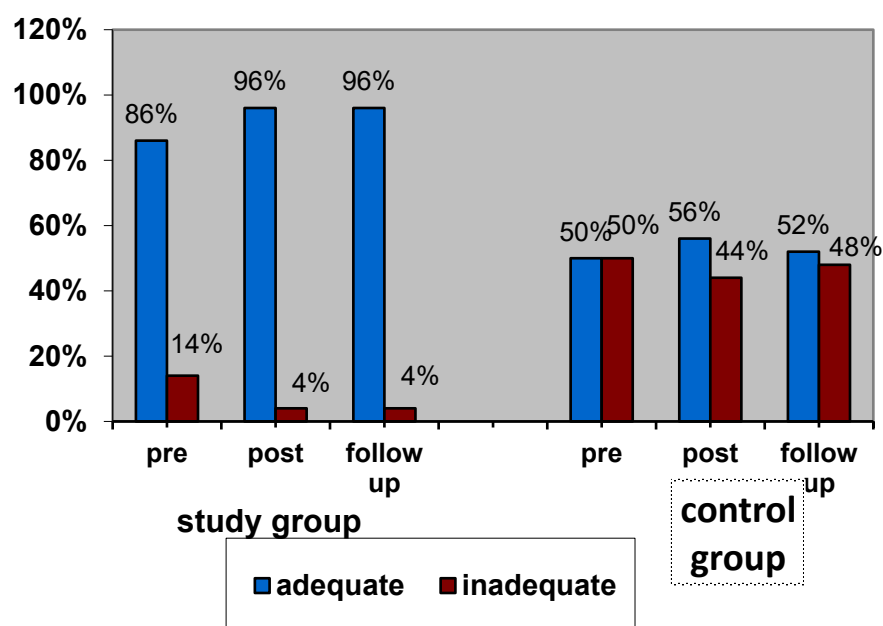


Figure (2): Skills' levels of Head Nurses regarding Servant leadership throughout the program phases in the study and control groups (n= 100)

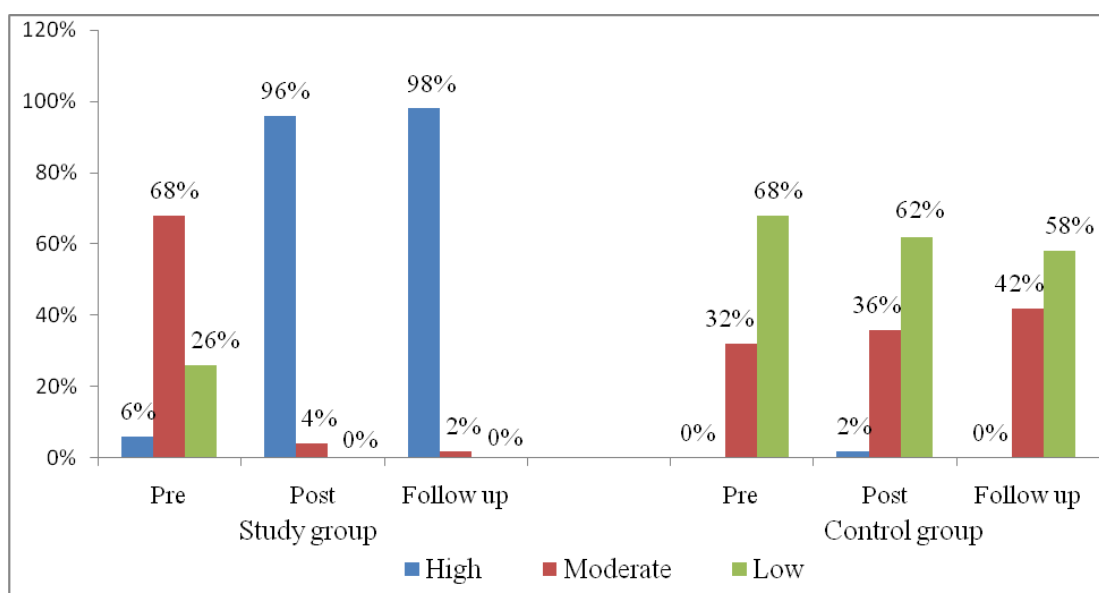


Figure (3): Job crafting ' levels of Head Nurses throughout the program phases in the study and control groups (n= 100)

