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THE EFFECT OF THE SELFLESS LEADERSHIP PROGRAM

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By

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A DISSERTATION IN PRACTICE

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Abstract

Emotional intelligence is understanding how the consequences of our actions have an effect on ourselves, and others. As an executive branch of the federal government the Department of Defense (DoD) is a complex world. Leaders within the DoD lead, and supervise personnel from many agencies and, if based in the overseas environment, many different cultures. Understanding and managing emotions allows leaders to display compassion when needed, motivate through communication, and build trusting relationship that allow collaboration across teams and cultures. Collaboration leads to innovation which in a fiscally constrained environment is critical. This Dissertation in Practice research was designed using a quantitative two-phased approach to understand what individual behavioral changes occurred in the Landstuhl Regional Medical Center (LRMC) Selfless Leadership Program (SLP) participants since completing the program. The aim of this study was to provide an evidence-based assessment of the effect of the program. Data was collected from the participants of the first five cohorts who completed the program. Analysis using ANOVA, and t-tests was performed to test the hypotheses formed in phases one and two. Statistically significant relationships between the SLP and global trait emotional intelligence and psychological empowerment were noted. The value of this research is in understanding the outcomes of a program designed to enhance the emotional intelligence of the participants and to measure the behavioral changes experienced by the participants who have completed the program.

Keywords: Emotional intelligence, self-awareness, trust, engagement

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Dedication

This dissertation is dedicated to the two most important men in my life, my amazing husband Rene and our wonderful son Christopher. Rene, this is our accomplishment, without your love, patience, and encouragement this goal would never have come to fruition. Christopher, there is not a day that goes by that you do not inspire me.

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Table of Contents

List of Tables

List of Figures

Page

CHAPTER ONE: INTRODUCTION

Introduction and Background

Cawsey, Deszca, and Ingols (2012) outlined that organizational change was necessary as the world constantly evolved around society. According to Cawsey et al. (2012), to survive and remain competitive, organizations must change. While Landstuhl Regional Medical Center (LRMC) is a Department of Defense (DoD) organization and not considered a for-profit business, a need exists for DoD organizations to retain personnel, both military and civilian (DoD, 2017). The DoD Strategic 2013 to 2018 Workforce Plan (Defense Civilian Intelligence Personnel System, 2013) stated the ability to attract, develop, and retain the workforce was a strategic imperative to ensure the DoD was meeting current and future missions. The United States Office of Personnel Management (U.S. OPM), the independent agency of the U.S. government that manages DoD civil service employees, stated that only 55% of the 65,007 DoD respondents were happy with their organization (U.S. OPM, 2013). The trend continued through 2014 and 2015 with 63% and 64%, respectively, of respondents answering that they were happy with their organizations (U.S. OPM, 2016). Another study showed that federal employees with low satisfaction were five times more likely to leave federal employment than those employees who were satisfied (Lavigna, 2013).

Retaining talented personnel allows DoD organizations to remain mission prepared at all times. In his first speech, Defense Secretary Ash Carter stated that defending the United States was not about equipment, or the latest machinery (as cited by Barno & Bensahel, 2015). Instead, it was about talent and how to find, get, and keep the best civilian and military talent in the DoD (Barno & Bensahel, 2015). In a study by

Saeed, Waseem, Sikander and Rizwan (2014) it was found that there is lower rate of employee turnover and a higher rate of engagement in organizations where emotional intelligence is high. The Saeed et al. (2014) results correspond to the findings of Dutta and Banerjee (2017) who found that a key factor in employee satisfaction was the emotional intelligence of the managers, which ultimately led to a higher rate of retention.

The Selfless Leadership Program (SLP) is a leadership development program created in 2014 at LRMC. The program is designed to allow each participant to learn experientially how to manage their own behavior, feelings, thoughts, and beliefs consciously (Broom, 2015). The program consists of 12 sessions that start with introducing the participants to the concept of mindset. Dweck (2006) identified two basic mindsets, fixed and growth. Individuals with a fixed mindset have a belief that they must prove themselves constantly and that a person's intelligence is a matter of genetics. Individuals with a fixed mindset have a goal of appearing intelligent at all costs and believe failure must be avoided at all costs (Dweck, 2006). In contrast, individuals with a growth mindset believe talents can be cultivated through application and experience and will seek learning opportunities for growth (Dweck, 2006). An individual's mindset, according to the Arbinger Institute (2017), can impede an organization's results. In a two year study conducted by Delaney (2014) to understand the correlation between a growth mindset and behaviors in the organization, it was found that organizations that foster a growth mindset have employees with a higher levels of trust, ownership, commitment and loyalty which led to collaboration and innovation. Session 2 of the SLP is based on the Myer-Briggs Type Indicator (MBTI) theory of psychological types. MBTI, according to the Myers and Briggs Foundation (2017), is based on the theory that random behavior

in individuals actually consists of logical and constant thoughts. Other sessions in the SLP include how to give and receive feedback, systems thinking, influence and playing win-win, and learning from differences.

All the sessions in the SLP are structured to allow the participants to understand their behavior and the ways in which it may influence others. Ultimately, the goal of the program is to enhance the emotional intelligence of the participants to understand ways in which their behaviors affect others, both professionally and personally. Wirth (2004) studied the requirements for organizational change and identified that successful organizational change begins at the individual level by focusing on the behavior at that level. A factor, which can influence successful change in organizations, is the level of emotional intelligence demonstrated by the leaders of the organization (Connell & Travaglione, 2004). The four domains of emotional intelligence (i.e., self-awareness, self-management, social awareness, and relationship management) are all critical elements of resonant leadership (Goleman, Boyatzis, & McKee, 2013). The four domains of emotional intelligence are intertwined, meaning that one domain could not be separated from the other domains if leaders were to become selfless leaders. The domain of self-awareness was critical, as LRMC was an organization built on the value of selfless service. Selfless service, according the U.S. Army (2011), leads to teamwork and self-control, thereby encompassing discipline.

Figure 1. Enhancement of emotional intelligence.

As demonstrated in Figure 1, enhancement of emotional intelligence may have a positive ripple effect on the organization. This ripple begins with emotional intelligence, leading to increased self-awareness and increased trust, which gives individuals the ability to build trusting relationships that leads to a more engaged workforce. Utilizing a 360-degree instrument Durgin (2006) highlighted the key factors that related to effective leadership, 10 out of the 16 leadership factors related to leadership success had a relationship to emotional intelligence factors. There is evidence that an enhanced engagement between federal employees and their organization is related to the improved organization outcomes (U.S. Merit Systems Protection Board, 2008). The U.S. Merit Systems Protection Board (2008) stated that in Federal agencies, where the employees were engaged, better results occurred when compared to the agencies where the employees were not engaged. In a study conducted by Oswald, Proto and Sgroi (2015) employee happiness was found to be a factor that led to increased engagement and productivity at work.

Statement of the Problem

The SLP was designed to enhance the emotional intelligence of the SLP participants. By increasing emotional intelligence, the workforce is more engaged and innovative, leading to organization results (Prati, Douglas, Ferris, Ammeter & Buckley, 2003). Bandura (1986) provided insight into emotional intelligence by stating that systematic observation of self could provide important information that allowed individuals to self-diagnose their thought patterns, emotional reactions, and how they behaved in certain conditions. Prior to this dissertation study, there was no empirical evidence regarding the influence of the SLP on the individuals participating in the program. This lack of evidence made it impossible to make data-driven decisions about either refinement of the program (to determine which elements are either effective or ineffective) or expansion of the program to other military medical facilities.

Riley, Hatfield, Freeman, Fallesen, and Gunther (2014) found that the behavior of military leaders related to the behavior of subordinates, groups, and organizational effectiveness. Cherniss and Goleman (2001) stated that the most effective leaders were those who have the ability to sense how their employees were feeling about situations at work, and know how and when to intervene when employees were feeling disheartened or discontented. Humans recreate themselves through learning (Senge, 2006). This fact aligned to the basic premise of the SLP (i.e., that individuals can change their behavior through learning). The SLP was designed to allow the participants to learn about themselves in a safe, creative environment. The SLP was intended to improve both military and civilian leadership through enhancement of emotional intelligence.

Purpose of the Study

The purpose of this quantitative study was to identify what individual behavioral changes occurred in the Landstuhl Regional Medical Center (LRMC) Selfless Leadership Program (SLP) participants since the implementation of the program.

Research Question and Hypotheses

The following research question and hypotheses guided this quantitative inquiry:

Research question: What behavioral changes do SLP participants describe following participation in the Selfless Leadership Program?

Hypothesis #1: There will be a difference in the levels of the Trait Emotional Intelligence factors of the participants of the Selfless Leadership Program after completing the program.

Hypothesis #2: There will be a difference in the levels Psychological Empowerment factors in the participants of the Selfless Leadership Program after completing the program.

Aim of the Study

The aim of this study was to provide an evidence-based assessment of the effectiveness and impact of the SLP with recommendations for appropriate next steps. The next steps could include program refinements or expansion of the program into other military medical facilities and expanding the program to include the LRMC Army health clinics in Belgium and Italy.

