

Leadership behaviors impact on the work environment and sick leave

“Leadership and sick leave: A study of leadership behaviors impact on the work environment and sick leave”

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Abstract

Background/Purpose: To explore what associations are described, and the impact of, leadership behaviors on sick leave in modern research literature. The importance of a good leadership to prevent sick leave is a promising, under researched, and complicated issue in need of considerably more attention. The reasons behind sick leave are also numerous and diverse. To make it clear, the following explanatory models are used: 1) *The Effort-Reward Imbalance model* (Siegrist, 1996), 2) *The job Demand-Control model* (Karasek & Theorell, 1990) and 3) *The Demands-Resources model* (Demerouti, Bakker, Nachreiner & Schaufeli (2001).

Methodology: The study employed literature reviewing as methodology. After the initial literature search, it was clear that research on the topic of leadership behaviors and sick leave combined, remains fragmented. The author aims to map out these research gaps for future research. Literature reviews play an imperative role as a foundation for all research. In a similar vein, this thesis aim is to make an overview of what has been researched to uncover causal connections.

Key Findings: Findings are based on seven literature studies conducted in Northern Europe. The studies examine sick leave and respectively relationship-oriented leadership, health-promoting leadership, the psychosocial work environment, psychosocial and mechanical effects, burnout, and job engagement. Findings supports previous research on the topic and demonstrate the importance of acknowledging associations between the leadership and sick leave. The aim is to contribute to improved performance, well-being, good health, and lower sick leave levels in the future. The most decisive finding claims that carrying the correct leadership behavior and traits, is of great importance for employees' motivation to work. Especially when demands at work are high.

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Research limitations: The time span of the research articles can be considered as a limitation. Leadership behaviors, rules and legislations may have changed, and will continue to change in the future. Behaviors, rules and legislations also differ within each country. Moreover, the authors focus was on one factor (leaders behavior) that affects sick leave. To explain the maximum possible measure of the variability in sick leave, it would be best to include several influencing factors.

Key Words: Leadership behavior, work environment, sick leave, well-being

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Introduction

This thesis topic is leadership behavior and sick leave. The overall aim is to examine to which extent leaders behavior influence the work environment and sick leave within different organizations.

1.1 The story behind choice of topic

In 2011, the author of this thesis turned 15 years old and started a new job as a receptionist and gym instructor at a local gym. In the beginning, the work environment was good, and the leadership and employees got along well. Nevertheless, after a few months, the leadership changed tasks in her job description without any warning. They removed her gym classes and demanded her to start cleaning bathrooms/wardrobes and do more advanced paperwork. As a result, the workload both changed and increased, but she received no training. She now felt very uncomfortable. She had some work experience from other organizations, so she knew this feeling was wrong. Thereby, she and her mother browsed the Working Environment Act to gather evidence and make sure she had a solid case, which she had. She then went to the leadership and asked to schedule a meeting.

She was scared to tell the CEO, who was a 53-year-old strict man, that what he did was wrong. Throughout the meeting there was a lot of emotions and despair coming from her side, but she was proud that she managed to address her point of view. When she was done, the CEO asked if she had underestimated the job, or if she was simply just too young and dumb to understand how business works. He also came with accusations and pointed out minor mistakes she had made. Further, he stated that it was his right as CEO to do what he felt was best for the gym. She was left speechless and tried to look the other way for a while.

However, it was obvious that the CEO was unhappy with her. The communication faded, and

he overlooked her presence. She felt pressured, unwanted, and dread going to work. She therefore went to the doctor and was reported sick. However, his behavior and comments made such a strong impression she could not stand the thought of going back. She therefore resigned from her position before ever going back.

In 2019, she enrolled at the university of Stavanger and started studying leadership behavior. Thoughts around her experience at the gym then started arousing. She wanted to delve into the employment relationship that ended with sick leave and resignation. Had she done anything wrong? Or was it due to lack of trust or dialogue? Was there an imbalance between demands and resources, or between effort and rewards? Was it a bad match between the leadership behavior and the situation she was in? or was it simply the lack of social support from the leader that was decisive? Either way, it prompted her curiosity about leadership behavior's impact on the work environment and sick leave.

1.2 Background research

According to SSB, numbers on sick leave has been rather stable the last decade with approximately 6.0% including both genders (Statistisk Sentralbyrå, 2021). Though, there was an exception around the outbreak of COVID-19 which resulted in Norway reaching its highest sick leave since 2010 (Bruer-Skarsbø, 2020).

Reducing sick leave has always been considered important from both a societal-, a business-, and an individual perspective. At the Norwegian governments webpage, it is stated that full employment is a highly prioritized goal and that the workforce is our most important resource. This is because a strong and effective workforce is a prerequisite for value creation and welfare, which in turn is crucial to maintain and further develop the Norwegian welfare state

(Regjeringa, 2017). Besides being a huge cost for the society, sick leave also entails vast amounts of costs for each individual company. In 2013, SINTEF calculated that one week of sick leave (five working days) costs Norwegian companies an average of NOK 13,000 in terms of lost productivity and increased costs (SINTEF, 2013). SINTEF also state that sick leave costs Norwegian municipalities NOK11.5 billion annually (Lien, 2016). In addition, sick leave provides extra work for leaders in terms of sick leave follow-up, hiring substitutes and strain on companies remaining employees. According to NHO (2017), these numbers continue to increase, and in 2020 one week of sick leave costed companies approximately 17,000 NOK.

Contrastingly, sick leave comes with a cost for the people behind the numbers. Paid work is considered important for securing income and welfare, it contracts poverty and is an important part of peoples social identity. Working means that one has to engage in social participation, and it acquires that the day has structure to it, which is considered important for peoples mental health (Regjeringa, 2017). A study of social reasons behind sick leave amongst men and women with mental illness was also conducted in 2012 whereas findings claimed that sick leave was associated with shame, stigma, and social withdrawal (Batt-Rawden & Tellnes, 2012).

Even though utmost cases of sick leave are caused by illness that makes it medically unsound to work, some studies show a significant proportion of sick leave being related to illness caused by working conditions (STAMI, 2021). As a bolster to this claim, a SINTEF report from 2010 and the Living Conditions Survey revealed that 39% of the respondents with work absence of more than fourteen days believe that the absence was caused by conditions at work that led to health problems (Ose, 2010). Looking closely at which diagnoses generates the

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absence in Norway, musculoskeletal disorder and mild mental disorder generates roughly 40% and 20% of the absence (NAV, 2021). Figures from the same report also state that approximately 390.000 people in employment claims that the ailments are wholly or partially due to work. In a similar vein, mild mental disorder is reported most frequently caused by work-related stress, and around half of the employees considered work-related stress to be common in their workplace (Arbeidstilsynet, 2021). Based on these facts, it can be assumed that the prevention potential for illness caused by the psychosocial work environment is considerable.

The author focusses on organization and leadership research to find its impact on sick leave. Research on leadership must strive for increased impact, and the attention must be drawn towards the greatest challenges such as the psychosocial work environment and employees well-being. It has been found that leaders are of great importance to their organization, and their behavior has a substantial impact on employees (for example Ayalon, Walumbwa & Weber, 2009). Research on leadership has however overlooked employee's health and well-being all for performance (Grant, Christiansson & Price, 2007). In a similar vein, research on the associations between leadership and performance tend to exclude employees well-being. In best case, it has been used as a mediator to describe the associations between leadership and performance (Montano, Reeske, Franke & Hüffmeier, 2017).

To recapitulate, the majority of research on leadership have not taken employees well-being and health seriously. As a result, peoples understanding of leadership behavior and its impact on employees is considerably underdeveloped and is too focused. Studies that examines leadership behaviors impact on employees well-being, yonder job satisfaction, only focuses on limited characteristics of and applies theories primarily intended to improve employees

performance (Montano, Reeske, Franke & Hüffmeier, 2017).

1.3 Research question

«What does research literature discuss on the topic of leaderships impact on the work environment and sick leave?»

To address this research question, this thesis applied the methodological approach of literature reviewing. Reason is that it suits broad research statements and extensive research questions. To ensure that what is emphasized in the studies applies to a relatively similar time period in relation to management trends, rules, and laws, the chosen research studies are earliest published in 2009 and not later than 2017. The author is aware that things might have changed since 2009 but came across seven research studies that were peer-reviewed and fulfilled all additional requirements.

The thesis' theoretical choices are grounded in the fact that an effective leader focus on the organizations performance, and employees health and well-being (Martinsen, 2019). This means that a good leader sees the organization, its surroundings and also manages to fulfill the needs of the individual employee. Traditionally, a leader's behavior has been identified in terms of what he is concerned with and oriented towards (i.e. being task- or relationship-oriented), to which extent he involve the employees when making decisions (i.e. authoritarian or democratic), and how visible he is (i.e. charismatic or restrained). Traditionally, research on leadership also examined what type of leadership behavior was the most effective. For example, whether a leader who focus on tasks is more effective than a leader who focus on the relationship with its employees. To put in concisely, traits and behaviors have traditionally been studied to discover which way was the best to lead, as if leaders must choose one way or

the other to succeed. This research thus ruled out that a combination of behaviors and orientations could be most beneficial (Kirkhaug, 2015).

According to Prentice (2004) one must understand the organization in order to understand what leadership entails, and leadership is not easy. The modern society is characterized by unpredictability, increasingly fierce competition and increasing requirements regarding efficiency (NHO, 2021). In addition, Kirkhaug (2015) emphasizes that it is important to understand leadership as a diverse, complex, paradoxical, and situational function that constantly has to adapt to change in order to be effective. Leaders are constantly exposed to risk and need to be consistently responsible managing the risks. While communicating may not necessarily be hard, connecting with people one is leading might be hard. He further states that organizational conditions affect the leadership and gives the leader both opportunities and challenges. To give an example, bureaucracies and expert organizations are examples of organizations that make direct leadership superfluous, while loose and flexible organizations such as different groups and contractor organizations requires a more visible leader who manages to cope with risks and uncertainties. Based on this understanding, it can be assumed that a leader who is capable of adapting to various situations is likely to succeed.

In this thesis, the research scope includes both public, bureaucratic companies and private, more flexible companies. Both big and small companies are represented. Additionally, the work environment and social climate is mapped out. The aim is to investigate whether there are any clear differences regarding the connections between leadership and sick leave within these different contexts, and whether the connections has anything to do with employees well-being, efficiency, and sick leave.

1.3 Dissertation outline

Chapter two, which is the literature review, elaborates on situational leadership theory, organizational conditions every leader must comply with, and an explanation of sick leave based on three well-known explanatory models. The author's personal assumptions regarding discoveries are also presented. Chapter three is about methodology and discusses literary review as research approach, how to critically analyze information sources and measures for quality control. Chapter four includes all selected articles, as well as a detailed presentation of one of these articles. Chapter five includes the analysis of the research whereas chapter six provides a summary, conclusion, and future research suggestions on the topic.

Chapter 2: Literature Review

2.1 Leadership and Organization

The modern approach to leadership argues that leaders should manage to focus on their employees, the entire organization and all of its stakeholders. Thereby, it is important that a leader can adapt easily, and be flexible (Martinsen & Glasø, 2014). This situational approach to leadership also states that a leader who follows these guidelines and is able to adapt quickly, is likely to succeed. Through this thesis, a successful leader should thus be able to assess situations that arise, and continuously assess employees' needs in order to provide guidance, help and follow-ups (Vroom & Jago, 1988; House, 1971).

2.1.1 The dynamics of leadership

According to Kirkhaug (2015), leaders face several challenges in relation to complex, paradoxical, and situational surroundings in the work environment. Kirkhaug (2015) also states that traditional leadership literature lacks evidence and thorough explanations of an often chaotic and unpredictable life of a leader. However, Martinsen (2019) states that

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becoming a good leader lies in each leaders capability of being extremely effective and adapting his behavior to the job situation, the situation the employees are in, and the organizations context and environment. The overall goal of a leader is thus efficiency, alongside employees well-being and health.