Table (2): Mean score of dimensions of Job crafting among head nurses throughout program phases in the study and control groups (n=100)

Job crafting	Time	Study group	Control group	P-value
		Mean \pm SD	Mean \pm SD	
A-structural job resources	Pre	14.54 \pm 2.71	11.78 \pm 2.11	0.000**
	Post	21.66 \pm 1.86	12.30 \pm 2.39	0.000**
	Follow up	21.74 \pm 1.83	11.54 \pm 2.12	0.000**
P-value	Pre-post	0.000**	0.252	
	Pre-follow	0.000**	0.572	
B- social resources	Pre	16.82 \pm 3.53	14.30 \pm 2.64	0.000**
	Post	25.72 \pm 2.87	14.86 \pm 2.34	0.000**
	Follow up	26.04 \pm 2.56	14.54 \pm 2.75	0.000**
P-value	Pre-post	0.000**	0.264	
	Pre-follow	0.000**	0.657	
C- hindering job demands	Pre	13.50 \pm 3.29	11.30 \pm 2.48	0.000**
	Post	22.56 \pm 2.09	12.02 \pm 2.59	0.000**
	Follow up	22.04 \pm 2.16	11.88 \pm 2.57	0.000**
P-value	Pre-post	0.000**	0.159	
	Pre-follow	0.000**	0.253	
D- challenge job demands	Pre	13.88 \pm 2.66	11.30 \pm 2.38	0.000**
	Post	22.18 \pm 2.02	12.52 \pm 2.63	0.000**
	Follow up	22.36 \pm 2.28	11.88 \pm 2.33	0.000**
P-value	Pre-post	0.000**	0.017	
	Pre-follow	0.000**	0.221	

Table (3) Correlation among head Nurses ' knowledge and Skills regarding Servant leadership and Job crafting throughout the program phases implementation in the study group (n=50)

Items	Time	Job crafting					
		Pre		Post		Follow up	
		R	P-value	R	P-value	R	P-value
Servant leadership's Knowledge	Pre	0.474	0.001**	0.099	0.492	0.155	0.426
	Post	0.115	0.428	0.149	0.303	0.140	0.331
	Follow up	0.191	0.183	0.162	0.262	0.115	0.426
Servant leadership's Skills	Pre	0.688	0.000**	0.099	0.492	0.101	0.486
	Post	0.060	0.680	0.586	0.000**	0.025	0.862
	Follow up	0.153	0.288	0.044	0.759	0.690	0.000**

Discussion:

The complexity of high-quality health services is increasing, and health services are quickly changing. Quality leadership must inevitably deal with those complexities and changes. Leaders are not a passive organizational instrument; they must be able to convey the shared organizational goals to the employees. Servant leadership is very important style that focus on power sharing models of authority, prioritizing the needs of the team and encouraging collective decision-making which result in a positive environment that creates a sense of commitment by the staff nurses to their head nurses and organization and reduce work conflict which lead to goals achievement (*Padauleng et al., 2020 & Yasir and Jan, 2023*).

So, this study aimed to assess the effect of servant leadership training program on job crafting of head nurses through, (1) Assess head nurses' knowledge regarding servant leadership pre-and post-program implementation, (2) Measure head nurses' skills regarding servant leadership pre-and post-program implementation, (3) Identify job crafting level among head nurses before and after implementation of the program, and (4) Design, and implement servant leadership training program, examine its effect on job crafting of head nurses.

Regarding demographic characteristics of the participants, all of head nurses were female (100%), this due to women are more inclined to healthcare careers as a profession and due to actual percentage of them in hospitals. Also, more than one half of them had 22-26 years of experience (52% & 54% respectively), and slightly less than one half of them in the study and control groups were in the age group 46 to 50 years old (44% & 46% respectively). This indicates that zagazig University hospitals have financial issues and budgeting.