Methodology Overview

This study used a repeated measure quantitative research design in both phases. The first phase of the design utilized existing survey data that were collected from the

participants prior to attendance and immediately post attendance in the SLP. The second phase of the design tested the hypotheses formulated at the completion of Phase 1 of the study, by collecting data after a longer period had elapsed since SLP participation.

Definition of Relevant Terms

The following terms and abbreviations of acronyms are used within this study:

Army Doctrine Reference Publication (ADRP) 6-0: Tactics and procedures to be used by commanders and staff organizations of the U.S. Army (2016; ADRP 6-0, 2012).

Army Doctrine Reference Manual (ADRP) 6-22: Establishes the leadership principles that apply to officers, noncommissioned officers, enlisted soldiers, and civilians of the U.S. Army (2016; ADRP 6-22, 2012).

Department of Defense (DoD): Executive branch of the department of the federal government (DoD, 2017).

Emotional Intelligence: The capacity to be aware of, control, and handle one's emotions.

High Reliability Organization: An organization that has succeeded in avoiding catastrophes in an environment where normal accidents can be expected due to risk factors and complexity (Army Medicine, 2014).

Medical Command (MEDCOM): A direct reporting unit of the U.S. Army (2016) that provides command and control of the U.S. Army's medical, dental, and veterinary treatment facilities.

Self-awareness: The conscious knowledge of one's own motivation, desires, character, and feelings.

U.S. Army: The largest branch of the U.S. Armed Forces.

This study was conducted within the U.S. Army (2016), Medical Command (MEDCOM). Acronyms that are not of common usage have been expanded upon in this section.

Delimitations, Limitations and Assumptions

The participants of Phase 1 of the research study were all within the Landstuhl Regional Medical Center (LRMC) and were either active duty military personnel or DoD civilians. The participants of Phase 2 of the research study were personnel still within LRMC and the personnel from the Phase 1 study who moved to different U.S. Army (2016) locations. LRMC has a unique mission for the DoD, as the only DoD medical center in Europe. The personnel of LRMC were the participants of SLP. A delimitation of the research study was that it only focused on the group of people that attended the SLP. A limitation of the study is that it is not replicable to other non-DoD organizations due to the unique mission of LRMC. The pre-existing data used in Phase 1 of the research study were based on two survey instruments delivered to the participants of the SLP in 2015. The purpose of the use of the pre-existing data was to utilize existing data that had been collected, but never analyzed, to explore potential changes from pre-to post-scores among participants. The use of pre-existing data in Phase 1 represented a limitation created by the methodology used because only the collected data and not additional elements could be analyzed. This limitation was mitigated through Phase 2, in which additional needed data were collected. The responses to the surveys were collected anonymously, which was an intentional limitation to protect respondent privacy. Other limitations in the study included the possibility of the Hawthorne effect (giving answers that they believe I wanted to hear) as the participants were known to me. Finally, an

assumption is that the surveys were reliable, and valid, as based on the survey creator demonstration of validity and reliability.

The Role of Leadership in this Study

Goleman (2004) stated that the most effective leaders have a high degree of emotional intelligence. Effective leadership, according to Myers and Sutcliffe, (2017), is critical in organizations where high reliability is the goal. The U.S. Army Medical Command set its sights on becoming a High Reliability Organization (Wolf, 2014). One of the tenants of a High Reliability Organization (HRO) is "deference to expertise" (Shapiro & Jay, 2003). The premise behind this tenant is that rank is not a factor when someone has expertise to carry out the mission and that each individual, regardless of rank, is capable of ideas and has expertise that will aid the medical center in becoming a HRO. The SLP allowed participants to explore their ego regarding allowing decisions to be made from those of a lower rank or grade.

The army's command philosophy, contained within the Army Doctrine Reference Publication 6-0 (ADRP 6-0, 2012), stresses that command is essentially a human endeavor. The principles of ADRP 6-0 (2012) included that leaders must build cohesive teams through mutual trust. Successful leaders, according to ADRP 6-0, understand that their leadership guides the development of teams and helps to establish mutual trust and shared understanding throughout the force, influencing both military and civilian members of the DoD (2017).

The Blessing White (2012) employee engagement report stated that trust in leadership could have a significant impact on the how engaged employees are in the organization. The report noted that employees were more likely to trust their direct

supervisor, as opposed to the senior leadership in the organization. Interestingly, the report also stated that senior leaders struggled with understanding which leadership behaviors correlated to workforce engagement. However, Blessing White (2012) found that senior leaders have the potential to have the greatest influence on the level of engagement of the workforce.

Similarly, Grenny, Patterson, Maxfield, McMillan, and Switzler (2013) stated that senior leaders have enormous influence on the behavior of those within the organization. The senior leaders of LRMC were the first participants of the SLP. This decision was based on the belief that if the senior leaders experienced a change and the change resulted in building a trust environment that improved teamwork and collaboration, it would invite others to take part in the program. The goal of the SLP was to help each participant in his or her journey toward becoming his or her best self. This goal required work at a deep level from each individual to enhance or develop his or her emotional intelligence. The research study involved exploring if SLP enhanced the emotional intelligence and the psychological empowerment of the participants. Enhancing the emotional intelligence of the participants might have a ripple effect on the organization, which had an effect of the organizational climate and produced a more engaged workforce.

Significance of the Study

This study was significant for several reasons. One of the U.S. Army's (2016) mission command philosophies is that leaders must build cohesive teams through mutual trust. Army doctrine defines trust as "assured reliance on the character, ability, strength, or truth of someone or something" (ADRP 6-0, 2012, p. 20). The Center for Army

Leadership (2014) *Annual Survey of Army Leadership* (CASAL) report showed that 83% of the 23,264 respondents indicated a favorable level of trust, while 17% (3,955) of respondents indicated that trust was low or very low. According to Dirks and Ferrin (2002), the two perspectives through which trust could be measured included behavior and performance. The need for further research on how to enhance and measure the emotional intelligence of the soldiers and civilians of the U.S. Army (2016) is critical in ensuring that the army's mission command philosophy is established and maintained. Brooks and Brooks (2005) stated that in today's environment, it is critical that leaders developed self-awareness and self-management. This study focused on emotional intelligence, self-awareness, trust, and engagement.

This research should contribute to the growing body of knowledge concerning emotional intelligence. A body of literature described the effect of leadership programs on organizations, such as the study by Black and Earnest (2009). However, limited literature measured the effect of enhancing emotional intelligence of individuals in military organizations. Without the evidence to determine the influence that the program was having within LRMC, it was impossible to determine if the program was having the desired effect.

Summary

The Landstuhl Regional Medical Center (LRMC) SLP was designed to allow participants the time and space to explore specific behaviors and beliefs that might potentially influence their personal and professional growth. Grenny et al. (2013) stated that to change behavior, one required learning new skills. The SLP was designed to allow participants to explore self with the goal of enhancing their emotional intelligence and to

learn from one another. To become a cohesive team, there must be trust (Lenconi, 2002).

Trusting relationships lead to engaged employees (Macey & Schneider, 2008).

According to Goleman (2010), emotional intelligence resides in the brain's limbic

system. Goleman (2010) stated that one's limbic system learns best through extended

practice and feedback. Hence, the SLP was designed to allow the participants to practice

new behaviors over a 10-month period and to receive feedback from facilitators and

fellow participants. The SLP was unique to both the Army Medical Command and the

U.S. Army. This evaluation research, regarding the influence the program had on the

individual, should add to the knowledge base of how to attract, retain, and maintain

personnel within the DoD. It is possible that change at the individual level could also

cause change at the interpersonal, group, and organizational levels.

CHAPTER TWO: LITERATURE REVIEW

Introduction

This literature review presents findings about emotional intelligence and explores the connections between emotional intelligence, self-awareness, trust, and employee engagement. Also explored was the effects of emotional intelligence and self-awareness on trust and workforce engagement, and the influence of the relationships with these factors.

Leadership Literature

According to Daniels and Daniels (2007), leadership is about behavior. The difficulty is that organizations have missions to fulfill that generally leave little time for leaders to develop critical aspects of leadership, such as emotional intelligence. Emotional Intelligence, according to Bradberry and Greaves (2009), is comprised of an individual's self-awareness and self-management skills. The development of emotional intelligence is the separator between leaders and those they lead (Brooks & Brooks, 2005). The benefit for leaders in developing their emotional intelligence is that it begins to change the organizational culture, fostering innovation, which will achieve organization results.

Emotional Intelligence

The genesis of the term *emotional intelligence* first appeared in the writings of Thorndike (1920), when he wrote about the following three intelligences:

1. *Mechanical intelligence*: The ability to learn, understand, and manage things and machines.

2. *Social intelligence*: The ability to understand and manage people to act wisely when working within human relations.

3. *Abstract intelligence*: The ability to understand and manage scientific laws, principles.