The modern business climate complicates leadership. People expect leaders to know everything, be everywhere and do everything – simultaneously. However, according to Church (2014), wise leaders know they do not know everything that goes on within an organization. Reeves and Deimler (2011) further claims that the reason that leaders cannot know everything is because we are living in an era of instability and risk where both people, processes, and the environment never is fully predictable. Information may not always be accessible, some situations may not always be easy to interpret correctly, and both conflicts and conflicts of interest arises. Good leaders know that deciding what *not* to do is as important as deciding that to do. Kase (2010) state that leaders sometimes have to opt out something that is desirable or choose between two bad alternatives or keep in mind the need for order and regularity over the need for freedom and creativity. Besides this, a leader copes with huge amounts of uncertainty in regard to the actual leadership role, tasks, and work processes. Thus, it can be argued that there is no particular way of leading that is *the right one* for all situations that occurs within an organization. The leader must adapt, and try to make as few interpretive errors as possible, obtain the best possible information and overview, and manage situations as they arise over time (Kase, 2010).

In order to interpret leadership in practice and explore whether or not leadership behavior has an impact on the work environment and sick leave, it is necessary to separate and categorize different types of leadership behavior. Below this paragraph Figure 1 illustrates all elements

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of professional leadership according to Kirkhaug (2015). The aim of separating and categorizing the elements of leadership behavior is that one can see what goes on when leadership is practiced in terms of in example what tools are used, what orientation leader focus on, which tasks that are taken care of, and where the leader puts his focus. In order to explain what goes on when leadership is practiced, key elements of traits (personal traits), trust and power are also included.

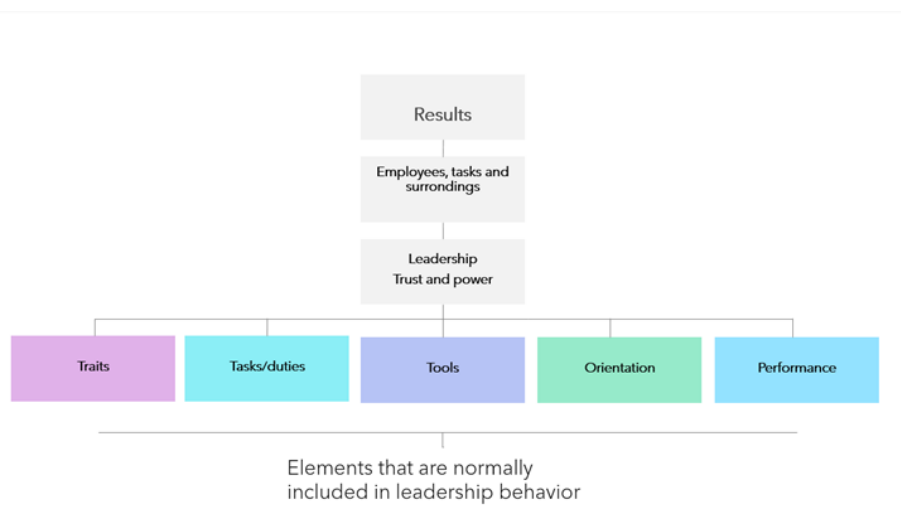


Figure 1: *Elements, conditions, and goals of leadership* (Kirkhaug, 2015)

2.1.2 Leadership in practice

To research whether or not leadership has an impact on the work environment and sick leave, a detailed review on how leadership is practiced follows. This is carried out through a detailed description of Figure 1. It is an explanation of how the choices that a leader makes, affects his behavior, which further affects the employees. Organizational conditions that affects the leadership is also mapped out later on, in chapter 2.

Responsibilities and duties

Depending on the structure of an organization, leaders responsibility entails ensuring that the organization has a clear vision and achievable goals, to create a strategy, align the purpose of

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employees and the purpose of the organization and to make sure the organization does not exceed its budget. Besides this, a leader should set standards for the operation and ensure that it is appropriately organized. This implies deciding which values are important in order to maintain a desirable organizational culture and a good work environment. Additionally, it can involve knowing how the organization should be organized like for example hierarchy or groups, choosing the right technology and competence, or following the right set of laws and rules (Kirkhaug, 2015).

As a part of a leaders daily routine, he has to collaborate with the employees to solve various tasks. In order to do so, the leader must communicate with employee, distribute task, and always remember to cultivate a positive attitude, motivate, and provide social support. Besides, the leader is responsible for solving conflicts, and ensuring that employees go through a learning and development process. According to Tengblad (2012), leader who practice this type of leadership and has direct influence and close social interaction with the employees has a supervisor role.

Leaders must continuously ensure that the organizations desired results are more or less achieved. This is because the organizations result also functions as a measure for the effect of how each task and duty is solved. These results can further be measured through customer satisfaction, financial returns, political goals, and compliance with the budget (Kirkhaug, 2015). In regard to this thesis, an important point will also be that results of leadership behavior can be measured through employees well-being or sick leave.

In reference to the theory above, the author expects that a leader who establish good ground for communication, distributes tasks in a way that is perceived as fair, and motivates, will

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achieve efficiency, well-being and low levels of sick leave among employees. Moreover, if the leader manages to resolve conflicts, and makes the employees feel as if they are learning and developing through their work, it is also expected to find fewer cases of sick leave.

Tools

A leader's legitimate power usually derives when he has a position of power, but it also depends on what tools he has available. Traditionally, leaders have had tools such as goals, visions, rules, frameworks, plans, control, values, and rewards and punishments. The organization's context is also a tool for the leadership. The regulations in a public organization will, for example, be able to function as a tool and an aid to acting in the same way in similar situations.

Based on these facts, the author expects to find that a leader who manages to match tasks and duties with the tools he has at his disposal, will achieve respect and necessary power, and thus achieve greater efficiency, well-being and a lower sick leave among employees.

Orientation

The majority of people will note that the well-being of the team, and effectively achieving the organization's objectives, are both vital parts and equally important to the organization.

However, what leaders think are important often depends on personal interests. Along with personal interests, passions, competence, industry-specific requirements, and the specific job situation determine which orientation a leader chooses. Task-oriented leaders focus on getting the work done, whilst people-oriented leaders emphasize the development and involvement of their team in a higher degree. People-oriented leadership involves creating a close social relationship between the leader and employees. Further, change- and strategy-oriented

leaders are concerned with change, and often emphasizes the purpose of the organization. The leader is happy to encourage innovation, creativity, and entrepreneurship, and is concerned with developing flexible employees who wants to change and learn from the job (Kirkhaug, 2015).

Based on this, the author expects to find that a leader who is flexible enough to adapt his orientation to tasks, the relationship with the employees, or towards change, will achieve efficiency, higher well-being, and low sick leave among the employees.

Leadership performance

Leadership performance is an expression of how a leader behaves when tasks are solved, and tools are used. To demonstrate, an authoritarian leader can sometimes be perceived as controlling and oppressive, but in a critical situation, an authoritarian leader can be perceived as a supportive leader. A democratic leader however, delegates and invites employees to participate in the formulation of goals and methods, information is shared, and employees have a higher degree of autonomy. A restrained leader behaves calmly and only intervenes when rules or values are broken, when goals are not reached, or on request. When employees themselves have control over planning, organizing, and execution (professional employees), a restrained leader can be perceived as beneficial, and a dominant leader would just be standing in the way. Democratic behavior can also be perceived as appreciative when the employees are professional and independent. If the employees' qualifications are lower, like for example an employee who just started a job, a leader with an instructive and guiding behavior will be perceived as supportive. Lastly, a charismatic leader, is a leader who often appears exemplary, inspiring, and emotional, and can thus be able to motivate employees when major changes are to be made (Kirkhaug, 2015).

Based on this, the author expects to find that a leader who manages to adapt his behavior according to the tasks that are being solved and also the situation the employees are in, will achieve efficiency, well-being and a low sick leave among the employees.

Traits

In addition to the elements of leadership behavior, trait theories have traditionally focused on whether leaders have special qualities, capacities, and skills (traits) that individuals who are not leaders do not carry. The purpose was to find which features were desirable to increase leaders efficiency. Trait theories state that leaders who have special qualities, such as consideration, discretion, communicative openness, behavioral consistency, and integrity, can lead any organization. However, new trait studies are more likely to state that traits, capacities, and skills can be taught (Kirkhaug, 2015). Different situations require different behavior according to the situational approach. Whether the flexibility that is required of a leader today, requires qualities such as consideration, communicative openness (dialogue), integrity, and behavioral consistency, can neither be confirmed nor denied in leadership theory. Thus, the author has chosen to investigate whether these leadership qualities are related to sick leave.

Based on these facts, the author expects that leadership qualities such as consideration, discretion, communicative openness (dialogue), behavioral consistency and integrity are all qualities that can be associated with high levels of efficiency, well-being, and low sick leave among employees.

Trust and power

Generally, leadership power or legitimate power, arises from having a position of power in an organization, like for example being the boss or another important role within a leadership team. However, a leader can give an employee more responsibility or power if the leader trusts the employee. Trust is the foundation of leadership, which is also the foundation of power. A project leader's power is usually limited to functional authority, and no formal power. A project leader can however still gain trust through his or her personal qualifications and close social contact. In this way, the project leader will be given power by the employees (Kirkhaug, 2015). Since trust is a key element in leadership, leaders must know the conditions for gaining trust, and for trust to exist between leaders and employees, trust usually has to be present over time. The leader has to trust that the employees do what has been agreed upon, and the fact that the leader has behavioral consistency means that the leader acts as expected of the employees. Thus, there is a compliance between attitude and behavior. Employees must trust that they are within a safe work environment. Achieving trust is the responsibility of both parties, but the previously mentioned leadership qualities such as consideration, discretion, integrity, and behavioral consistency, may be what is precisely crucial to achieve this trust (Kirkhaug, 2015). If the leader succeeds in gaining trust, and thereby power, this can be a good breeding ground for job motivation, security, and good and open communication. When trust is present in the workplace, the leader may experience that the employees do more than what is stipulated in the employee's contract. This "extra role behavior" can also be classified as a confirmation of a good working environment, and good well-being and health.

Based on these facts, the author expects that when trust is present between the leader and the employees, extra role behavior, good communication, and a good working environment are achieved. Thus, it is expected that employees are more likely to feel both appreciated and needed which in turn results in employees taking ownership of their job and seeing what

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needs to be done. Also, the author assumes it decreases sick leave.

2.1.3 Summary

Based on theory from the previous section, it can be assumed that a leader who adapts his behavior to the situation that arises, is likely to experience efficiency and employee satisfaction. Trust is also told to be a key element for leadership power, along with loyalty from employees and customers, motivation, open and honest communication, security and “the extra role behavior” (Kirkhaug, 2015). Whether a leader success depends on certain personality traits such as consideration, discretion, integrity, behavioral consistency, and communicative openness, are also examined in this thesis.

2.1.4 Organizational conditions

To achieve efficiency, well-being, and low sick leave among employees, a leader has to take the organizational form, the size, the level of professionalism among employees, and the culture that prevails in the organization into account. This context affects the leadership in addition to all situational factors. The context influences which tasks the leadership prioritizes, which tools the leadership use, which behavior and what orientation is chosen (Einarsen, Martinsen & Skogstad, 2017).).

Organizational form

The hierarchy is particularly effective when surroundings are stable and foreseeable. Leaders within a hierarchically structured organization usually tends to focus on goals, visions, budgets, and strategies, as well as corrections. Leaders are also assumed to be less concerned with processes such as guiding, coordination, motivation, and solving conflicts. According to

Kirkhaug (2015), power relations and responsibilities are clear in a hierarchy, and thus, these leaders can act both centrally and authoritarian, democratic, and delegating. A flat structure normally divides into two levels, one strategic and one executive level. Some municipalities practice this model, meaning that the leadership keep their focus on goals, visions, budgets, and strategies. However, some observations indicate that the strategic leadership in municipalities has the most focus on control and correction. Leaders in such organizations often use often use the power of reward to gain trust, and an authoritarian behavior may be natural as the leader may fear losing control. A democratic behavior can also be natural because the model requires a large degree of self-control (Kirkhaug, 2015, p.126 -127). The most common form of hierarchy is bureaucracy, which is associated with division of labor, specialization, case leadership, rules, laws, procedures, case processing and value neutrality.

Based on this, it is expected that leaders in public bureaucracy to use the power of reward to gain trust. If leaders manage to create a balance between work effort and rewards among employees, this will result in efficiency, well-being, and a low sick leave.