In congruence with these present study findings *Malak et al., (2022)*, who conducted a study about "Impact of practicing servant leadership style among Chief Nursing Officers (CNOs) in nursing organizations", mentioned that majority of studied nurses were females. Also *Faraz et al., (2023)*, who conducted a study about "How Does Servant Leadership Nurture Nurses' Job Embeddedness? Uncovering Sequential Mediation of Psychological Contract Fulfillment and Psychological Ownership" mentioned that the majority of studied nurses were females.

The current study revealed that head nurses had a satisfactory level of knowledge regarding servant leadership during the post and follow up training program phases than preprogram phase. Additionally, there were highly significant statistical differences regarding servant leadership knowledge during pre, post & follow up training program. These results might be due to the program was an advanced and new idea which stimulated head nurses' motivation to learn about servant leadership and engaging in servant leadership activities.

This finding was consistent with **Ma, (2022)** who conducted a study about "Perceived head nurses' servant leadership and knowledge sharing behavior of nurses in Kunming Medical University Hospitals" and reported that head nurses working in Kunming Medical University hospitals perceived a high level of overall servant leadership after training.

On the other hand, the present study was in disagreement with **Liao et al., (2021)** who conducted study about "A leader centric examination of servant leadership behaviors" " and reported that nurse managers should adopt servant leadership, develop relevant characteristics and be trained accordingly. Moreover, the present study was in disagreement with **Gao et al., (2023)** who conducted a study about " Avoiding the scenario of “The farmer and the snake”: the dark side of servant leadership and an intervention mechanism " and reported that leaders should acquire a greater awareness of the potential shortcomings produced by adopting a servant style of leadership.

The present study revealed that the majority of head nurses had adequate level of skills regarding servant leadership in study group (86%), despite one half of head nurses had adequate level of skills and other half of them had inadequate level of skills in control group before the program implementation (50% & 50% respectively). While after the program implementation, 96% of head nurses in the study group had adequate level of skills regarding servant leadership compared to control group only 56% of them had adequate levels of skills. In addition, three months after program implementation 96% of head nurses in the study group had adequate levels of skills regarding servant leadership compared to control group only 52% of them had adequate level of skills. Hypothesis one accepted.

These results might be due to the nursing administration department at the hospitals demonstrated the respect and care to head nurses in organizing this program with the aim to enhance their leadership's knowledge and skill this may exert a positive influence on them to act in the same way to their followers.

the current result was go on with **Michael, (2021)** who conducted a study about "Developing servant leadership and self-perception through a peer mentor program" and revealed that there was an impact on the participants' servant leadership skills, self-perception, and soft skills development through their participation in the yearlong program that had an initial challenge course training component.

On the other hand the present study was in disagreement with **Best, (2020)** who conducted a study to assess if there is a place for servant leadership in nursing and reported that nurse managers didn't have the ability to utilize their servant leadership skills and knowledge to positively influence global health.

The current study indicated that, there were highly statistical significant improvements of head nurses' job crafting level at immediate post and follow up program phases compared with preprogram phase. There were highly statistical significance differences throughout program phases.

From researcher point of view SL promotes nurses' JC probably because servant leaders cultivate a team environment that allows the nurses to be more active in crafting inspiring tasks for themselves. Additionally, head nurses who are confident about their abilities are more likely to maximize resourceful and challenging aspects of their jobs and constantly engage in job crafting activities to improve one or another aspect of the job to get that job done more easily and effectively in time. They perceive their jobs important and meaningful, so they may be intrinsically motivated to craft their jobs to improve work process and achieve a desired level of job performance. Head nurses can set challenging goals for their own work, seek and accept feedback, grow and improve continually, or may engage in more interactions with their staff. By doing so, head nurses may actually set good examples of positive job crafting behaviors for employees.