The description of the factors of social intelligence, described by Thorndike (1920), was perhaps the antecedent of the term emotional intelligence, as he was followed by such researchers as Wechsler (1943) and Leeper (1948). Wechsler (1943) contended that non-intelligence quotient (IQ) factors determined intelligent behavior. Moreover, Wechsler (1943) stated that the non-intelligence factor was the emotional ability of the behavior. Leeper (1948) determined that emotional processes contributed to rational thought and adaptive behavior (p. 17). Brackett, Lopes, Ivcevic, Mayer, and Salovey (2004) stated that emotional intelligence was the relationship between emotion and reason and can be viewed as the result of two areas of research that emerged in the 1970s and 1980s. The first area of research was labelled *cognition and affect,* and it examined how emotions interact with thought. The second area of research, or influence, was the beginning of understanding that intelligence was not just the mental abilities of the individual. In 1990, Salovey and Mayer were credited with creating the term emotional intelligence. The work of Salovey and Mayer was followed by Goleman in 1995 who popularized the term emotional intelligence. Gardner (1999) wrote of intrapersonal intelligence, which included the ability of the individual to notice moods and draw conclusions about emotions, as a way to understand and guide behavior (p. 176).

Definitions of Emotional Intelligence

Salovey and Mayer (1990) defined emotional intelligence as "the ability to monitor one's own and others' feelings and emotions, to discriminate among them and to use this information to guide ones' thinking and action" (p. 189). Further refinement of the definition described emotional intelligence as the ability to recognize the significance of emotions and the relationship that the emotions have in the behavior of individuals (Mayer, Caruso, & Salovey, 2000). Bar-On (2017), who was a pioneer in the field of emotional intelligence, defined emotional intelligence as the following:

> Emotional-social intelligence is an array of interrelated emotional and social competencies, skills and behaviors that determine how well we understand and express ourselves, understand others and relate with them, and cope with daily demands, challenges and pressures. (Bar-On, 2017, para. 2)

Building on the work of Mayer and Salovey (1990), Goleman (1995) wrote *Emotional Intelligence – Why it can matter more than IQ.* Goleman's (1995) book led to emotional intelligence being studied and applied to areas outside psychology. Goleman (1995) defined emotional intelligence as the ability of individuals to recognize their own feelings and those of others, and for motivating themselves and managing their emotions within themselves and in relationships.

Measuring Emotional Intelligence

The success of Goleman's (1995) book led to two constructs of emotional intelligence: *ability emotional intelligence* and *trait emotional intelligence*. The two constructs, according to Petrides and Furnham (2006), can be differentiated through the methodology used to measure each construct (self-report or maximum performance).

Trait emotional intelligence is concerned with emotion-related self-perceptions, while ability emotional intelligence is concerned with emotion-related cognitive abilities that are measures via maximum performance reports (Petrides, 2011).

Mayer et al. (2000) described two scientific approaches to emotional intelligence by characterizing the approaches as ability models or mixed models. Researchers used the ability model to consider emotional intelligence as a standard intelligence (Mayer et al., 2000). Models, such as the Mayer-Salovey-Caruso Emotional Intelligence Test (MSCEIT) was designed to measure the four branches (perceiving emotions, facilitating thought, understanding emotions and managing emotions) of emotional intelligence (Mayer et al., 2000). The Trait Emotional Intelligence Questionnaire (TEIQue) was developed by Petrides (2011) and designed to measure trait emotional intelligence. The Bar-On (2017) model is "a self-report measure of emotionally and socially intelligent behavior that provides an estimate of emotional-social intelligence" (p. 20).

Consequences of Emotional Intelligence

According to Goleman (2004), effective leaders have a high degree of emotional intelligence. Goleman (2004) researched the relationship between emotional intelligence and performance, while examining how emotional intelligence displayed itself on the job. Goleman (2004) analyzed competency models that had been developed by companies, such as British Airways and Credit Suisse. The models were developed to aid the companies in identifying, training, and eventually promoting the individuals who showed potential to become leaders. Goleman (2004) focused on ascertaining which and to what degree individual abilities determined outstanding performance. Goleman (2004) discovered that emotional intelligence had an important role at the highest levels of

leadership within the companies. When he compared the best performers with the average performers, 90% of the difference was attributed to emotional intelligence elements rather than cognitive abilities. Leaders who possess the ability to control and understand their emotions have the ability to create an environment of trust.

This finding correlates to Quoidbach and Hansenne's (2009) study that investigated the relationships between emotional intelligence, performance, and cohesiveness in 23 nursing teams. Using a modified version of the Schutte Emotional Intelligence Scale, the Group Cohesiveness Scale, and performance through the levels of satisfaction and turnover, the researchers measured the chief nurse executive ratings and healthcare quality. Quoidbach and Hansenne found that the quality of the healthcare positively correlated with the regulation of emotions and group cohesiveness. However, emotional appraisal negatively correlated with the healthcare quality provided by the team. Quiodbach and Hansenne formed three hypotheses to account for this negative correlation:

1. A team in which individuals are more sensitive to emotions is more people than task oriented.

2. Members of a team concerned with the emotions of others are possibly more tolerant with errors (i.e., they do not want to hurt the feelings of a team member).

3. Emotionally perceptive people appear to respond worse to stress, leading to less attention being paid to safety and hygiene norms.

The results of the study indicated that emotional regulation might be a new way of enhancing the cohesion of the nursing teams and patient outcomes, but also noted that further study is warranted to test the hypotheses formed during the study. Ultimately, the objective of the SLP was to enhance the emotional intelligence of the attendees, which

could lead to a culture change that increased the quality of the healthcare delivered through the development of relationships built on trust and open, transparent communication that addresses issues that erode the quality of patient care.

Mayer, Roberts, and Barsade (2008) conducted a review of the research on emotional intelligence from the years 1990 to early 2007, seeking to identify the core elements of emotional intelligence. Emotional intelligence, according to Mayer et al. (2008), are the abilities that connect emotion and intelligence to improve an individual's thoughts. One particular aspect of the review entailed studying emotional intelligence and its ability to predict outcomes. The literature review showed that emotional intelligence predicted positive and social academic outcomes in children and in social relationships in adults. The review also showed that individuals with a high emotional intelligence were perceived by others more positively.

One study referenced by Mayer et al. (2008) was conducted by Elfenbein, Foo, White, Tan, and Aik (2007), who found that when individuals recognized the emotional expressions of others, it made social interactional predictable and easier to manage. The theory stated by Elfenbein et al. (2007) was that the ability to recognize emotions appeared correlated with better social adjustment and social mental health. The outcome of the literature review, led by Mayer et al. (2008), was that emotional intelligence correlated with better social relationships with fewer problematic social behaviors.

Batool (2013) explored the relationship between leadership and emotional intelligence, describing the new demands that leaders have to meet, including giving subordinates' autonomy and freedom, while still taking responsibility when the results were not optimal. Batool stated that not enough research had been conducted to

understand the effect of leadership and emotional intelligence in the banking sector of Pakistan. The purpose of the study was to close the gap with the objective of understanding the role of leadership in the Pakistani banking industry. Conducting a quantitative research design, Batool sent a survey to 50 people in the banking sector of Pakistan. The demographic data showed that the survey was sent to 37 males and 13 females between the ages of 25 to 50 with varying degrees of experience. The areas of research included responsibility, workload, self-control, stress, discipline, performance, and the relationship with emotional intelligence. The results of the data, in all elements, showed a positive relationship between each area and emotional intelligence.

Knight, Bush, Mase, Riddell, Liu, and Holsinger (2015) conducted a study to ascertain if there was a relationship between trust and emotional intelligence. The study was conducted in two phases. The first phase was a feasibility study conducted with the senior leadership team of the Kentucky Department of Public Health (KDPH). The purpose of the first phase was to establish the methods to be used in Phase 2 of the study. Phase 2 of the study was conducted with the managers of each branch and the subordinates who reported to them. Within the seven divisions of the KDPH, seven branch managers reported to the division directors. Each branch had between 1 and 14 staff members reporting directly to the branch manager. The study utilized the emotional quotient inventory and the conditions of trust inventory. The response rate equated to 79% for supervisors and 65% for staff members who reported directly to the supervisors. The five emotional scales, used in the study for supervisors, included intrapersonal, interpersonal, adaptability, stress management, and general mood. The measures collected from the subordinates of the supervisors included trust, availability,

competency, consistency, discreetness, fairness, integrity, loyalty, openness, promise fulfillment and receptivity which were then averaged for each supervisor. The results of the study showed that supervisors had an average or high level of emotional intelligence. The authors concluded that the emotional capacity of supervisors influenced stress, which then influenced the conditions of trust. This study was important, as it was conducted within a public health organization, an organization similar to LRMC. The study detailed the necessity for further training and education in the areas of leadership, emotional intelligence, and trust.

The Human Capital Institute (HCI) conducted a study in 2013 with more than 500 organizations worldwide (Wiete, 2013). The purpose of the study was to ascertain the most important competencies required by leaders. The competencies were identified by both manager and individuals within the organizations examined. Emotional intelligence was defined as "a set of emotional and social skills that influence the way individual contributors perceive and express themselves, develop and maintain social relationships, cope with challenges, and use emotional information in an effective and meaningful way" (Wiete, 2013, p. 20). The initial step in the study focused on the investments that organizations made in leadership development and the influence of the investment on the organization. The study found that there was a possible positive relationship between an organization's leadership development program and the financial performance of the organization. The hypothesis formed was that a leader's emotional intelligence affects the norms of the workplace and assists in the creation of a high-performing culture, which had an influence on the financial performance of the organization. According to Wiete (2013), organizations that valued emotional intelligence were three times more

likely to have effective leadership development initiatives. The results of the analysis supported the hypothesis that a leader's emotional intelligence influenced the norms of the workplace.