Organization size

Traditionally, big organizations have been considered more efficient than small ones because they can take advantage of economies of scale. Small businesses have been considered more flexible as they can adapt to changes faster. Leadership in larger organizations concentrates usually concentrates on the organizations direction, ambitions, and standards. Making sure that goals have been achieved and budgets not exceeded are also important leadership tasks in larger organizations. In smaller organizations, the leader is much closer to his employees, and can therefore concentrate on distributing tasks, motivate, focus on having a good dialogue, resolve conflicts and be socially support the employees. In practice, power in larger

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organizations will be based on formal agreements on work effort and remuneration. In smaller organizations, the authority of the leadership can be undermined, and thereby, the power of reward could be naturally in this situation.

Based on these findings, it is expected that leaders in small organizations concentrates on distributing tasks, motivating, building a good dialogue, resolving conflicts and being a social support for the employees. This type of leadership behavior can lead to efficiency, well-being, and low sick leave among employees. It is however expected to find that such leadership behavior will be a greater challenge in a larger organization than a smaller one.

Apprenticeship and certification act

Today, people increasingly see the significance of higher academic education, apprenticeship and other types of professionalization (Forskningsrådet, 2020). Professional employees tend to perceive their leader more as a service personnel and facilitator for the work activity and will normally require the leader to delegate tasks and responsibilities. This facilitates a democratic leadership performance. A higher degree of self-management can also prompt a leader to act reluctant and make himself available when needed. Leadership often uses goals and visions as leadership tools, and tasks such as coordination and conflict are demanded in order to achieve good collaboration between the professionals (Kirkhaug, 2015, 143-145).

Based on this, the author expects that a delegating and service-minded leadership behavior may be necessary to retain professional employees, achieve higher efficiency, well-being, and a low sick leave rate.

The organizational culture

An organizational culture consists of shared principles, expectations, and practices, that guide and inform all employees with a unified direction. It also influences how the organization is perceived externally. Kirkhaug (2015, p.152) defines organizational culture as a pattern of perceptions of what is right and wrong, important, and unimportant, effective, and ineffective among key actions within the organization. This means that whenever the culture is perceived as strong and unified, the leadership can act democratic and delegative. This only happens whenever a leader has great confidence in the employees, and thus, expects loyalty and shared vision and goals. To make changes in an unhealthy or unwanted organizational culture is a demanding task for leaders, and leaders must be clear on vision and goals, and be willing to work hard to change the existing values in the organization.

Based on the facts above, the author has chosen to characterize a strong and unified organizational culture as a supportive and desired culture. Whenever this culture is established, and employees receives social support from both colleagues and the leadership, there is a chance to experience higher motivation and commitment among employees. Moreover, this supportive organizational culture is expected to be necessary to achieve loyalty, well-being, and a low sick leave among employees.

2.1.5 Summary

In conclusion, the organizational conditions for leadership influences a leaders behavior. Leadership cannot be understood without looking at the context, the organizations form and size, professionalism, and culture (Einarsen, Martinsen & Skogstad, 2017).). Moreover, the hierarchy requires focus on the vision and goals instead of processes, while smaller organizations often facilitates a more relationship-oriented leadership behavior. Professional employees see the leadership as a service function, which is also seen as a desired and

supportive culture. It is expected to find this supportive culture is fundamental in order to reach higher levels of efficiency, well-being, and low sick leave among employees.

2.2 Sick leave

An individual can be either fully or partially on sick leave, depending on his or her ability to work. A common understanding is that people must work if they are healthy and are entitled to sick leave if they become ill. Sick leave is usually a consequence of an individual's ability to perform tasks becoming insufficient in relation to the requirements of the task (Knardahl *et al.*, 2016, p.179-181). According to the National Insurance Act, reasons for sick leave are usually linked to individual health issues (Lovdata, 2021). Changes in people's health therefore becomes an explanation for the increasing numbers on sick leave. The figures on sick leave available at SSB are also used as an indicator that something may be wrong in the job situation (Knardahl *et al.*, 2016). For the purpose of preventing work related absence, precautions must be taken to minimize the risk conditions in the physical, psychological, or organizational work environment. Thereby, one must also be aware that physical strain in combination with psychological strain, can often be additive. Stress that separately would not create problems will collectively be amplified and result in, for example, musculoskeletal disorders (Hansen, 2014). Thus, it is important to be aware that some people may state physical conditions as a reason for absence, while the "real cause" is found in the psychosocial or organizational work environment. A presentation of recent research on common causes related to sick leave will thus follow.

Although different models have been established to measure stress levels that employees experience at their workplace, The *Job-Demand-Control model* by Karasek & Theorell (1979, 1990), *The Job demands-resources model* by Shaufeli and Bakker (2004), and *The Effort-*

Reward Imbalance model by Siegrist (1996) have gained most ground and are therefore selected throughout this thesis. The models elaborate what inadequate reward and appreciation can do to employees. In addition, the models explain how important job commitment is to prevent sick leave.

2.2.1 The Effort-Reward Imbalance model

Siegrist's (1996) *Effort-Reward Imbalance model* is commonly used in research on connections between the employees' health and the psychological work environment. The model suggests that when efforts are high and rewards low it can lead to stress at work, which can lead to a variety of health issues. Additionally, the model suggests that employees' personal motivation to work excessively (meaning too much commitment), often increases the risks of various health issues. Additionally, the model explains that there is an interaction effect of over-commitment and ERI. It is assumed that the employees' efforts are partially carried out as a social contract grounded in a norm of social reciprocity. The essence of the contract is that in return for an employee's effort at work, this individual expects to receive rewards in form of money, appreciation, further career opportunities and job security. The figure below, Figure 2, explains the connections between employees' effort at work and the expected rewards, and how a persistent imbalance between these increases the risk of stress and illness.

Based on these findings, it is expected that whenever employees experience a balance between the effort they put into their job and the reward they receive, the risks of health problems and sick leave are minimal.

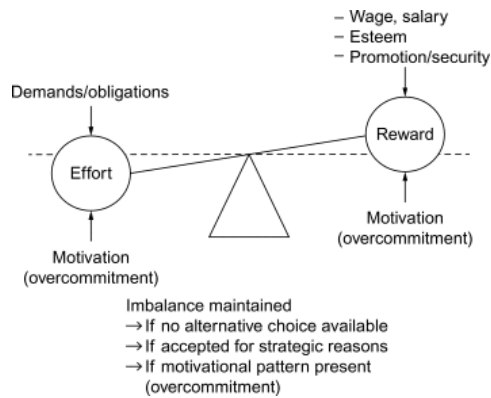


Figure 2: Diagram reproduced from “The Effort-Reward Imbalance model” by Siegrist (1996)

2.2.2 The Job Demand-Control (-Support) Model

The Job Demand-Control model by Karasek and Theorell (1990) elaborates on how job characteristics influences individuals well-being. It offers putative explanations on how various job demands like strain can cause stressful working conditions, and psychological and physical ill health. Nevertheless, the model also posits that people can succeed in these demanding situations through exploiting skills that makes them gain autonomy and control.

The researchers Johnson and Hall exploited *the Demand-Control model* to find a direction for their study on occupational stress and introduced social support as the third dimension of the model in 1988. The aim was to examine whether the new dimension moderated the relationship between job strain and health outcomes. Johnson and Hall’s conclusion suggested that employees with low or no social support correspondingly reflected in increased strain. Johnson, Hall, and Theorell (1989) further examined the association between strain and social support, aiming to find out if social support had an impact on the physiological outcome of job strain. Results suggested that there was a higher risk of developing cardiovascular disease morbidity among individuals that received little or no social support and additionally higher level of strain. Given these points, the model was extended to include social support, and

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thereby, aligning with the social processes of life at work (Karasek & Theorell, 1990).

The dimension social support involves increased contact between leaders, supervisors, and the employees in order make the demands more severe. It is important to understand how both the characteristics of the tasks and employees coping mechanism can lead to job strain. This interpretation can further help develop for example interventions, which can be set up to alleviate the impact of strain.

The figure below (Figure 3) explains the relationship between job requirements, employees' control over the situation and the risk of either learning and coping or letting it affect the mental and physical health. Based on the facts above, it is expected that employees who perceive their supervisors as supportive and also experience a balance between job requirements and control over the situation, experience increased job satisfaction, job commitment, and are able to cope with stress. Thereby, reports will show low sick leave.

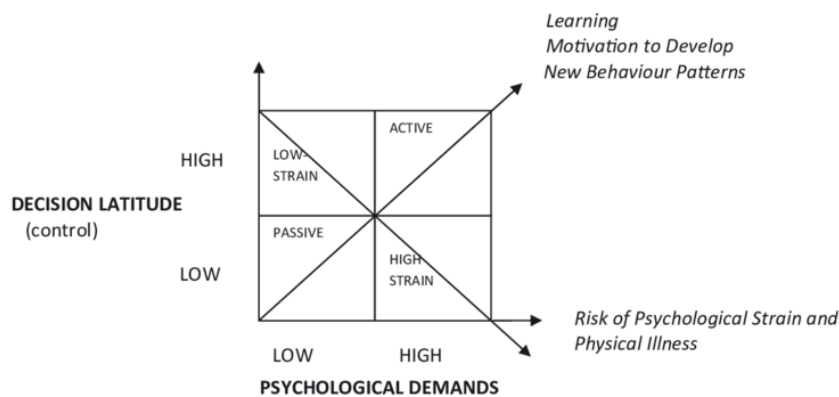


Figure 3: Diagram reproduced from “*The job Demand-Control model*” by Karasek and Theorell (1990).

2.2.3 The Job Demands-Resources model

The Demands-Resources model by Demerouti, Bakker, Nachreiner and Schaufeli (2001) is used by leaders and supervisors to manage employees' involvement and commitment. The model proposes that work-related conditions may be categorized into the comprehensive components: demands and resources/positives. Additionally, the model suggests that whenever resources are scarce and job requirements high, factors such as stress and the chance of burnout increases. Thereby, when employees experience stress, they often swap between protecting their performance goals and the mental effort they invest into achieving these goals. If the requirements increase, there will be an imbalance between effort and gain. This is because the employees try to maintain the level of performance at the same time as the requirements increase. However, if the resources are adequately available and the job requirements also high, involvement, motivation, and performance levels, are enhanced (Bakker, Hakanen, Demerouti & Xanthopoulou, 2007).

The figure below (figure 4), explains the connection between job requirements and the risk of burnout and sick leave. On the other hand, it also explains the connections between sufficiently available job resources and the risk of increased commitment and developing a positive attachment to the job. Based on these facts, it is expected that whenever employees experience a balance between job requirements and resources, the risk of developing health issues and sick leave are low.

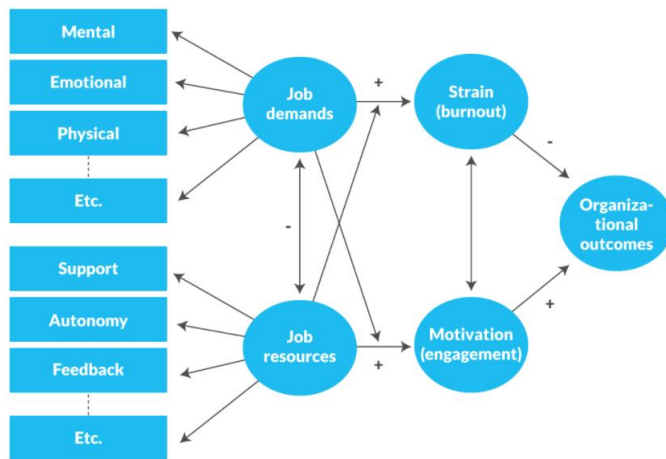


Figure 4: Diagram reproduced from “The Job Demands-Resources model” by Demerouti, Bakker, Nachreiner, and Schaufeli (2001).

2.2.4 Summary

Drawing on this previous research, it can be assumed that the risk of employees developing bad health and sick leave increases when there is no balance between job requirements and decision-making opportunities (Karasek & Theorell, 1990), when there is no balance between job requirements and job resources (Demerouti *et al.* 2001), and when there is no balance between effort, reward and social support (Siegrist, 1996).