This result goes in the same line with previous study carried out by **Ferdik et al. (2025)** who studied “Testing the effects of a servant leadership intervention using a cluster randomized experiment.” he found in his study that after Servant leadership intervention implementation, there was high improvement in institutional cultures and employee job crafting behavior; As servant leader worked for the betterment of the employees.

Additionally, **Nurmalitasaria & Puspitarini, (2024)** who studied "Predictive Models for Nurses' The Influence of Servant Leadership on Work Engagement: Role of Meaningfulness of Work, Job Crafting, and Person-Job Fit " clarified that servant leadership intervention had positive impact on job crafting, and person-job fit. Also, **Mahendri et al. (2022)** who studied “The Effect of Servant Leadership on Innovative Work Behavior with Psychological Empowerment and Job Crafting as Intervening Variables”. He stated that Servant leadership improved employees' work crafting.

Regarding Correlation among Head Nurses ' knowledge and Skills regarding Servant leadership and Job crafting through program phases; The present study illustrated that, there was statistical significant Correlation among Head Nurses ' knowledge and Skills regarding Servant leadership and Job crafting at preprogram phase, while there was a highly statistical significant Correlation among Head Nurses ' knowledge and Skills regarding Servant leadership and Job crafting at immediate post and follow up program phases which indicated that, the program had a greater effect on improving head nurses' Job crafting throughout post and follow up phases.

From the researcher point of view this might be due to that Servant leaders prioritize the growth and well-being of their team members. In a nursing environment, this leadership style can empower nurses to take initiative and customize their roles to better fit their skills and interests. Additionally, Servant leaders focus on the personal development of their staff. This can motivate nurses to actively seek opportunities for job crafting, such as taking on new challenges or modifying their roles to align with their professional goals. Servant leadership seeks to empower employees by involving them in decision-making, seeking their opinions, and praising them for their changes. Inspired by such an empowering environment, employees are expected to be able to enjoy their craft.

This finding was agreed with **Galloway et al. (2023)** who studied “Through the Lens of Servant Leadership: African American Female Nurse Leaders’ Journey to Executive Status” found in his study that nurses with more years of experience had integrated into servant leadership positions fast furthermore, clinical skills, work ethic, positional alignment, and leadership characteristics were the sole factors in advancement. Moreover, the current findings agreed with **Angtud et al. (2023)** who studied “Servant Leadership Practices and their Effects on School Climate” found in his study that there was a relationship between studied nurses’ personal characteristics and their servant leadership skills level.

On the other hand, the current findings not agreed with **Murphy et al. (2020)** who studied “The leadership baseline: Assessing servant leadership and leadership self-efficacy in first-year health professions students” found in his study that women do not make effective leaders, and females are less confident about their leadership capabilities.

Conclusion:

Based on the study findings about the effect of servant leadership training program on job crafting of head nurses; It was concluded that, the training program for head nurses was effective and improved their level of servant leadership’s knowledge and skill. Furthermore, job crafting’s level of head nurses improved. Additionally, there was statistically significant positive correlation among head nurses' servant leadership’s knowledge and skills, their job crafting.

Recommendation:

- Nurse Manager needs to motivate head nurses to attend a certified training courses regarding servant leadership as a requirement for head nurses' promotion.
- Periodical assessment of head nurses' knowledge to identify subjects and areas to be covered in education courses of training to improve their servant leadership skills.
- Creating a supportive environment that fosters head nurses' independence and encourages them to craft their job.
- Introduce reward programs that motivate head nurses for job crafting.
- Nurse Manager needs to allow head nurses to be oriented that servant leadership responsibilities are more important than entitlement of the position.
- Improve their skills in servant leadership and job crafting, and give due care to improve their abilities in application.

How to cite this article: Aya Ismail Sabry Abd El-Salam, Fatma Gouda Metwally, Alia Ibrahim Mohamed (2024). Servant Leadership Interventional Program and Its Influence on Job Crafting Among Head Nurses, Vol. 14, No. 3, 2024, 709-720.

Source of support: None.

Conflict of interest: Nil.

Accepted: 26.06.2024 **Received** 03.06.2024

Published : 30.06.2024

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