Significance of emotional intelligence and self-awareness

Goleman (2004) considered self-awareness to be one of the critical components of emotional intelligence. Self-awareness, according to Goleman (2004), is the ability to understand one's strengths, weaknesses, core needs, and emotions. He believed that people with a strong sense of self-awareness were not only honest with themselves, but also with others. Bandura (1986) stated that self-awareness induced self-reflection, which then led to improved organizational outcomes (Bandura, 1986).

Tekleab, Sims, Yun, Tesluk, and Cox (2008) described self-awareness as the ability to know one's self, stating that if this occurred, then a person's self-evaluation should remain congruent with other's viewpoints about that person. Effective leaders, according to Lash (2002), possess the ability to develop others, manage their emotions, and have the ability to communicate the organization's vision in a compelling manner. However, before leaders can assist teams become more effective they must first develop their individual self-awareness (Lash, 2002). Goleman, Boyatzis, and McKee (2013) described self-awareness as the aspect of personal competence that the individual needs to understand his or her own emotions.

Church (1997) concluded that high performing leaders could assess their behaviors in the workplace. Church (1997) examined 134 high performing teams and 470 average performing teams from three different organizations (i.e., technological, pharmaceutical and airline services). The results of the examination showed that

managers on the high performing teams were more self-aware compared to the managers on the average performing teams. Church (1997) defined self-awareness as the congruence between the leader's assessment of his or her behavior and those provided by their subordinates. Effective teamwork requires individual group members to cooperate and collaborate (Cherniss & Goleman, 2001). Beier (2016) stated that when it comes to a team's capability to collaborate, self-awareness in individuals is critical for success.

Butler, Kwantes, and Boglarsky (2014) examined whether self-awareness related to leadership effectiveness for hospitality leaders considering the cultural context. The authors surveyed 696 managers and invited the managers to self-select individuals to describe their leadership behavior (Butler et al., 2014). The results of the study showed that self-awareness in leaders was perceived as important in leadership effectiveness.

Atwater and Yammarino (1992) conducted a study to examine whether the agreement between self and others' leadership ratings would moderate the validity of leadership and performance predictions. Atwater and Yammarino (1992) studied leadership behavior, as leadership depended on followers and documented that the followers' perceptions of the leader are important when it comes to decisions and performance evaluations. According to Atwater and Yammarino, a self-aware person can compare his or her behavior against standard or new information. The authors further stated that self-awareness allows leaders to assess how others are evaluating them and incorporate the assessment of others into their own self-evaluation (Atwater & Yammarino, 1992). This ability to assess how they are being perceived by others allows leaders to more accurately self-assess their behavior. Atwater and Yammarino found that

leaders, who were self-aware, appeared to be using feedback received about their leadership to improve their performance ratings and organization performance.

Avolio, Gardner, Walumbwa, Luthans, and May (2004) defined authentic leadership as the leaders' levels of awareness, regarding how they thought, acted, behaved, and how they were perceived by others. In a model created by Avolio et al. (2004), the outcome of authentic leadership is improved job performance and extra efforts from followers, which leads to improved organization and performance outcomes. Avolio et al. (2004) contended that a process existed that involved linking the followers' attitudes and behaviors to the authentic leader. This process involves how authentic leaders influence the behavior of the followers. Avolio et al. (2004) showed a linkage between authentic leadership and the followers' commitment to the organization, job satisfaction, meaningfulness, and engagement.

Reviewing literature on Authentic Leadership Development (ALD), Avolio and Gardner (2005) developed a central premise that enhanced self-awareness fosters the development of authenticity in followers. Avolio and Gardner (2005) developed the model to examine the relationships of authentic leaders and followers, and the outcomes of the relationship (i.e., trust and sustainable performance). The Avolio and Gardner model was compared with the model developed by Ilies, Morgeson, and Nahrgang (2005). Both leadership models examined the facets of authentic leadership as it relates to self-esteem and influence. The conclusion of the study by Avolio and Gardner (2005) suggested the further need for research to examine the relationship between self-awareness in leaders and followers.

According to Vitello-Cicciu, Weatherford, Gemme, Glass, and Seymour-Route (2014) effective nursing leadership increases retention of nurses, engages nurses, and improves patient outcomes. Vitello-Cicciu et al. (2014) described the changes in leaders who participated in a leadership development program. The goal of the program was to enhance the leadership development in both practice and education, using a theory based approach that focused on self as a leader, and on becoming a leader in the relationships with others. The learning modules used in the leadership development program focused on identifying the participant's leader characteristics, including personality types and behaviors. Through self-reflection and self-awareness, the participants began to apply the desired behaviors that would lead to the transformation of their leadership competencies. Using focus groups, structured interviews, and online responses, they elicited responses from 34 participants in the medical field regarding the behavioral changes that occurred since their participation in the leadership development program. The authors quoted several participants who described the positive differences in their behavior to include being more "emotionally aware of others, seeking diverse feedback, engaging in active listening and having crucial conversations" (Vitello-Cicciu et al. 2014, p. 173). Several major themes resulted from the Vitello-Cicciu et al. (2014) study, including increased self-awareness through self-reflection, using self-regulation as a methodology to manage emotions, and allowing oneself to be emotionally aware of others. Vitello-Cicciu et al. (2014) did not note any organization performance indicators, but instead noted the positive change in the individual after participation in the leadership program.

Higgs and Rowland (2010) looked at the influence of the relationship between the leader's level of self-awareness and his or her ability to challenge current processes and to make challenging processes a behavioral norm and practice. According to the authors, leaders with a high level of self-awareness demonstrated the ability to notice their impulses and practice reflecting on what could have been done differently (Higgs & Rowland, 2010). Interviews were conducted with leaders from 33 organizations. Each leader was asked to tell two stories of organizational change where he or she had a leadership role. The purpose of the data collection was to ascertain if any changes in behavior were noticed after attendance in the leadership program. The analyses of the data showed that the more ego-driven the leader was in his or her approach to change, the more negative the impact to the organization in terms of team cohesion and trust (Higgs & Rowland, 2010).

Leaders who are ego driven are normally terrible leaders, according to Goleman Boyatzis and McKee (2013). A leader with a good level of self-awareness understands the contribution his or her own mindset and behaviors have on the organization (Higgs & Rowland, 2010). Leaders who were self-aware were more mindful and were able to inspire followership. Self-aware leaders should serve their organizations more productively by remaining in tune with the needs of the organization. Senge (1999) stated that leaders must have a high level of self-awareness to build trusting relationship.

Significance of Emotional Intelligence and Trust

The U.S. OPM (2015) report showed that building a climate of trust was critical to building the engagement of the Federal workforce. In 2003, Forum conducted an online survey of 1000 business leaders to ascertain their opinion on trust and engagement.

The results showed that trust in leadership had an impact on the workplace culture and organization results (Forum, 2003).

Untrustworthy leadership is one of the seven hidden reasons employees leave companies (Branham, 2005). Trust is important in the workplace, and effective leaders who manage their emotions results in employees who trust their leaders. This trust results in employees feeling good about working with these leaders. The most effective leaders demonstrate trust and credibility, understand the need for individual employee engagement, and build a positive team climate (McLeod, 2016). The Army Medicine (2013) 2020 campaign plan stated that Army Medicine must innovate and build strong teams. According to U.S. OPM (2015), building a climate of trust and empowerment will encourage employees to be innovative and creative. Innovation requires leaders to stay comfortable with new ideas, different approaches, and new information (Goleman, 2004).

Trust was a critical factor in the Fortune 100's (2016) best companies to work for report. The report outlined that increasingly leaders were beginning to understand that to tap into the workforce, trusting the workforce and empowering them to do their jobs could lead to success. Blessing White (2013) studied employee engagement and found a correlation between trust in leaders and employee engagement. Trust is the foundation of all high-performing teams as without trust, team members do not open up to each other, nor do they allow themselves to be vulnerable with each other (Lenconi, 2002). Trust can lead to collaborative behavior in individuals, which benefits the organization (Jones & George, 1998).

Dirks and Ferrin (2002) studied the relationship between trust, leadership, and the performance of the team. The objective of the study was to look at the influence of trust

between the leader and the team in both past and future performance. Dirks and Ferrin (2002) described trust as "an expectation or belief that one can rely on another person's action and words and/or that the person has good intentions towards oneself" (p. 1004). The study involved the belief of the team that the leader had good intentions toward the team. Dirks and Ferrin presented the theory that trust was not a unidirectional relationship, but instead was multidirectional. The study involved interviewing members of sports teams, including players and coaches. The dependent variables included team performance and trust in the leader. The independent variables included team performance, trust, talent, and experience. The results of the study showed that trust in leadership accounted for a large percentage of the performance of the team. Other variables that also correlated with team performance included team talent and trust in teammates.

Salamon and Robinson (2008) collected data from 4,751 employees from a large retail chain. Using annual surveys, conducted one year apart, the researchers tested their hypothesis that trust affected behavior. The results of the study demonstrated that trust affected performance positively, both in terms of sales and in terms of customer service performance, within the organization. Salamon and Robinson (2008) determined that trust between employees and leadership led to higher levels of performance.