2.3 Research expectations

Based on theory from the literary review, it is expected to find connections between the leadership who matches the behavior with the situation and context, with a greater well-being of employees, higher efficiency and thereby a possibility of lower sick leave. Besides this, it is expected to find connections between satisfaction and low sick leave when leaders manages to achieve control over decisions and social support, balance between employees efforts and rewards, and balance between job requirements and job resources.

Chapter 3: Methodology

Methodology refers to the specific methods used to identify, select, process, and analyze

information to acquire knowledge on a specific topic. In the research process, it is important to collect empirical data that is valid, trustworthy, and reflects reality as it is. It also has to provide good answers to the research questions that are asked (Jacobsen, 2015, p.15-16).

In the following chapter, the author justifies why a literary review was chosen as research method. The choice of method has major consequences for the reliability and validity of the dissertation. Thereby, an assessment of the process of selecting data, and how the depth of this data was ensured follows.

3.1 Literature review as research approach

According to Snyder (2019) and Jacobsen (2015, 125-127), a literature review discusses published information in a specific subject or topic area, in a systematic manner. It documents the state of the art with respect to the subject one is writing about. The empiric composes the sample, the content makes up the data, and the analysis/discussion makes the research result. Choosing a literature review as research approach allows an open, descriptive problem, and it allowed the author to immerse in a lot of relevant literature in a short time period. Throughout this thesis, the author follows Snyder (2019) article on what, how, and why of literature reviewing. In the article, Snyder (2019) claims that literature reviews able an author or researcher to study large amounts of research in a specific subject area. These large amounts of existing data further form the foundation for new knowledge based on new expectations and new research questions. This method of approaching research also provides an opportunity to uncover gaps in existing research (Snyder, 2019).

3.2 Finding relevant information

Snyder (2019) presents a step-by-step guide on where to find and how to select relevant

literature. She further claims that it is crucial to obtain sufficient knowledge on a subject area in order to understand the importance of the research. Thus, as a bolster to this claim, the author of this thesis spent much time reading up on sick leave and leadership. The author further kept in mind which researchers recurred the most.

The author followed Snyder (2019) recommendations and defined criteria for choosing articles and made a system for what and how to search correctly. Thereby, the author only chose studies that included a clearly defined purpose and a description of the methodology. The methodology must be included and described because adequate research must be verifiable, and the research in this paper will not be better than the research it is based on (Tranfield *et al.*, 2003; Wong *et al.*, 2013). Besides, the articles purpose must be included and described because it sheds light on what the researchers aim was for the specific study. Since this is a literary review, the author does not have the opportunity to check for errors in the collection process for the chosen articles, but the author assumes that the peer reviews of other researchers would have captured any methodological errors.

According to Snyder (2019) and Tranfield *et al.* (2003), there should be strict requirements regarding the quality of a literature review. By quality he refers to factors such as proper scope and depth, clarity, and an effective analysis and synthesis. In order to meet these requirements, the author created a set of selection criteria for the literature search, meaning selecting the right search engines, languages, time period, keywords, and peer reviews. Secondly, the author chose articles that were all verifiable. Third, in regard to the breadth and depth of the research, the author selected studies with varying issues within the subject area of sick leave and leadership. These studies are all based on research literature published between 2009-2017. This time period has been strategically chosen to ensure that the same leadership

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trends, laws, and rules applies to all studies.

3.3 Measuring the quality of a scientific paper

A scientific paper has to present new knowledge or insight, and the results has to be verifiable or applicable in new research. This type of paper is frequently published in a periodical called a journal. The characteristics of papers in journals are that they are citable. Meaning that the content is solid, the journal is available in libraries and the web, and that there are standardized methods of identifying specific articles. Moreover, how many times the article has been cited in a specific period of time (impact factor) can be found in the database *Journal Citation Report*. This impact factor is often used to rank journals. The ranking of journals by impact factor is however controversial as it does not say anything about the quality of single articles but only the journal as a whole. This factor was originally intended as a tool for comparing journals, but today it is used to allocate research funds, rank universities, evaluate journals and help researchers assess which journals are most useful to publish in. It is however important to remember that new journals have a low impact factor (often 0), and also that the impact factor varies between subject areas. For this reason, the author of this paper has opted out the source assessment impact factor.

Regarding the assessment of sources, it is imperative to evaluate each source to determine the quality of the content. This is often done by looking at the purpose and intended audience, authenticity, accuracy and reliability, and authority and credibility and objectivity or bias. Common evaluation criteria also include assessing the author and his professional background, H-index, and influence. Also, the sources that researchers ground their arguments and conclusions on. Does the paper cite previous publications that are relevant to the work being discussed?

Third, look at the publisher and date of publication to see whether the journal is based on peer review and assessed/approved by other researchers within the same field, also if the research is up to date. The impact factor and reference degree are also important to look at in order to see how often the article is quoted during a particular time period and how often it is referred to by other researchers. Finally, it is important to make sure whether the literature answers the questions from the problem statement/research question, and matches the method description and purpose (Snyder, 2019). Snyder (2019) also makes a solid point by mentioning that an article that has a high degree of referencing, only stands for reference to other authors work in the field and is not necessarily an assessment of the quality of an article. It can simply be a matter of other authors just referring to the article.

3.4 The literature search

A literature search involves searching and compiling published literature to identify a breadth of good quality references relevant to a chosen subject area. When conducting a literature search for a study, it is important to choose sources that can bolster any claims in a discussion. For this thesis, the author chose to use the search engines Oria, Emerald Insight, and Scopus. At first, the author also used Google Scholar which is a Web Search engine, but after discussing this search engine with the supervisor, it was opted out. The main reason was that this search engine searches the entire web which includes material that is not peer-reviewed or full-length. Nor does it allow the user to opt for other selection criteria which would have resulted in unmanageable and inaccurate literature.

As a brief introduction to the search engines used in this thesis, the first one, Oria, is a portal to the collected material found at most Norwegian subject and research libraries.

Complemented by a wealth of electronic material from open sources, Oria provides unified access to books, journals, documents, and academic articles that are all peer-reviewed which means it has been approved by other researchers in the same field (UNIT, 2020). The second, Elsevier's Scopus, has the most abstract- and citations of peer-reviewed articles (Scopus, 2020). The third, Emerald Insight, is a global publisher of over 300 peer-reviewed, comprehensive journals from subject areas including health care and management (Emerald Insight, 2021).

The success rate of a literature review depends on a thorough review of the academic literature. Thus, the author of this thesis started the process by developing research questions and making a list of relevant databases. The authors next step was to make a list of relevant keywords and phrases to obtain a manageable amount of relevant academic content. The author used keywords such as "Correlations between", "The link between", and "The relationship between", "impact on" in combination with both management, leadership and sick leave. The author also limited to "full text only", scientific journals, articles written in Norwegian and English, and articles written in the time period from 2009-2019 to narrow search parameters and only look at newer research.

The author ended up with respectively 85 hits on Oria, 93 hits on Scopus, and 62 hits on Emerald Insight. The author skimmed through the summaries of the articles with headlines that seemed to answer the research questions and also included both purpose and method. The author further checked the articles in the *Journal Citation Report* which is located under *Web of Science*. The aim was to find how many times each article had been cited and also the author's index which is measured based on the number of published articles and research activity. The H-index is measured based on number of publications and how many times each

article has been cited. This means that the research articles have been peer-reviewed by others in the field and has thus achieved recognition within the specific research field. Furthermore, in order for the articles to be comparable, the author only chose articles where the research had been carried out in Europe, including Denmark, The Netherlands, Norway, Finland, Sweden, and Germany. This is because countries outside Europe may have factors that influences how they practice leadership. In the chosen countries, management trends, laws and regulations are also somewhat similar which will make a good basis for drawing comparable conclusions in the analysis.

Finally, during the literature search, the author gradually found the most relevant authors and studies. Some studies were present on several search engines, which indicated that the authors search criteria were relevant. As a result, the author was left with seven relevant academic articles that shed light on various aspects of connections between leadership and sick leave. This empiric of seven articles investigated relationship oriented leadership, especially health promoting leadership, the psychological work environment, psychosocial and mechanical influences and risk of headache severity which in turn can lead to sick leave, generally good working environment versus especially health promoting measures, as well as burnout versus work engagement. All in relation to sick leave.

3.5 Validity and reliability

Validity and reliability are concepts used to evaluate the quality of research (Tjora, 2017).

While validity is about the accuracy of a specific measure, reliability is about whether repeated measurements gives the same result, also known as the consistency (Ringdal, 2013; Snyder, 2019). As previously mentioned, this study is solely based on secondary data which means that it cannot be argued with certainty that the data has been obtained and handled in a

research wise objective manner. Ringdal (2013) emphasizes that measurement errors will always be present, but that it is important to limit these as much as possible. In order to control the conditions that may affect the reliability of secondary data, it is therefore very important that the purpose and method are described in the chosen literature (Jacobsen, 2011). The author of this thesis has therefore placed great emphasis on a thorough registration to avoid possible errors. This was done in terms of excluding studies without purpose and method, only electing research articles published in journals that are quality assured by other researchers (peer-reviewed), and additionally, choosing authors whom reportedly all have a high H-index.

In order to achieve the best possible reliability, studies from countries with forms of management, laws and rules that are less likely to be comparable has been opted out. Besides, the fact that this dissertation merely use secondary data sets, limits the opportunity one as a researcher has to influence these, which strengthens the reliability.

Selection criteria's are described, the search engines are all accounted for, and the research literature carefully selected. The research questions in the feature map have helped her to map out the literatures and ask direct questions to each study. Based on the authors preparation of measuring instruments and the anticipations in this dissertation are based on a very through theoretical review, it can nevertheless be argued that the reliability, based on the criterion of source criticism, is satisfied.

3.6 Mapping literatures

According to Alias and Suradi (2008), scholars frequently feel dazed by the enormous amounts of material they come across. They often find it difficult to identify and organize the material in context to their own research. Mapping literatures is one of the main stratagems

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presented in articles and books for scholars on how to do literature reviews (Machi & McEvory, 2008; Kamler & Thomson, 2006). Alias and Suradi (2008) also proposes that “*mapping ideas, arguments, and concepts from a body of literature is an important part of the review of literature in order to ensure a good piece of research*”.

Mapping externalizes the knowledge-process. Just like a map of the physical environment, a map of literatures highlight prominent features, demonstrates how key points are connected/disconnected and establish different aspects of what the reader have seen or read. Mapping literatures is multifariously described as a “*graphic blueprint*” (Heinrich, 2001), and a “*geographical metaphor*” (Kamler & Thomson, 2006). Changing modality can help scholars develop patterns in in order to discover something that otherwise would be unseen, identify research gaps and boundaries to topics under investigation (Kamler & Thomson, 2006; Heinrich, 2001; Machi & McEvory, 2008).

Alias and Suradi (2008) emphasize that mapping is a reflexive organizational tool. It requires that scholars understand the process, as several mapping methods and processes may be utilized. The author of this thesis chose to make a literature map of questions to ask for each publication she evaluated. Cresswell (2011) describes this type as an argumentative structure developed from summary record sheets in a standardized format.

In regard to this thesis, the literature map functions as research questions towards the selected research articles, in the same way as an interview guide would function as the research questions for an in-depth interview. The map is a tool for categorizing the information from the selected articles and form the basis for an effective analysis of the data material. The questions showcased in the literature map was developed based on the authors expectations of

leaderships impact on sick leave.

The literature map is divided into five sections and consists of 29 questions. In the first section, background information on the studies and journals are mapped to ensure verifiability. The purpose, method, and selection criteria are all represented, as this thesis quality is dependent on the quality of the research it is based upon. As previously mentioned, the author solely selected recent research literature (2009-2019) to ensure that what is emphasized in terms of management trends, laws and rules applies to a relatively alike time period.

Through the second section, the author maps out the leadership behavior: which tasks are prioritized, which tools are used, which orientation the leader leads towards, and the leaders behavior. Here, the author questions how the leader is perceived by the employees, and whether there is trust and dialogue between the parties. The aim is to clarify what the manager really does when he makes his daily choices, and how this has consequences for the employees. Additionally, the author also wants to investigate whether these consequences can lead to sick leave or not.