Mayer, Davis, and Schoorman (1995) developed a model of trust and stated that the factors that influenced trustworthiness included *ability*, *benevolence*, and *integrity*. Ability refers to the ability to do what needs to be accomplished; benevolence is willingness to do good; and integrity is the value to guide the behavior. Mayer et al. (1995) stated that the importance of trust would increase due to the increased diversity in

the workforce. Berscheid and Walster (1978, as cited by Mayer et al., 1995) stated that a diverse workforce could not rely on similarities and common backgrounds to enhance teamwork. Mutual trust was one mechanism, hypothesized by Mayer et al. (1995), which would enable individuals to work together effectively.

Tan and Lim (2009) tested the framework for trust first presented by Mayer et al. (1995), by focusing on trust between coworkers and trust in organizations. According to Tan and Lim (2009), trust in the organization affected the organizational performance and its outcomes. Trust was defined as the willingness of a person to be vulnerable to colleagues, especially when there was no authority between the colleagues. This definition was not unlike that described by Lenconi (2002), who stated that the absence of trust among team members was their unwillingness to be vulnerable. Tan and Lim (2009) asserted that trust between coworkers led to other types of trust, such as trusting the organization. Using a questionnaire methodology, Tan and Lim (2009) surveyed agents from 14 agencies in Singapore, collecting data from 226 insurance agents. The results from the study suggested that the ability of coworkers was not related to trust in coworkers. Tan and Lim noted that all the participants were Chinese and the traditional value of benevolence was part of the culture. Benevolence was found as a factor in whether to trust coworkers. Tan and Lim also noted that the Chinese culture was high in collectivism and power distance, which could have represented a limitation in the study. The results of the study did show a relationship between trust in coworkers and organizational outcomes.

Significance of Emotional Intelligence and Employee Engagement

The U.S. OPM (2016) defined employee engagement as, "The employee's sense of purpose that is evident in their display of dedication, persistence, and effort in their work, or overall attachment to their organization and its mission" (p. 1). Employee engagement, according to Bedarkar and Pandita (2014), is a source of competitive advantage. Bedarkar and Pandita (2014) further found that a key driver of employee engagement was the behaviors of leaders. This is important, as employee engagement, according to a Blessing White (2009), involves employees who are engaged and committed to the organization's future mission and goals.

U.S. OPM (2016) found that the role of leaders, at all levels in the organization, remained critical to increasing the employee engagement. U.S. OPM (2016) recommended that leadership development programs should have opportunities for coaching sessions, feedback, and self-awareness exercises. Effective leadership should build a climate of trust and empowerment (U.S. OPM, 2016). U.S. OPM (2016) stated that engaged employees were more productive, which had an effect on the organization, especially concerning results. Engaged employees are more likely to be innovative and are less likely to be absent from work (U.S. OPM, 2016). In addition, the Point of Care Foundation (2014) described engagement as an important precursor of patient care performance.

According to a Watson (2010) case study, one of the challenges faced by the healthcare industry is the critical shortage of available workers. According to the report, successful hospital leadership understands the relationships between their employment practices, retention of employees, and patient satisfaction. Using preexisting survey data

from both employees and patients, Watson analyzed the data to ascertain what led patients to recommend the hospital to others and to identify the relationship between employee satisfaction and patient satisfaction. The results of the analysis showed that career development, teamwork, and the employees' views on empowerment influenced engagement. The analysis also showed that employee engagement was a key predictor of patient satisfaction (Watson, 2010). The knowledge gained by the study is being used by the hospital network to design interventions that enhance employee engagement and patient retention.

The findings of the study by Watson (2010) correlated with the research findings of Markos and Sridevi (2010), who revealed that most drivers of employee engagement were not financial, but included strategies, such as teamwork, collaboration, recognition, and opportunities for growth. Employee engagement results in positive organizational outcomes, with the relationship between the organization and the employee the strongest predictor of performance, according to Markos and Sridevi (2010). The authors described the association between engagement and performance as a predictor of organizational performance resulting in an organization's competitive advantage. The Blessing White (2006) study showed that the relationship between the leader and the employee was critical in both employee engagement and employee retention (Blessing White, as cited by Markos & Sridevi, 2010).

Saks (2006) described engagement in the workplace as the conscious use of emotions and behaviors, which could lead to business results. Saks investigated the antecedents and consequences of employee job and organizational engagement. According to Saks (2006), organizational commitment is different from individual

engagement; the difference being that organizational commitment is a person's attitude towards their organization. Saks defined engagement as the degree to which an employee was attentive and engaged in their performance at work. Engagement involves the individual being aware of his or her emotions and behaviors, or self-aware (Saks, 2006).

Lyons, Alarcon, Nelson, and Tartaglia (2008) defined employee engagement as an individual's willingness and ability to contribute to the success of the organization. The challenge facing the DoD is retaining highly skilled personnel, according to Lyons et al. (2008). Retention should be a high priority for the government, especially in the highly skilled areas (e.g., pilots, engineers, and DoD civilians), and employee engagement was a way to retain highly skilled employees (Lyons, et al. 2008). In a study conducted within the U.S. Air Force, 163 participants were assessed regarding their intention to remain within the Air Force (Lyons et al., 2008). The participants were both active duty military and DoD civilians. The retention factors the participants rated included challenging and compelling work, service to the country, service to the air force, peer group, effective leadership, flexible work schedule, lack of alternative employment opportunities, travel opportunities, education/training opportunities, involvement in cutting-edge technology and diverse experiences. The participants were asked to rate their intention to leave the air force and if they planned to look for a new job outside the air force in the next few months. While 83% of the employees stated they intended to stay, 16% indicated they planned to leave the air force within the next few years. The participants stated that challenging and compelling work as the strongest influence on their decision to remain within the DoD. The study only used factors that were within the control of the unit commander. The results of the study showed that when leaders

understand the conditions that promote employee engagement, not only will the performance of the organization be enhanced, but retention will also improve.

Literature About the Professional Practice Setting

The literature available for the U.S. Army includes the Army Doctrine Reference Manual (ADRP) 6-22 (2012) and the Field Manual (FM) 6-0 (U.S. Army, 2015). The ADRP 6-22 (2012) stated that leadership entailed the process of influencing people by providing purpose and direction to accomplish the mission. *Influencing* is defined as a leader's ability to get people to do what is required. It is the responsibility of an army leader, whether by the role assigned or assumed role, to inspire and influence people to accomplish organizational goals. Leaders motivate personnel, within and outside their chain of command, to shape decisions through action and thought process for the greater good.

ADRP 6-0 (2012) stated that a good leader was competent, used his or her initiative, could apply critical thinking skills, was creative and adaptable, had self-confidence, was reflective, and communicated effectively. ADRP 6-0 is guided by the principles that leaders will guide the development of teams, establish trust, and reach a shared understanding.

Summary

The process used in this literature review first began by researching what effects resulted from enhanced emotional intelligence in individuals. However, to begin the process it was necessary to understand how emotional intelligence is defined and once defined, to understand its effect on individuals. The culture of an organization is the outcome of a set of behaviors and leaders influence those behaviors (Ashkenas, 2011). This viewpoint

is also shared by Schein (2010) who stated that leaders influence the culture of the organization. The ability to understand our own emotions and how our emotions influence our behavior is the core of emotional intelligence. According to Tomas Chamorro-Premuzic (2013) a well-designed program can improve the emotional intelligence of individuals by 25%, benefitting both the organization and improving the social and marital relationships of the individuals. Once defined the conundrum then became how to measure emotional intelligence. The literature review described the different methodologies that are currently being used to measure emotional intelligence from either a trait or global perspective. The literature review presented an overview of the relationship between emotional intelligence, self-awareness, trust, and employee engagement as the consequences of emotional intelligence. As evidenced by the literature, enhanced emotional intelligence in leaders can lead to building trusting relationships, which in turn will lead to employee engagement, resulting in positive organizational results. Understanding the drivers of emotional intelligence, and developing programs such as the Selfless Leadership Program (SLP) that has the objective of enhancing the emotional intelligence of the participants, will result in improved organizational results, as evidenced by the results described within the literature.

CHAPTER THREE: PROJECT METHODOLOGY

Introduction

This study was conducted utilizing a two-phased sequential longitudinal quantitative research method. Existing survey data was analyzed in Phase 1 of the study, and in Phase 2 the TEIQue was re-administered from Phase 1, along with seven additional questions specifically targeted to measure the effect of the SLP. Given the importance of emotional intelligence in leaders for leading organizations to high effectiveness and the Medical Command goal for LRMC to operate as an HRO, this study explored the impact of a leadership development program designed to increase leaders' emotional intelligence. The purpose of this quantitative study was to identify what individual behavioral changes occurred in the Landstuhl Regional Medical Center (LRMC) Selfless Leadership Program (SLP) participants.

Research Question and Hypotheses

The research question guiding this quantitative in Phase 1 and Phase 2 was: What behavioral changes do SLP participants describe following participation in the Selfless Leadership Program?

Phase 1, hypothesis #1: There will be a difference in the levels of the Trait Emotional Intelligence factors of the participants of the Selfless Leadership Program after completing the program.