The third section maps out the organizational conditions for leadership, as leadership behavior and style are affected by external factors such as the demographics, resources, and economic and political factors (Bass and Avolio, 1993). Organizational form, size, professionalism among employees and also the culture, are all important contexts that both set boundaries and provide opportunities for good management (Bass and Avolio, 1993). Examples of what the author aims to examine include but are not limited to: whether leaders in small, private companies have a more relationship-oriented, direct, and process-active management

behavior, than leaders in a large group. Or, whether the case is that the entrepreneurial leader becomes very authoritarian and less delegative out of fear of losing control (Jain & Gupta, 2018). As the context affects the leadership, the author wants to investigate whether this has any consequences for efficiency, well-being, and sick leave among employees.

Throughout section four, the author questions the literature in terms of explanations for sick leave. This include explanations of job satisfaction and motivation to go to work, or vice versa: stress-related disorders, stress reactions and sick leave. Research has shown that taking into account psychosocial exposures and other work-related conditions is important to prevent sick leave (Aagestad, Johannessen, Tynes, Gravseth & Sterud, 2014). As leaders are in charge of facilitation needs of employees (Hao & Yazdanifard, 2015), the author expects leaders to be an important asset both for the employees' health and motivation to go to work.

The fifth and final section entails questions to the literature which will make up the results. Solely based on assumptions, the author questions the literature and whether leadership behavior has an impact on the work environment and sick leave. If there are connections between leadership behavior and sick leave, the author is looking for documentation on how leaders should behave to achieve a low sick leave level. Finally, an overview of the selected articles follows, and a presentation of data and findings.

Chapter 4: Presentation of empirical findings

This chapter elaborates on the empirical findings from the authors literature search. The articles are first presented in a table that includes the author(s) name(s), year of publication, name of article, journal, and the articles purpose. Next, the author elaborates the selection criteria, where each study has been carried out, and what method has been used. The author

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also explains key characteristics of the organizations that are examined in regard to industry type, organizational form, size, culture, and whether the organization is changing/developing where the studies share information about this. At last, one article is thorough presented.

4.1 Table of articles

The table below presents an overview of the articles in this study. The overview shows the authors and year of publication, title, journal, and purpose.

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	Author(s)/year of publication	Title	Journal	Purpose
Study 1	Schreuder, J. A. H., Roelen, C. A. M., Van Zweeden, N. F., Jongma, D., Van Der Klink, J. J. L. & Groothoff, J. W. (2011)	Leadership effectiveness and recorded sickness absence among nursing staff: a cross sectional pilot study.	<i>Journal of Nursing Management</i>	Examines whether there are correlations between relationship-oriented leadership behavior among department managers and sick leave among nurses at a hospital in The Netherlands.
Study 2	Stapelfeldt, C. M., Nielsen, C. V., Andersen, N. T., Krane, L., Fleten, N., Borg, V. & Jensen, C. (2013)	Are environmental characteristics in the municipal eldercare, more closely associated with frequent short sick leave spells among employees than with total sick leave: a cross-sectional study.	<i>BMC Public Health</i>	Examines whether there are connections between the self-reported psychosocial working environment in elderly care in Denmark, and the number of sick leave/the length of it.
Study 3	Gurt, J., Schwennen, C. & Eike, G. (2011)	Health-specific leadership: Is there an association between leader consideration for the health of employees and their strain and wellbeing?	<i>Work & Stress</i>	Examines the concept "health-promoting leadership" versus generally good leadership (relationship-oriented leadership), and whether this has any effect on the load and well-being of employees.
Study 4	Shaufeli, W. B., Baker, A. B. & Van Rhenen, W. (2009)	How changes in job demands and resources predict burnout, work engagement, and sickness absenteeism.	<i>Journal of Organizational Behavior</i>	Tests hypotheses in the Job-Requirement-Resource model: Increased job requirements and reduction in job resources leads to burnout whereas increased job resources lead to increased job commitment. Increase in burnout and lower job commitment leads to sick leave

Study 5	Larsson, R., Ljungblad, C. Sandmark, H. & Åkerlink, I. (2014)	Workplace health promotion and employee health in Swedish municipal social care organizations.	<i>Journal of public health</i>	Compares a generally good work environment versus a special health promoting measures at the workplace, and how this affects the health and absence of employees.
Study 6	Christensen, J. O. & Knardahl, S. (2012)	Work and headache: A prospective study of psychological, social, and mechanical predictors of headache severity.	<i>The Journal of Pain</i>	Examines the effect of psychosocial and mechanical predictors of headache severity based on surveys from a variety of organizations across Norway, with a two-year follow up period.
Study 7	Upadayaya, K., Vartiainen, M. & Salmela-Aro, K. (2016)	From job demands and resources to work engagement, burnout, life satisfaction, depressive symptoms, and occupational health.	<i>Journal of Burnout Research</i>	Tests associations between work engagement and burnout, and life satisfaction and depressive symptoms, demands and resources, and its relation to occupational health.

Table 1: overview of the articles.

All empirical evidence is published between 2009 and 2017. Further, all studies are carried out in Europe (Denmark, The Netherlands, Germany, Sweden, Finland, and Norway) to ensure that the countries are somewhat compatible in relation to trends, laws, and regulations.

Three out of seven studies have been carried out in larger, public, and bureaucratic organizations, where the leadership primarily focus on the direction, system, and control. These organizations are also characterized by a high degree of professional, independent employees, which may indicate that employees of these organizations expect a democratic and delegative leadership behavior from the management (Kirkhaug, 2015). One study was carried out in an industry characterized by change and reorganization which can be challenging apropos of building a solid organizational culture. According to Einarsen, Martinsen & Skogstad (2017) and Kirkhaug (2015), a strong company culture often facilitates delegating and democratic leadership behavior, whereas an unwanted culture usually causes the organizations leadership needing to be clear on its purpose and vision, in order to try to change the mentality and values of the employees.

4.2 The generalizability of the articles

All studies have a thorough introduction that include purpose, and a literature review that has a description of the research field. This indicate that there is significant research done both in the field of leadership and sick leave. Additionally, all studies states there is a research gap and a need for further research with other variables and/or studies conducted over a longer period of time, especially in relation to the variable sick leave. The studies are well distributed between both public and private organizations, whereas two of them have a predominance of women among respondents (employees in elderly care, nurses), one has predominance of men (managers in the telecommunications companies) and three of them have approximately equal distribution of gender. Lastly, two studies are quantitative cross-sectional studies with the limitations this place in relation to causality, while the last four studies are conducted over a longer time period and has included the factor “registered sick leave”. All of the articles are published in international journals where all articles have been peer-reviewed (See *Table 1*).

4.3 Data collection

Throughout this section, the author goes deeper into the methodological approach in each study, and how the data collection has been carried out. Mapping is important and makes it easier for the author to uncover both common features and differences that will be important factors for the upcoming analysis.

4.3.1 Study one

The first study was conducted by The Department of Health Sciences at University Medical Center Groningen (UMCG). It is a qualitative cross-sectional study¹ among three male- and

¹ A cross-sectional study (or prevalent study) is a study where information is gathered on one planned way within a defined population (selection) at some point (Hagen, p.2).

three female department heads at a hospital in The Netherlands. Whether the hospital is private- or publicly run was not stated. The study used the *Leader Effectiveness and Adaptability Description* (LEAD) instruments. LEAD is a scheme made by *Hersey & Blanchard in 1975 and revised by Silverthorne and Wang in 2001*. The scheme contained twelve situations and the leaders task was to name which leadership behavior that best represented their action. The main focus was put on leadership flexibility and efficiency. The results were further compared with the registered sick leave among each department's nurses over a period of three years. There was a total of 699 nurses participating in the study. Their mental health and working conditions were mapped at the end of the period through a questionnaire. (Schreuder, Roelen, Van Zweeden, Jongma, Van der Klink & Groothoff, 2011)

4.3.2 Study two

The second study was conducted by the *National Research Centre for the Working Environment* in Copenhagen, Denmark. It is a quantitative cross-sectional study where *The Copenhagen Psychological Questionnaire*. The questionnaire can be explained as an instrument used in the assessment and improvement of the psychosocial working environment. It was sent out to 3346 working in municipal elderly care in Aarhus, Denmark. 76% chose to respond to the questionnaire, whereas a total of 96% of these were women. The results from the questionnaire was compared with registered numbers of sick leave the same year. The number of registered sick leave was placed in one of two categories: either over, or under fourteen days absence. These numbers were further analyzed on the basis of employees' self-reported psychosocial working conditions. (Stapelfeldt, Nilsen, Andersen, Trane & Fletten, 2013)

4.3.3 Study three

The third study was conducted by the Department of Work and Organizational Psychology at the Ruhr-University in Bochum, Germany. It is a cross-sectional study among 1969 employees working in the German public tax administration. 48% of the respondents exposed their identity. The respondents age distribution matched the age distribution in the tax administration. The survey was conducted in North Rhine- Westphalia, which is an area in Germany where the tax administration had to put a lot of resources and work into health-promoting measures. Thus, the researchers were certain that the employees had knowledge of both the concept of health-promoting leadership and a generally good, relationship-oriented leadership. Surveys were distributed through work e-mails over a two-week period of time, and the director of the tax administration motivated the employees to respond to it, even though the survey was voluntary. (Gurt, Schwennen & Eike, 2011)

4.3.4 Study four

The fourth study was conducted by the Institute of Psychology at Erasmus University in Rotterdam, the Department of Psychology, and the department of Occupational Health at Utrecht University, and ArboNed, in the Netherlands. The study is a longitudinal study² among 201 telecom managers from a privately run company that sells products and services to both individuals and to the corporate market in the Netherlands. Questionnaires were sent out to 364 of these managers twice with one gap year in between. The respondents were mainly men in leadership positions working in turbulent work environments. The majority were highly educated, middle-aged, and married. The majority also had a technical

² A longitudinal study, or longitudinal survey, is a research design that involves repetitive observations of the same variables, for example people, over a short or long period of time (i.e. uses longitudinal data). (Institute for Work & Health, 2015).

background and only received training in leadership. (Shaufeli, Baker & Van Rhenen, 2009)

4.3.5 Study five

The fifth study is conducted by the Swedish Council for Working Life and Social Research, and the Swedish Social Insurance agency. The material was carried out by Statistics Sweden. It is a quantitative survey in Sweden where 60/290 municipalities were randomly selected. One out of five employees in Sweden work in the municipal sector which is more than 800.000 people in total. 15.871 employees of the municipals in the nursing and care sector responded, which is approximately 60%. They all received a questionnaire regarding the psychosocial work environment, health-promoting measures in the workplace and self-perceived health. The answers were compared with sick leave over fourteen days, and the respondents could opt to answer anonymously in pre-addressed and postage-paid envelopes. Those who did not respond received two reminders. In the study, the questionnaire for Psychosocial and Social Factors at work (QPS) by Skogstad *et al.* (2000) was used to map the work environment. In addition, separate questionnaires were prepared to map the particularly health-promoting measures, as well as mapping employees' self-perceived health. (Larsson, Ljungblad, Sandmark, & Åkerlink, 2014)

4.3.6 Study six

The sixth study was founded by the Norwegian Research Council and conducted by The National Institute of Occupational Health, and the department of psychology at the University of Oslo. It is a Norwegian longitudinal and prospective study whereas the data was obtained through work environment surveys distributed to numerous organizations across Norway. The study took two years, including follow-up. A baseline 6421 employees responded whereas only 3574 responded to the follow-up. The respondents were obtained from both private and

public organizations. All from a wide range of industries including both municipalities, insurance companies and charities. The data were analyzed both cross-sectionally and prospectively both times. (Christensen & Knardahl, 2012)

4.3.7 Study seven

The seventh study was founded by grants from the Finnish Work Environment Fund and the academy of Finland. It is a Finish longitudinal study that was a part of an ongoing Occupational Health study from 2011-2012. 1415 employees (568 men and 828 women) were followed twice during the study period by their job-related health service. The contributors responded to a survey with questions on respectively work engagement, symptoms for burnout, well-being, work-related and personal health and work-related demands. The data was then analyzed cross-sectionally. (Upadayaya, Vartiainen, & Salmela-Aro, 2016)

4.4 Elaboration on Study 4

A thorough elaboration on one Study 4, or “*How changes in job demands and resources predict burnout, work engagement, and sickness absenteeism*” by Shaufeli, Bakker and Van Rheenen, was chosen mainly because the article explains the relationship between job requirements and the risk of burnout and illness on one side, and on the other side, the relationship between availability of job resources and the risk of job engagement and positive attachment to the job. The study includes the elements of sick leave, which makes it particularly interesting in regard to the research being carried out in this thesis. Also, the article is repeatedly referred to by other researchers in the same field.