Phase 1, hypothesis #2: There will be a difference in the levels Psychological Empowerment factors in the participants of the Selfless Leadership Program after completing the program.

Phase 2, hypothesis #1: There will be a difference in the TEIQue-SF participants' scores one year or more after graduation from SLP.

Phase 2, hypothesis #2: More specific questions regarding the SLP will elicit more precise information regarding the impact of the Selfless Leadership Program on the individual.

Phase 2, hypothesis #3: Leaving LRMC made it easier (or would make it easier) to implement new leadership behaviors learned through participating in SLP.

Research Design

This study used a two-phased sequential longitudinal quantitative research design. The first phase consisted of analyzing the before and after data from the SLP attendance survey given to the participants of the SLP. The second phase of the research study, similarly, utilized a repeated measured design, but after a longer duration had passed since SLP participation. A repeated measured design allows the researcher to conduct a within-group study of the behavior of the same individual or group at different times (Creswell, 2014). In Phase 2, the participants were given the TEIQue-SF survey again. In addition to the TEIQue-SF, the participants were also given new specific questions regarding the SLP. Phase 2 was conducted one year or more following graduation from SLP.

Kirkpatrick (2004) detailed a 4-level model on evaluating training programs. Level 1 is reaction, which evaluates how well the participants reacted to the program. Level 2 is learning, which measures the degree participants acquired the knowledge the program intended to deliver. Level 3 is behavior, which is based on the extent participants are able to apply the knowledge learned on their jobs. Finally, Level 4

results measure the results of the training program on the organization. This research

study concentrated on Level 3 of Kirkpatrick's model. The individual behavior change

(i.e., Level 3) was measured using surveys delivered pre and post attendance in the SLP.

Participants/Data Sources

The participants for the research study consisted of members of LRMC who

attended the SLP. Permission to contact the participants of the SLP was granted by the

commander of the medical center, the LRMC Institutional Review Board (IRB), and the

Creighton University IRB. Data for Phase 1 were collected by the program staff from 60

participants who were attended the first five Selfless Leadership Programs. The surveys

used in Phase 2 of the study were sent to the same individuals who received the Phase 1

surveys.

Data Collection Tools

In 2015, surveys were sent to the first five cohorts of the SLP by the program

staff. The surveys were sent both before and after attendance in the SLP to the sixty

participants of the first five cohorts of the program. The two surveys used were the Trait

Emotional Intelligence Questionnaire Short Form (TEIQue-SF) and the Spreitzer's

(1995) Psychological Empowerment Instrument (PEI). Participants of the SLP were

invited to take part in the before and after surveys by Colonel (COL) Susan Hopkinson,

Nurse Research Scientist for the Center for Nursing Science and Clinical Inquiry at

LRMC. The purpose of the surveys was to determine if there was a difference in their

trait emotional intelligence and psychological empowerment scores before and after

attendance in the SLP.

Trait Emotional Intelligence Questionnaire

Usage of the existing trait TEIQue-SF (Appendix A) survey was requested and granted by Petrides (2011) of the London Psychometric Laboratory. Petrides and Furnham (2001) stated trait emotional intelligence comprised of "behavioral dispositions and self-perceived abilities" (p. 426). The instrument, used in this research study, was the TEIQue-SF. The TEIQue-SF consists of a 30-question survey, using two items from each of the 15 subscales of the full TEIQue. The TEIQue is constructed to measure an individual's global trait emotional intelligence.

Trait emotional intelligence, according to Petrides, Pérez-González, and Furnham (2007), is a "constellation of emotions-related self-perceptions and dispositions located at the lower levels of personality hierarchies which encompasses emotion-related behavioral dispositions and self-perceived ability measures via self-report" (p. 123). Two questions from each of the 15 subscales of the TEIQue were included within the short form (Petrides & Furnham, 2006). The TEIQue-SF measures four sub factors: well-being (6 items on the survey), self-control (6 items on the survey), emotionality (8 items on the survey), and sociability (6 items on the survey). The remaining four items include adaptability and self-motivation, which are factors in the global (total) score, but do not contribute to the four individual factors (Petrides & Furnham, 2001). The SLP participants indicated their responses on a 7-point Likert scale ranging from *1(completely disagree)* to *7 (completely agree)*. Petrides (2009) documented internal consistencies for the TEIQue-SF as: global score .88; well-being .86; self-control .77; emotionality .69; and, sociability .73.

Laborde, Allen, and Guillén (2016) documented construct and concurrent validity of the TEIQue-SF version of the TEIQue. Laborde et al. (2016) tested the short form against the long-form version in a study that included 1889 Spanish adults. Using confirmatory analysis, the authors documented only marginally stronger factor loadings of the long form when compared to the short form. The authors noted that the short form was a feasible alternative to the long one for research where completion of the long form might not be feasible.

Psychological Empowerment Instrument

Usage of the existing trait Psychological Empowerment Instrument (PEI) was granted by Dr. Spreitzer of the Ross School of Business (Appendix B). The PEI was developed to measure psychological empowerment in the workplace (Spreitzer, 1995). Conducting a review of the literature, Spreitzer (1995) defined the psychological classification of empowerment as "a motivational construct manifested in four areas of cognition" (p. 1444). The four areas, or factors of the PEI are confidence, meaning, autonomy and impact. The PEI uses a 7-point Likert scale ranging from *1 (very strongly disagree, 2)* to *7 (very strongly agree).* The mean score is calculated by taking the average value of the 12 items. A high score indicates that there is a high degree of perceived level of psychological empowerment.

Spreitzer (1995) conducted an initial sampling comprised of mid-level employees from a Fortune 50 industrial organization to determine construct validity (p. 1449). The initial sample consisted of 393 members of management that represented all the organization functions, divisions, and geographic locations. A second sample comprised of 128 lower level insurance company employees were chosen using a stratified (team

membership and function) random sampling technique. The second sample was used to cross-validate the results of the model. The Cronbach's alpha reliability coefficient was .72 for the first sample and .62 for the second sample. Internal consistency and test-retest reliability was established from the second sample (Spreitzer, 1995).

Phase 2 Seven Single-item survey

A new survey was created and delivered in Phase 2 of the study. The seven single-item survey (Appendix F) was created based on the Phase 1 analysis to be delivered specifically during Phase 2 of the study. The new survey, based on Goleman's (1995) definition of emotional intelligence, was created to determine how the SLP participants viewed any change in their behavior attributable to participation in the SLP.

Data Collection Procedures

Phase 1

The preexisting survey data used in Phase 1 were distributed before and after attendance in the SLP in 2015. The surveys were delivered by COL Susan Hopkinson via Survey Monkey. The raw data (excel format) for the before SLP and after SLP attendance survey data were provided on 16 April 2016 by COL Hopkinson with permission to use the data for analysis of the SLP. The pre and post scores were not matched as the data was collected anonymously in each phase to protect the identity of the participants.

Phase 2

The survey used in Phase 2 included the TEIQue-SF and seven additional questions that directly related to the SLP. The surveys used in Phase 2 were sent out after first sending a personal email to the participants to alert them of the survey. The survey

was sent to 60 participants of the first five cohorts of the SLP, with a response rate to the survey of 60%. As in Phase 1, the Phase 2 scores were not matched as the data was collected anonymously.

Data Analysis

This study was conducted utilizing a two-phased sequential longitudinal quantitative research method. In Phase 1 of the study pre-existing TEIQue-SF and PEI survey data, collected in March of 2015, was analyzed to test the hypotheses formulated in Phase 1. The analysis in Phase 1 was conducted using ANOVA and two sample t-tests. Two-sample t-tests were used due to the independent nature of the samples. In Phase 2 of the study the TEIQue was again utilized along with seven additional questions specifically to test the hypotheses formulated upon completion of the Phase 1 analysis. In Phase 2, ANOVA and two sample t-tests were used to analyze the data. Reliability of the TEIQue-SF and the PEI was determined using Cronbach's alpha. The level of significance used for all tests in the study was 0.05. The decision to use the ANOVA and the two sample t-test was determined upon analysis of the Levene's test of equal variance which signified that the usage of parametric tests was appropriate. The demographic data regarding the number of participants invited to respond and the number who did respond was reported. The data was analyzed using the quantitative software Minitab. There was no identifiable information collected as anonymity was given to the respondents of the surveys.

Ethical Considerations

This research study followed the protocol of the Creighton University and Landstuhl Regional Medical Center Institutional Review boards. The participants were

informed of the purpose of the study and were given the informed consent form

(Appendix E). Participation in the survey was voluntary and only open to participants of

the first five cohorts of the SLP. Prior to completing the survey, the participants read the

consent form and completion of the survey indicated consent. The purpose of the

research study, with the approximate time required for completion, and the guarantee of

anonymity and confidentiality were provided.

Summary

Chapter Three provided an overview of the problem addressed by the research

study, the hypotheses, and a description of the research design. The chapter also

contained a description of the procedure and ways in which participants for the study

were chosen. The data collection tools, data collection procedures, and ethical

considerations are also described. The analysis of the data was conducted in both phases

by first computing the Cronbach's alpha to determine the internal consistency of the

TEIQue-SF and the PEI. A test of equal variances was used to ascertain the usage of

parametric versus non-parametric statistical analysis tools. The mean, median and the

standard deviation were documented to determine the location and spread of the data.