As mentioned earlier, it is a longitudinal survey among 201 managers working in a telecommunications company in the Netherlands. The study tests the hypotheses in the Job-

Requirement-Resource model by Demerouti *et al.* 2001). This time with an extension of three factors which are the causal effect between burnout/job commitment and job demands/job resources, a positive motivation process versus a harmful stress process, and the factor sick leave. Questionnaires were sent out twice a year, whereas a total of 89 percent of the respondents were men who had worked in the company through a reorganization process that also required redundancies. Most of the managers had technical backgrounds, and thereby fulfilled management positions because they performed well as technical specialists.

The Job-Requirement-Resource model tests whether job requirements and job resources can result in burnout, possibly job commitment, and the result of the survey was as follows:

Increase in job requirements (for example overload, emotional demands, disruption of leisure) at the same time as a reduction in job resources (for example social support, feedback and opportunities for training or specialization) can lead to burnout and thereby corresponding to the strain process as assumed by the Job-Requirement-Resource model.

In the same vein, results from the survey claimed there was a positive motivation process for example when job commitment was present, which implies increased job resources can lead to increased job commitment. The positive motivation process is determined by available job resources including social support, feedback and possibilities for learning or specialization. These factors generate enthusiasm as they promote employees' individual development, learning and development. Deci and Ryan (2002), states that job resources are important for achieving goals at work. Moreover, according to this approach, a work environment that offers resources, forms employees that are willing to make an extra effort in relation to their tasks at work. It is a process that in turn can lead to job commitment and a positive connection to the job, and acts as a buffer against illness and sick leave.

On the contrary, the harmful stress process is explained through an imbalance between effort and gain. Employees must deal with increased work demands like for example work overload, emotional demands, and disruption of leisure time, whilst simultaneously trying to maintain the same performance level. These work conditions can lead to perceived stress by employees which in turn can lead to fatigue and irritability. Over time, this can lead to burnout and sick leave. The article also refers to an alleged voluntary and involuntary sick leave, where the involuntary sick leave is defined as a reaction to high and stressful job demands (associated with the harmful process of health). The voluntary sick leave is a result of employees wanting to disclaim unfavorable working conditions. These employees are not satisfied with their working conditions and feel little or no belonging to their workplace (associated with the motivation process). The survey also shows quite concretely that by increasing employees' job resources, job engagement increases.

These findings confirm this thesis assumptions that leaders who are aware of work-related stress and psychosocial risks, and who are able to balance job requirements and job resources, may have low sick leave among employees. The study shows that there is a risk of illness and burnout when the workload increases and leisure time is disrupted, at the same time as social support and feedback are reduced. This also confirms the hypotheses in *the Requirements-Control-Support model* as it emphasizes that social support from colleagues and leadership can act as a buffer against illness when job demands increases.

The leadership influences both directly, and indirectly through arrangements that are made (Bryman, 2013). This study shows clear connections between the job resources leaders make available and a positive motivation process. The survey also shows that when employees are

motivated to work and are committed, it often leads to increased access job resources, which in turn leads to an increase in job commitment. A leader's demands to his employees on the other hand, are related to a harmful stress process. If demands at work become too high and affects employees' leisure and private life, this can be experienced as stressful and burdensome. Over time, an increased load of work requirements can lead to burnout among employees and ultimately sick leave.

This confirms the assumptions in this thesis that a leader who facilitates a good balance between resources and requirements, who provides social support to employees while adapting his behavior to the context and situation that the employee is in, will presumably have a lower sick leave among its employees. These employees will have a lower risk of illness and burnout and may experience a positive motivational process that provides opportunities for job engagement and extra-role behavior (Karasek and Theorell, 1990; Kirkhaug, 2015).

Chapter 5: Analysis

Chapter 5 presents findings in research literature that are related to this thesis' research question. The research questions presented in the literature map (see Appendix 1) contributed to map out relevant literature, develop questions and important factors to include when evaluating studies for the thesis. The questions in the literature map, map the journals background, leadership behavior, the context in which the leadership is exercised. It looks for background information on sick leave and provides answers to the authors expectations regarding whether leadership behavior has an impact on sick leave or not.

5.1 Research on sick leave

Below this paragraph, a table of explanation and/or definition of the typical factors researched in connections with sick leave found by the author. The presentation is based on how the factors are described in the different studies.

Authors/Year of publication	Typical factors studied in relation to sick leave
<p>Schreuder, Roelen, Van Zweeden, Jongma, Van Der Klink, & Groothoff. (2011)</p>	<p><i>Relationship-oriented management:</i> The authors describe the leadership behavior as follows: The role of the department heads has gone from administrative supervisors to supportive supervisors. This means that department managers or department nurses must go from being task-oriented to relationship-oriented. Relationship-oriented leaders increase efficiency among employees, which in turn allows employees to perform their tasks and achieve their goals (Sahertian & Soetjipto, 2011). They also have a positive influence on the work environment and promote job engagement, thus, relationship-oriented department managers increase both individual and team-based performance.</p>
<p>Stapelfeldt, Nielsen, Andersen, Krane, Fleten, Borg, & Jensen. (2013)</p>	<p><i>The Psychosocial work environment:</i> The environmental factors that were perceived as important explanations for high sick leave among workers in the health sector, and therefore included in the survey, were: Work pace, emotional demands, influence, the importance of the workplace, work commitment, role conflicts and the quality of the leadership.</p>
<p>Gurt, Schwennen, & Eike. (2011)</p>	<p><i>Health promoting leadership versus generally good, relationship-oriented leadership:</i> According to Barling, Loughlin and Kelloway (2002), health promoting leadership is defined as a leaders who are directly considered and engaged in employees' health. The theory behind it is domain-specific leadership, which states that whatever the leadership focus on, is put on the agenda. Health-promoting leadership means that the leadership has a extra focus on the employees not being exposed to harmful stress processes at work. The leadership facilitates health-specific measures for employees, such as training during working hours, and have a respectful attitude towards employees with health problems.</p> <p>Generally good, relationship-oriented behavior means that the leadership helps employees grow personally, they care about the employees and give positive feedback on employee performance. The leadership formulates clear expectations of the employee, provides advice and guidance so that the employee can reach their goals, and links the employees' work to higher organizational goals. The authors also refer to Bryman (2013) definition of</p>

	<p>leadership, where he states that leadership affects employees in two ways: “indirectly through configuration of organizational policies and systems, and directly through personal interaction”. The study focusses on the direct and personal leadership, also known as the relationship-oriented leadership. The factors role ambiguity, psychological climate for health, and well-being and irritation are also measured.</p>
Shaufeli, Baker, & Van Rhenen. (2009)	<p><i>Burnout/illness versus job commitment/positive attachment to the job:</i> The study attempts to explain burnout (where sick leave would be the ultimate outcome) among employees, as a result of a stress process, or on the other hand, possibly job commitment as a result of a motivational process.</p>
Larsson, R., Ljungblad, C. Sandmark, H. & Åkerlink, I. (2014)	<p><i>Generally good working environment versus especially health-promoting measures at the workplace:</i> Management and organizational factors that were measured in the survey were especially health-promoting measures (for example exercise, smoking cessation assistance, health awareness), developmental leadership, leadership support, the social and cultural climate, role conflicts, affiliation with team and self-perceived health.</p>
Christensen & Knardahl. (2012)	<p><i>Psychosocial, social, and mechanical predictors of headache severity:</i> In addition to the known mechanical loads that may cause headache, several psychosocial factors have been found to be associated with headache. These are examined by the authors and are as follows: Lack of social support, low decision control, a heavy workload, conflicts at the workplace, low job security, and the most important factor which is job requirements.</p>
Upadayaya, K., Vartiainen, M. & Salmela-Aro, K. (2016)	<p><i>Burnout/illness versus life satisfaction and occupational health:</i> <i>The study explored cross-lagged relations between work environment and burnout. Factors such as a heavy workload, available resources versus demands (including physical, psychological and social resources/demands), and are used to study burnout.</i></p>

Table 2: Typical factors studied in relation to sick leave.

Gurt *et al.* (2011) expected to find that both health-promoting leadership and relationship-oriented leadership would be associated with a balanced workload for employees.

Overstressing was measured based on the level of role ambiguity, psychological climate for health, well-being, and levels of irritation. Larsson *et al.* (2014) also examined the factor health-promoting measures/leadership but compared it with a generally good working environment. Larsson *et al.* (2014) emphasized both the work environment and the

individual's behavior and attitudes as determinants of health. Further, Schreuder *et al.* (2011) claims that relationship-oriented managers that uses situation-based approaches have a low sick leave, mainly because this management behavior leads to increased job engagement, increased efficiency, and increased self-reliance and achievement for employees. Stapelfeldt *et al.* (2013) studies whether frequent short-term sick leave is related to the working environment, while long-term sick leave is related to health. The study pinpoints that the numbers on reported absence among nurses in elderly care indicates a need to detect unfavorable changes in the working environment as early as possible in order to maintain well-being and efficiency. Research has shown that both mechanical, social, and psychosocial factors can increase the risk of headache severity. Thus, Christensen and Knardahl (2012) investigates which psychosocial, social- and mechanical factors increase the risk of headache (and sick leave next). The job-requirement-resource model by Demerouti *et al.* (2001), shows a connection between job requirements and the availability of job resources. In this study, Schaufeli *et al.* (2009) also include the factor voluntary and involuntary sick leave. Voluntary sick leave is expected to be related to a harmful process of health, and involuntary sick leave is expected to be related to a motivational process.

5.2 Findings

Findings from the literature search on leadership behaviors impact on the work environment and sick leave are described in this section. First, they are presented in the table 3, then they are described in relation to theory and this thesis' research question.

Authors/Year of publication	Findings on leadership behaviors impact on the work environment and sick leave
Schreuder, Roelen, Van Zweeden, Jongsma, Van Der Klink, & Groothoff. (2011)	High leadership efficiency (a relationship-oriented leader who has the right behavior based on context and situation) was related to employees having fewer days of sick leave and also fewer short-period sick leaves.

<p>Stapelfeldt, Nielsen, Andersen, Krane, Fleten, Borg, & Jensen. (2013)</p>	<p>Long-term absence was related to poor health. It turned out that employees in elderly care had a high level of <i>presenteeism</i>, which means that employees work whilst being sick. This is considered the act/culture of employees that continues working as a performative measure, in spite of lower productivity and/or other negative outcomes. This phenomenon is also defined as a situation where employees choose to go to work, despite the fact that he or she perceives himself of herself sick enough to actually be absent. Younger workers had more short-term absence, whereas long-term sick leave was more evenly divided among the young and elder (which was assumed in advance), and this in turn was related to job commitment. The survey also showed that the unfavorable score on quality of leadership had stronger correlations to long-term sick leave than short-term sick leave. This coherence was remarkably higher amidst the older workers than the younger workers.</p>
<p>Gurt, Schwennen, & Eike. (2011)</p>	<p>Generally good leadership which is defined as relationship-oriented leadership by the authors, was significantly related to a lower workload among employees because of fewer cases of role ambiguity, and better psychological climate and well-being. Health promoting leaders had a high score on the psychological climate for health, but then again, it had higher scores on role ambiguity.</p>
<p>Shaufeli, Baker, & Van Rhenen. (2009)</p>	<p>Increasing job demands while simultaneously reducing job resources, predicts burnout. Only increasing job resources can lead to job engagement. Burnout and low job commitment can lead to sick leave, and the survey confirms a positive motivation process, or gain cycle when the job commitment is present, this predicts increased job resources, which in turn could lead to increased job engagement.</p>
<p>Larsson, R., Ljungblad, C. Sandmark, H. & Åkerlink, I. (2014).</p>	<p>Managers who received a high score on both having a generally good working environment and facilitating health-promoting measures, had both lower sick leave and better self-reporting health among its employees. Factors that had a direct association with sick leave was poor health, especially in regard to health-promoting measures, and well-being of employees within the team. The social climate had the biggest indirect effect on health and sick leave, followed by encouraging leadership.</p>

<p>Christensen & Knardahl. (2012)</p>	<p>Job requirements and decision control (meaning being able to make own decisions and having control over the situation), are known as risk factors for headache which is confirmed in the study. The study also confirms that role conflicts are even more consist risk factors for headache.</p>
<p>Upadayaya, K., Vartiainen, M. & Salmela-Aro, K. (2016)</p>	<p>Research found that spillover exist, mainly from job engagement to symptoms of depression (negative association), and life fulfillment (positive association) and symptoms of depression to job engagement (negative association) and burnout (positive association). Research also found that servant leadership and relationship-oriented leaders have a positive association with work engagement that further was related to life fulfillment. Lastly, a heavy workload had a positive association with burnout and depressive symptoms, which further had a positive associations with increased mental illnesses, and also a negative association with recovery.</p>

Table 3: Findings on leadership behaviors impact on the work environment and sick leave.