Analysis of variance (ANOVA) was used to determine if there was a difference in the

means of the factors within both surveys, using a Tukey's test to determine which mean

was different. Finally, a two-sample t-test was conducted to determine if there was a

difference in the mean before and after attendance in the SLP. The tests were conducted

with a 95% confidence interval for the difference (0.05 level of significance). Based on

the Phase 1 analysis, seven additional single-items measures were crafted specifically for

Phase 2.

CHAPTER FOUR: FINDINGS

Introduction

Chapter Four includes the analysis of the data of both surveys used in Phase 1 of the research study and the analysis of the survey data and additional questions used in Phase 2. The purpose of this quantitative study was to identify what individual behavioral changes occurred in the Landstuhl Regional Medical Center (LRMC) Selfless Leadership Program (SLP) participants since the implementation of the program. The research question guiding this quantitative study was: What behavioral changes do SLP participants describe following participation in the Selfless Leadership Program?

Phase 1, hypothesis #1: There will be a difference in the mean Trait Emotional Intelligence (TEIQue) scores before and after participation in the Selfless Leadership Program.

Phase 1, hypothesis #2: There will be a difference in the mean Psychological Empowerment (PE) scores before and after participation in the Selfless Leadership Program.

Phase 2, hypothesis #1: There will be a difference in the TEIQue-SF participants' scores one year or more after graduation from SLP.

Phase 2, hypothesis #2: More specific questions regarding the SLP will elicit more precise information regarding the impact of the Selfless Leadership Program on the individual.

Phase 2, hypothesis #3: Leaving LRMC made it easier (or would make it easier) to implement new leadership behaviors learned through participating in SLP.

The aim of this study was to provide an evidence-based assessment of the effectiveness and impact of the SLP with recommendations for appropriate next steps. The next steps could include expansion of the program into other military medical facilities and expanding the program to include the LRMC Army health clinics in Belgium and Italy.

<div align="center">**Presentation of the Findings**</div>

Selfless Leadership Program Demographic Data

The LRMC SLP pre-existing survey collected in August of 2015 gathered descriptive demographic data before and after SLP attendance and was sent to 60 participants of the first five cohorts of SLP. As can be viewed in Figure 2, nine of the respondents were between 30 to 39 years of age, 36 were between 40 and 49 years of age, 14 respondents were between 50 to 59 years of age, and one respondent was aged 60 or older. Figure 3 details the gender data of the participants who took part in the before SLP attendance survey. A total of 28 females responded to the survey, while 32 males responded. In Phase 1, there was a 100% response rate to the survey sent prior to attendance in SLP and a 35% response rate (21 responses) post attendance in SLP. The Phase 1, post SLP attendance demographics included one respondent aged between 30-39, 12 aged between 40-49, five between 50-59 and three who were 60 or older. The first five cohorts of the program consisted of members of the senior leadership. A total of 9 females and 12 males responded to the post SLP attendance survey in Phase 1.
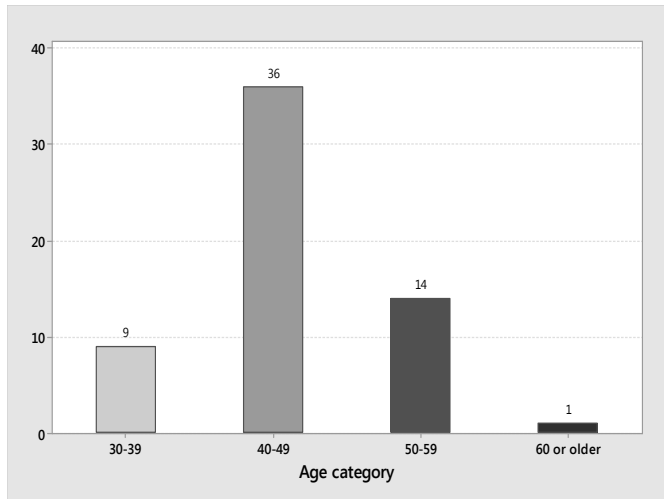
Figure 2. LRMC SLP pre-existing survey data.

   The demographic data entailed using a self-report constructed by Colonel (COL)

Hopkinson. The questionnaire was designed to collect information regarding the type of

leadership training the participants had prior to attending the program and their

expectations for the program (Appendix C). The prior leadership training experience

ranged from no leadership training to West Point Military Academy training. The post

questionnaire collected the same age and gender demographic information; however, the

respondents were also asked if their expectations of SLP were met (Appendix D).
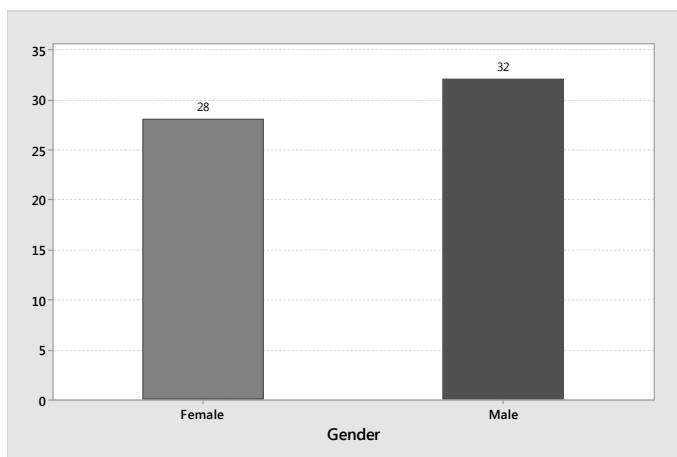
Figure 3. Phase 1 Demographic data.

Phase 1: Trait Emotional Intelligence Questionnaire-Short Form (TEIQue-SF)

   The Trait Emotional Intelligence Questionnaire Short Form (TEIQue-SF) consists of 30 questions. The four factors of the TEIQue-SF include well-being, emotionality, self-control, and sociability. Cronbach's alpha for the overall score was 0.8 for the Phase 1 pre data, 0.8 for the immediate post data, and 0.9 for the Phase 2 post data. Individual factors are the individuals' self-perception of how they see themselves, which are listed below with their respective Cronbach's alphas.

Emotionality. Individuals who score high on the emotionality scale are inclined to see themselves as emotionally capable and perceive themselves to be in touch with their feelings and the feelings of others. Cronbach's alpha was 0.7 for the Phase 1 pre data, 0.9 for the immediate post data, and 0.6 for the Phase 2 post data.

Sociability. Individuals who see themselves as socially capable will score high on the sociability factor. Individuals with high sociability scores are adept at social interaction. Sociability differs from the emotionality factor as it emphasizes social relationships and social influence. Cronbach's alpha was 0.8 for the Phase 1 pre data, 0.9 for the immediate post data, and 0.7 for the Phase 2 post data.

Self-control. Individuals will score high on the self-control factor if they believe they have strong willpower. A high self-control score indicates the individual is good at controlling their impulses with the ability to regulate external stress and pressure. Individuals who score low on the self-control factor usually demonstrate impulsive behavior and may find difficulty in managing stress. Cronbach's alpha was 0.7 for the Phase 1 pre data, 0.9 for the immediate post data, and 0.8 for the Phase 2 post data.

Well-being. Individuals who score high in this factor generally feel positive, happy, and fulfilled, as opposed to an individual who scores low in the well-being factor, indicating that they have a low self-regard and are disappointed about their current situation. A high score in the wellbeing factor also reflects a sense of well-being that extends from achievements, with the expectation that the future will have similar achievements. Cronbach's alpha was 0.7 for the Phase 1 pre data, 0.9 for the immediate post data, and 0.7 for the Phase 2 post data.

Phase 1: Psychological Empowerment Instrument

The Psychological Empowerment Instrument (PEI) consists of 16 questions. The four factors of the PEI include meaning, confidence, autonomy, and impact. These factors are the individuals' orientation to the responsibility they have in work. Cronbach's alpha for the overall score was 0.7 for the Phase 1 pre data, and 0.6 for the immediate post data. Individual factors are the individuals' active orientation to their work role and consists of cognitions that are shaped by the work environment (Spreitzer, 1995), which are listed below with their respective Cronbach's alphas.

Meaning. The suitability between the requirements of the individual's work role and their beliefs, values and behaviors. Cronbach's alpha was 0.7 for the Phase 1 pre data, and 0.7 for the immediate post data.

Confidence. The belief of the individual that he or she is capable to perform the work skillfully. Cronbach's alpha was 0.7 for the Phase 1 pre data, and 0.7 for the immediate post data.

Autonomy. The individual's sense of control, selection and decision-making regarding work methodology, pace and effort. Cronbach's alpha was 0.7 for the Phase 1 pre data, and 0.6 for the immediate post data.

Impact. The degree to which an individual can influence the strategic, organizational or outcomes at work. Cronbach's alpha was 0.6 for the Phase 1 pre data, and 0.6 for the immediate post data.