Gurt *et al.* (2011) researched a generally good leadership versus especially health promoting leadership because it was previously shown that health-specific programs and/or measures had a positive effect on costs for medical treatment, sick leave, and productivity. However, little research had been carried out on the causal relationship.

The assumptions that both relationship-oriented leadership behavior and health-promoting leadership behavior lead to less strain on the employee were not completely met.

Relationship-oriented leadership were associated with a lower workload among employees, while health-promoting leadership had a higher score on role ambiguity, which was associated with a heavier workload. The explanation might be that health-promoting leadership is new and less developed, which may lead to employees not being fully knowing what is expected of them. When employees do not know what is expected of them, it may be a sign of poor communication between the employees and the leadership, or that the leader has not taken the

lead as clear role models. Consistent leadership behavior over time may be necessary to achieve a positive effect in the long run (Kirkhaug, 2015).

The relationship-oriented leadership behavior was found to decrease the cases of role ambiguity whilst increasing the psychosocial climate and well-being of employees. A relationship-oriented leader focus on employees' motivation, development, and well-being. There is a close social relationship between the leader and the employees, and such climate will encourage openness and dialogue (Kirkhaug, 2015).

Health-promoting leadership on the other hand, had a higher score on the psychological climate for health. It is pointed out that a good psychological climate for health is a key factor for better health and a lower sick leave. Additionally, Gurt *et al.* (2011) pinpoint that it is essential that leaders lead by example as they serve as prominent role models. Gurt *et al.* (2011) also states that a leaders commitment to employees well-being is reflected through the organizations behavior towards employees and improves the psychological climate at the workplace. Succinctly, the study indicate that what leaders focus on will lead to a good and psychologically healthy climate, and that the leadership must do this by lead by example.

The results support this thesis' assumptions that the leadership qualities such as consideration, discretion, and communicative openness are related to efficiency, well-being, and low sick leave. It is also proportional with research claiming that having a dialogue with employees and daring to take difficult conversations is essential characteristic of leaders with employees with low sick leave (Kvernes, 2014). Supplementarily, this thesis assumptions that there is a association between the leadership trait integrity and behavioral consistency, and a low sick leave in the workplace, are met.

Stapelfeldt *et al.* (2013) compared the self-reported psychosocial work environment among municipal employees in elderly care in Denmark with the registered sick leave. The authors expected a connection between long-term absence and poor health, and short-term leave and work environment. These assumptions were not met, as it turned out that long-term sick leave is an equally good, or perhaps better, indicator of a poor work environment. Stapelfeldt *et al.* (2013) stated that the connection between a poor work environment and long-term sick leave could be explained through adverse job-demands. Further, job-resource scores were related to employees taking over fourteen days of sick leave compared to employees taking less. The study ended up confirming that adverse job requirements and unfavorable job resources can lead to creating a poor work environment, which ultimately affects the length of sick leave among employees.

The lack of a good quality leadership and employees job engagement were proved to be critical factors apropos to sick leave. Older workers were found more engaged in the job than the younger workers, which resulted in a lower sick leave among the older. However, a link was also found between poor quality leadership and long-term absence among these employees.

Demerouti *et al.* (2001) job-requirement-resource model pinpoints that job resources contribute to job engagement through a motivational process. Based on this, it can be assumed that the older employees in the above study had been motivate over years through the availability of resources. Simultaneously, the study indicates that the factor of having a poor leadership can lead to sick leave despite employees having the right job engagement. The authors assume that this may be a result of being exposed to a constantly increasing pressure

at work, while at the same time, employees chose to work even when sick. This ultimately ends with employees who can no longer cope with the pressure and therefore has to go on sick leave. This result supports this thesis assumptions that the leadership's influence on employees job motivation is high (Kirkhaug, 2015). Also, even if the employees job commitment is present, the leaders behavior is what becomes decisive for whether the employee is motivated to attend work or not.

The connection between long-term sick leave and bad scores on leadership qualities among older employees may also be a result of a lack of supply of resources. Just like Norway, all citizen of Denmark's has access to universal, equal, and free health and social care services that are financed by municipal taxes and limited contributions from the state. Increased funding's to strengthen the public health infrastructure and workforce is strongly needed, and "in the fight for funds", the health and social care sector is struggling to provide resources that corresponds to the increased need for care and nursing among an aging population (Hermansen, 2011).

According to Shaufeli *et al.* (2009), job engagement can lead to a positive motivation process and increased access to job resources, which in turn leads to increased commitment. If this supply of resources stagnates over time, and the employees are still committed and dedicated to work despite poor health, the positive effect of access to resources is no longer achieved. This is because the requirements exceed the availability of resources, and employees must obtain their motivation elsewhere. How the management manages to motivate employees to work can be essential for the choice between going to work or being on sick leave.

A challenging context as the one described above, supports this thesis assumptions that a

supportive company culture is crucial across all types of organizations. Mainly because it fosters social and psychological conditions that optimize employees' health, safety, and well-being. When job engagement is present, employees perform better and might achieve their fullest potential. At the same time, the study supports the assumptions that a delegating and service-minded leadership behavior might be necessary in order to retain professional workers, achieve efficiency, well-being, and a low sick leave.

Schreuder *et al.* (2011) studied leadership effectiveness as a result of appropriate behavior in relation to both context and situation. It is referred to a review of 126 studies conducted among nurses, and the conclusion was that a social supportive culture at the workplace resulted in less stress and a lower sick leave rate. However, only one of these studies focused on the role of leadership, which led them wanting to conduct more research on the significance of leadership behavior for well-being and absence. They expected that if a relationship-oriented leadership behavior was adapted to context and situation, it would lead to better health among employees and also a better working environment (Einarsen, Martinsen & Skogstad, 2017). This assumption was confirmed as the study showed a clear connection between leadership efficiency, fewer days of sick leave and also fewer employees on short sick leave.

The results support the assumptions in this thesis that a leader who matches behavior with context and situation may have a lower sick leave rate among its employees (Einarsen, Martinsen & Skogstad, 2017; Kirkhaug, 2015). A relationship-oriented behavior is usually characterized by leaders who focus on supporting, motivating, and developing people on their teams and the relationship within. A key factor is also trust which is good for morale and motivation. Sometimes this may lead to extra-role performance, which is behaviors of

employees, which are not part of their formal job requirements. Lastly, it bolsters the communication at the workplace which in turn leads to efficiency, well-being, and lower sick leave. Leadership qualities as integrity, behavioral consistency, consideration, communicative openness, and discretion, can be crucial to gaining this trust according to Kirkhaug (2015).

In Christensen and Knardahl (2012) study, they confirmed that psychological factors such as job demands, decision control and role conflicts, were all confounding risk factors for headache severity. The authors suggest that the best protective factor against headache severity is empowering leadership and involving employees in making decisions. Involving employees in decisions makes them feel valued and important to the organization and its success. When making decisions it can also foster better communication which can better the employer-employee relationships.

The study of Christensen and Knardahl (2012) confirms the hypothesis in the *Requirement-Control-Support Model* by Karasek and Theorell (1990). The model suggests that there is a potential risk of health-related problems and sick leave when job requirements exceed control over decisions. The authors pinpoint that an empowering leadership is the most consistent protective factor for developing headache severity, which confirms the assumptions made in this thesis. Work environments and situations are dynamic, so a leadership that can adapt leadership style based on the situation, ensures best use of resources and tools which may reduce employees workload and thus, decrease the company's sick leave rate (Kirkhaug, 2015; Einarsen, Martinsen & Skogstad, 2017).

Larsson *et al.* (2014) compared *general psychosocial work conditions versus specific workplace health promotion measures* in relation to Swedish municipal social care workers'

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health, sickness presence and sick leave. The results show that leaders may encourage employees health through several health-promoting activities and programs like dietary advising, help to stop smoking and exercising, or creating a superior work environment through development and support of employees, measures for preventing role conflicts, and a supportive social work climate. It was found that organizations that had favorable ratings of psychosocial work conditions at their workplace was in line with better self-reported health and lower sick leave levels and among employees. The study is also in line with earlier research and descriptions to the challenges of comparing effects from specific and general workplace health measures.

In Larsson *et al.* (2014) study, the necessity of a transformational leadership is thoroughly discussed. Transformational leadership is defined as a leadership approach that enhances the morale, motivation, and performance of employees through an assortment of mechanisms. These are known as “*inspirational motivation, intellectual stimulation, idealized influence, and individual consideration*” (MSG, 2021). The authors also include research that confirms why the leadership approach is important. Further, the authors claim that the health sectors’ specific characteristics contains demands including close social contact with patients and the responsibility of solving their personal problems as they occur. Hence, practicing a relationship-oriented leadership style is seen as important within this sector (Nielsen, Randall & Yarker, 2008). A recent review has also shown that this leadership approach can lead to enhanced health and well-being (Cummings *et al.*, 2010), and here, the authors pinpoint that employees like social health workers who have close contact with patients usually demands a similar close relationship-oriented leadership.

Leaders that were good at co-determination, feedback and implementing competence

development programs had better social climate, and thereby also better health reported among employees. These facts support this thesis' assumptions that a leader who is motivating and supportive, who manages to resolve conflicts, and makes the employees feel as if they are going through a continuous learning and development process at work, will thus have a lower sick leave among employees. The results further indicate that a supportive leadership results in fewer role conflicts which creates a better social climate, better health, and ultimately lower numbers of sick leave. This is also in line with the Requirement Control Support model by Karasek and Theorell (1990), which states how important social support is from colleagues and the leadership, as this can act as a buffer against health problems when job requirements are high.

Shaufeli *et al.* (2009) tested whether an imbalance between job requirements and job resources can cause strain and sick leave. Results indicate that increased job requirements (for example interference with leisure time) and reduced job resources (for example social support and development programs) predict burnout. Further, increasing job resources forecast work engagement and lastly, burnout and low engagement predicts registered sickness duration and frequency correspondingly. This agrees with previous cross-sectional research on predictions of burnout (Halbesleben & Buckley, 2004).

This study found that cynicism and exhaustion have a direct correlation to job demands like emotional demands, work overload, and work home interference. Relatedly, Shaufeli *et al.* (2009) discovered that increasing demands had an impact on the development of burnout and thus validating the strain process from *the Job Demands Resource model*. This agrees with previous cross-sectional studies on predictions of burnout.

The organizational culture and climate also influence the level of job commitment significantly. As the social health sector is a changing industry, and the organization from Shaufeli *et al.* (2009) study has gone through privatization and downsizing process shortly before the study, it is responsible to assume that the culture in the organization is a bit divided. Kirkhaug (2015) emphasized that culture is created by mechanisms outside a leaders control, and that changing a culture is a particularly demanding leadership job. A unified, desired culture will thus make the perfect basis for a democratic and delegating leadership behavior. A culture like this involves mutual trust between the leadership and the employees. When a culture is not desirable, divided, nor strong, the leadership must act in a completely different way to clarify the purpose and direction, which possibly affects the trust between the leadership and employees (Kirkhaug, 2015).

Shaufeli and Enzmann (1998) claims there are two ways the leadership can reduce risk of burnout and sick leave, which is to first reduce the job demands, and secondarily, provide job resources like job autonomy and performance feedback (pp. 143-183). It is further pinpointed that the leadership must ensure that the number of tasks are manageable, and the requirements realistic, so that employees leisure and private life stays undisturbed. It is also pointed out that the leadership has to ensure good job autonomy, training- and development programs, as well as providing social support and performance feedback.

Utmost leaders from Shaufeli *et al.* (2009) study were former technicians who had been given leadership positions due to previous technical expertise. This supports Kirkhaug (2015) theory which states that a delegating and service-minded leadership behavior may be necessary to retain professional employees. A supportive culture may be necessary to achieve loyalty and

well-being, which in turn can lead to lower sick leave. This is in line with the assumptions in this thesis that contextual conditions affect the leadership (Kirkhaug, 2015; Einarsen, Martinsen & Skogstad, 2017). Additionally, the theory and assumptions in this thesis that a leadership must facilitate a balance between job requirements and job resources in order to achieve low sick leave are supported (Shaufeli, 2009).

5.3 Short analysis of all studies

The most important findings in this thesis can be summarized through the keywords namely quality of leadership, job engagement and job resources, work environment, role conflicts and job control.

Job engagement and job resources

In view of the findings, there are several indications that job commitment is related to both job resources and an organizations culture (i.e., social climate, work environment). Job engagement can either be a result of good access to job resources, or of a desired work culture (i.e., social climate, work environment). As mentioned above, job engagement can also be a result of a leadership of high quality. A positive motivational process was also established as job commitment in principle indicate increased access to resources which in turn indicate increased job commitment.

The quality of the leadership

In view of the findings, it was found that leaders who has a high score on relationship-oriented leadership, also defined as generally good leadership/health promoting leadership/supportive leadership, have a positive effect on reported sick leave levels among employees. In a similar vein, having a high score on being able to match leadership behavior,

context, and the employees' situation (leadership effectiveness), also have a positive effect on reported sick leave levels among employees. When employees value its leadership, it is usually due to mutual trust and good communication, which further can cause employees to create better job engagement and extra-role performance behavior. The job engagement has an important effect on sick leave levels, but the quality of leadership is proven to have an even bigger effect. Even if job engagement is present, the studies suggest that an increase in job requirements and workload, it is the leaderships behavior that is decisive when it comes to employees motivation to work or going on sick leave.

The work environment

In view of the findings, it looks as if a good work environment with a good social climate at a supportive culture has direct correlations to better health and a lower sick leave rate among employees. In order to create a good work environment, it is crucial to maintain sufficient access to job resources and balance between requirements these resources and requirements. Altogether this should motivate employees to go to work. Yet, the quality of the leadership is an even more important factor in motivating the workforce to go to work when the workload and the demands are high. Among social workers and nurses who often works with patients who are suffering from a variety of physical and mental illnesses, there are several indicators that relationship-oriented behavior will be the most beneficial for achieving well-being and a good work environment.

Job control

In view of the findings, there are several indicators that the best protection against headache severity is job control. Job control is defined as an individual's ability to influence what happens in his work environment and experiencing this type of control at work seems to be

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related to both better health and a good social climate.

Role conflicts

In view of the findings, a direct correlation between role conflicts and headache severity was found. Role conflicts at work was seen as an equally vast risk factor as increasing demands, and low control (including decisions, work intensity and job satisfaction). These factors were found to have a relation to more severe headache at check-ups. Moreover, all studies specify that a supportive, relationship-oriented leadership can lead to less role conflicts, which in turn can lead to a better social climate, better health, and ultimately lower reported sick leave. In one study, health-promoting leadership was associated with an increase in role conflicts, but this may be due to the concept being relatively new and less developed, which may lead to employees not fully knowing what is expected of them.

Chapter 6: Conclusion

6.1 Summary and conclusion

The purpose of this thesis was to develop a deeper knowledge and understanding of leadership behaviors impact on the work environment and sick leave. This was carried out through a literature review on research literature, and the aim was to contribute to increased understanding and knowledge on the topic.

In addition to providing direction, guidance and inspiration, a good leader must deal with a large amount of uncertainty both in terms of the leadership role, responsibilities, tasks, and work processes (Einarsen, Martinsen & Skogstad, 2017). The author of this thesis' experience (see section 1.1) where the employment relationship ended in sick leave and resignation is a good example that something went wrong between the leadership and the employee. The

author therefore wants to discuss what went wrong based on theory from this thesis.

Considering the findings, several signs occurs that there was a lack of both trust and dialogue between the employee and her leader. Trust must be earned and comes from conscious efforts over time. In this case, the employee had only worked for a short period of time, which probably meant she and her leader did not have sufficient time to gain this trust which ultimately also provide job motivation, security, and good and open communication. Research has shown that leaders who fosters good and open communication with its employees usually has lower sick leave rates. Findings from this thesis also indicate that a leader who acts in a motivating and supportive manner, who manages to solve conflicts in a way that employees feel as if they are going through a learning and development process, have a higher chance of lower sick leave rates.

In a similar vein, there are also several signs that there was an imbalance between demands and her involvement in making decisions – even the smallest. Findings suggest that when employees are actively participating and experiencing control at work it often leads to increased productivity, better health, and a good social climate. In this case, the employee went to the leader for help and guidance, but instead she was met with accusations and evaluations that turned into something completely different. After the incidence, the employee most certainly did not feel as she gained more control. Most likely, she skepticism she encountered led to her gaining even less control over her own situation, and less opportunities to make her own decisions. Research found on this matter claims that whenever requirements exceed the control over decisions, there is a risk that health problems and sick leave occurs.

Suggestions confirm that the employee did not have the required access to resources to

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experience a balance between resources and requirements. Research has shown that if job demands increase (i.e., emotional demands, a heavy workload, or disruption of private life) and reductions in resources (i.e., social support, performance feedback, and development programs) occur simultaneously, it can indeed lead to burnout and sick leave. If, however, job resources increase and demands are the same, it can lead to higher job engagement. It was also found that job engagement can be a result of a good work environment. In this case, the work environment was most likely ok since the employee was committed and tried to keep on working at the gym after the meeting. However, there was a lack of social support from the leadership and also opportunities for training and development.

Based on theory found during the literary review, suggestions indicate that a supportive, relationship-oriented leadership style is likely to ensure all employees feel valued and emotionally safe in the workplace. Leaders who follow a relationship-oriented approach primarily focus on employees motivation, and the development of the people on their teams and the relationships within. These leaders also tend to carry leadership qualities such as consideration, integrity, communicative openness, and behavioral consistency. Research also indicate that the efforts people put into their work are partially carried out as part of a social contract based on expectations of rewards such as money, valuation, job security and career development. A persistent imbalance between efforts people put into their work and rewards increases the risk of strain and various types of illness. Regarding the case explained in the introduction (see section 1.1), the employee was met with accusations and pointing out mistakes instead of having a good dialogue and a support system. This indicates that her leader did not carry the right leadership behavior suited for the situation.

If the leader had adjusted his style to match the situation the employee was facing, many

indications suggest that the outcome would have been beneficial for both. At first, it could potentially have led to mutual trust and appreciation. If this had been the case, she most likely would have felt valued and the communication was good. A result could therefore be that the employee could put on extra role behavior. Further, the mutual appreciation could have led to job engagement which plays an important part on sick leave. However, even if the job commitment was present, findings reveal that with an increase in requirements and a heavy workload as she experienced, the leaders behavior will still be decisive for whether the employee is motivated enough to go to work.

Research reveals that receiving social support at work act as a buffer against physical and mental health problems which can arise from high demands at work. Social support refers to the availability or actual assistance provided to the employee by the leadership and colleagues. This is known as an important factor to achieve loyalty and well-being in the workplace, which in turn can lead to a lower sick leave level.

In summary, it can be concluded that the leadership is of great importance for employees motivation to work - particularly when demands are high. According to Kaspersen (2017), YouGov conducted interviews on the development of job demands and social support for Dale Carnegie Training with over thousand participants. A total of 61% of Norwegian workers claimed that demands have increased while the time span for completing tasks have decreased the past years. This development indicate that the importance of a good leadership will continue to be crucial in regard to minimizing the sick leave rates in the future.

6.2 Limitations

There are certain limitation to this study. First and foremost, the time span of the research

articles can be considered as a limitation. Leadership behaviors, rules and legislations may have changed and will continue to change in the future. These also differ from country to country. Moreover, the authors focus was on one factor (leaders behavior) that affects sick leave. To explain the maximum possible measure of the variability in sick leave, it would be best to include several influencing factors.

6.3 Suggestions for future research

Research on leadership must take employees well-being serious as a measure in and of itself. More specifically as a ultimate purpose instead of as a mean to increased performance (Grant, Christianson & Price, 2007).

Further, the author recommends constructing the same research on leadership and sick leave within in a specific sector/context. More precisely, leadership behaviors impact on employees well-being within health organizations. Sick leave is particularly high within this sector, which is why increased, and updated knowledge could potentially alter the way things are done. This knowledge could potentially be turned into measures and actions to reduce or prevent sick leave. Additionally, future research should include re-assessing and expanding of frameworks, models, and new evidence/theory.

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Appendices

Appendix 1. Literature Map

Literature Map		
Background information on the studies and the journals	<p>What to search for:</p> <ul style="list-style-type: none"> - Name of publisher/Journal - Name of author(s) - Year of study conduction - Study purpose - Methodology - Selection criteria 	<p>Type of study:</p> <ul style="list-style-type: none"> - Qualitative - Quantitative - Both qualitative and quantitative - Long-term study - Cross-sectional study
Leadership Behavior	<ul style="list-style-type: none"> - Which tasks are prioritized? - Type of behavior - Is the leader perceived as caring, discreet, and communicatively open? - What tools are utilized - The employees perception of the leadership, meaning integrity and behavioral consistency - Is there mutual trust between the leadership and employees - How is the dialogue between leadership and employees? - How does the leader manage difficult situations and conversations? 	<ul style="list-style-type: none"> - Is the leadership proactive, process active or reactive - Is the leadership task-oriented, relationship oriented, strategy-oriented, or change-oriented - Is the leadership authoritarian, restraint, dominant or democratic - What goals, frameworks, visions, control, rules and reward/punishment are practiced
Organizational context/conditions	<ul style="list-style-type: none"> - Name of the organization(s) - What industry - Is organizational form/size included? If so, does this impact leaders behavior, well-being, and sick leave? - Is employees professionalism described? If so, does this impact leaders behavior, well-being, and sick leave? - Is the organizational culture included and described? If so, does this have an impact on 	<ul style="list-style-type: none"> - The amount of employees - Annual turnover - Is the organization public or private Bureaucracy? - Flat structure or hierarchy - Organic structure - Matrix management - Team-based organization

	leadership behavior, well-being, and sick leave?	
Sick Leave	<ul style="list-style-type: none"> - How employees perceive the balance between requirements and decision control at work - Do employees receive social support and do they feel valued/recognized - How employees perceive the balance between requirements and available resources - How employees perceive the balance between effort and reward - Is it correct that the sick leave levels increases if requirements exceed the decision control, or if there is no social support, or when demand increase whilst resources decrease, or when efforts are higher than the rewards? 	<ul style="list-style-type: none"> - Job satisfaction - When requirements exceed decision control, does the risk of health problems and potential sick leave arise? - Stress-related disorders - Stress-related disorders which in turn can lead to an increased risk of diseases such as depression and anxiety
What associations are described between leadership, the work environment and sick leave?	<ul style="list-style-type: none"> - Do leaders manage to match behavior with the organizational conditions and the employees situation so that both well-being and efficiency increases? How does it impact sick leave levels? - Is there mutual trust between leader and employee? Does it lead to extra role behavior and/or good communication? - When a leader is perceived as caring, discreet and communicatively open, does the sick leave levels decrease? - If employees associate a leader with good personal integrity and having behavioral consistency, does sick leave levels decrease? - Is it correct that leaders who faces difficult situations and has a good dialogue with employees have less sick leave among employees? 	<ul style="list-style-type: none"> - Tools - Tasks - Briefing - Performance - Culture - Organizational size - Organizational form - Employees professionalism