<h3 style="text-align:center">Phase 1 – TEIQue-SF Data Analysis</h3>

Hypothesis #1 stated there would be a difference in the mean Trait Emotional Intelligence (TEIQue) scores before and after participation in the Selfless Leadership Program. As the TEIQue has four factors, the hypothesis is that there would be a difference in the means of each factor in the TEIQue-SF before and after attendance in the SLP. The pre-SLP TEIQue-SF statistics included well-being ($M = 5.9$, $SD = 0.8$), self-control ($M = 4.9$, SD 0.9), emotionality ($M = 4.9$, SD 0.8), sociability ($M = 5.0$, SD 0.8), and across all factors ($M = 20.8$, $SD = 2.8$). A test of Equal Variances was conducted to ascertain if parametric or non-parametric statistics would be used (Creswell, 2014). The results of the Levene's test, p-value of 0.996 (at an alpha risk of 0.05), indicated that the usage of parametric tests was appropriate. Figure 4 represents the graphical output of the test of Equal Variances.
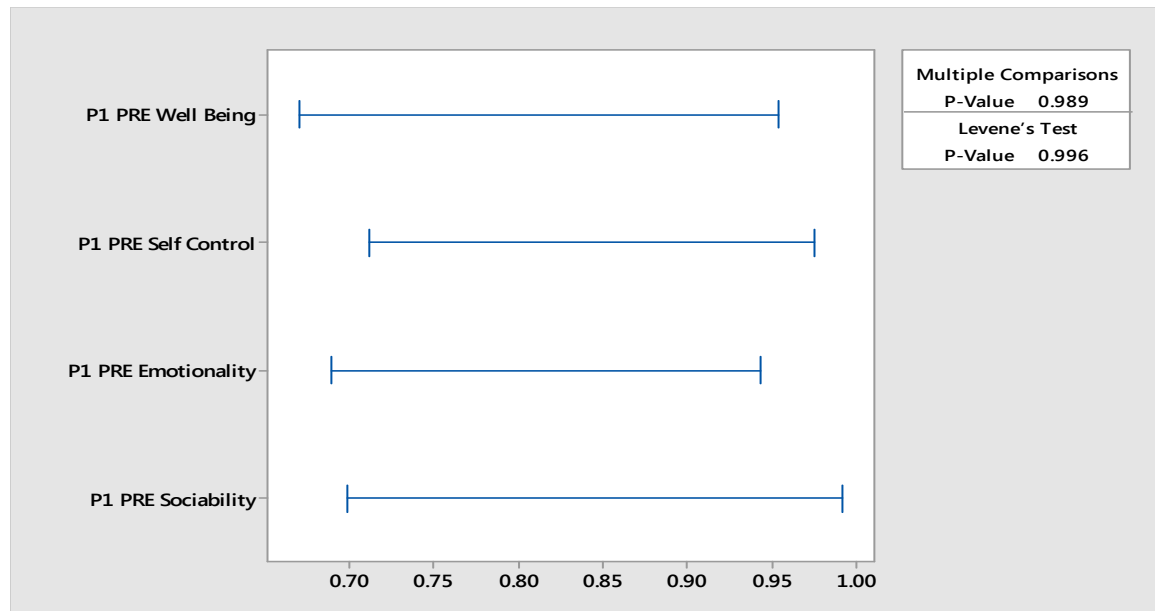
Figure 4. Results of the Levene's p-value.

An Analysis of Variance (ANOVA) was performed to determine if there was a

difference in the means of the factors of the TEIQue prior to attendance in the SLP. An

ANOVA was performed to determine any differences between the TEIQue factors, as the

SLP may have a different level of influence on the different internal factors and it was

necessary to determine the relative scores of each before and after participation. As

illustrated in Table 1, the *p*-value of 0.000 indicated that at least one of the means of the

factors is different. An ANOVA was also performed post attendance in the SLP, as

portrayed in Table 2, the p-value of 0.009 indicated that at least one of the means was

different.

Table 1

One-Way ANOVA of the TEIQue-SF Factors – Pre-SLP Attendance

Source	df	SS	MS	F	p
Between Groups	3	35.82	11.9409	18.63	0.000
Within Groups	236	151.28	0.6410		
Total	239	187.10			

Table 2

One-Way ANOVA of the TEIQue-SF Factors – Post-SLP Attendance

Source	*df*	*SS*	*MS*	*F*	*p*
Between Groups	3	12.36	4.121	4.08	0.009
Within Groups	80	80.75	1.009		
Total	83	93.11			

A Tukey's test was performed to determine which factor mean was different in each time period. A Tukey's test is a hypothesis test that examines if the averages of two or more samples are statistically different. As can be seen in Tukey's output in Table 3, the well-being factor is statistically different (higher) from sociability, self-control and emotionality in the pre scores. The Tukey's output of the post scores show that the well-being factor is different (higher) from the sociability and emotionality and that sociability and emotionality was lower than well-being. Sociability, emotionality and well-being were not different from self-control. As displayed in Table 3, the means of the TEIQue-SF factors were not significantly different pre and post SLP attendance (p-value > 0.05).

Table 3

Tukey's outputs and t-test findings for TEIQue-SF

TEIQue-SF Factor	Pre-Scores			Post-Scores			Pre to Post Tests		
	Mean	*SD*	Differs from	Mean	*SD*	Differs from	*t*	*p*	*df*
1 Self-Control	4.9	0.8	4	5.0	1.0		0.32	0.75	30
2 Sociability	5.0	0.8	4	4.9	1.0	4	-0.81	0.42	29
3 Emotionality	5.2	0.8	4	4.8	1.0	4	-1.76	0.09	27
4 Well-Being	5.9	0.8	1, 2, & 3	5.8	0.9	2 & 3	-0.70	0.48	30
TOTAL TEIQue-SF	5.4	0.6	n/a	5.2	0.9	n/a	-0.96	0.35	26

Phase 1, Hypothesis 1, **Analysis and Synthesis**

  The hypothesis for the Phase 1 data analysis was that there would be a difference in the means for each factor in the TEIQue-SF before and after attendance in the SLP. The test of equal variances indicated the usage of parametric statistical analysis tools was appropriate. As the raw data was obtained without identifiable demographics (i.e., there was no way to match scores from pre- to post- survey by individual), a two-sample *t*-test was used. A two-sample t-test can be used with continuous data if the data from one sample is not related to the observations from the other sample (Minitab, 2017). This was the case of the raw data given with no identifiable information associated with the pre and post survey responses. While the means of some factor scores increased by 0.1, analysis of the data showed that participation in the SLP did not change the global trait emotional intelligence (TEIQue) scores at a statistically significant level (Table 3). The results of the statistical analysis of the pre-SLP attendance TEIQue-SF across all factors was ($M = 5.4$, $SD = 0.6$). The results of the two-sample t-test at a 0.05 level of significance post-SLP attendance for the overall TEIQue-SF was $p = 0.35$, indicating that the mean of the pre-SLP attendance mean is not significantly different from the mean of the post-SLP attendance. The tests were conducted with a 95% confidence interval (CI) for the difference (0.05 level of significance), CI [5.2, 5.5] pre-SLP attendance, CI [4.8, 5.6] post SLP-attendance. Analysis of the Phase 1 TEIQue-SF does not support hypothesis one that participation in the SLP would result in a difference in the mean scores.

Phase 1 – PEI Data Analysis

The second hypothesis for the Phase 1 data analysis was that there would be a difference

in the means for each factor in

the Psychological

Empowerment Instrument

(PEI) before and after

attendance in the SLP. A test

of equal variance was

conducted, and the Levene's

test equated to 0.007,
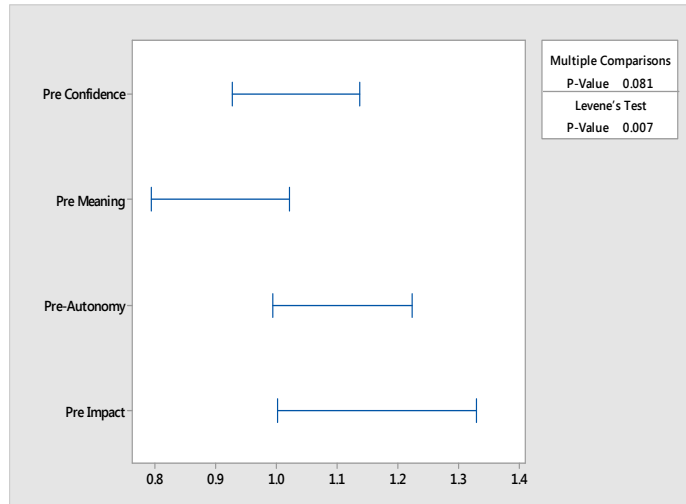
Figure 5. Test of equal variance.

indicating that there was not equal variances in the factors of the data (see Figure 5). As

the test for equal variance indicated variances were not equal, the median was used

versus the mean (which was used when the variances were equal). The statistics for the

pre-SLP PEI: confidence ($Mdn = 6$, $SD = 1.0$), meaning ($Mdn = 6$, $SD = 0.9$), autonomy

($Mdn = 6$, $SD = 1.1$), impact ($Mdn = 6$, $SD = 1.2$), and total ($Mdn = 6$; $SD = 1.1$).

ANOVA does not require equal variances; however, the option "assume equal variances"

(Brook, 2010, p. 20) was used as the sample and group sizes (more than two groups and

each group greater than 15), which met with the Minitab (2017) guidelines for one-way

ANOVA usage when the Levene's test equated to less than 0.05. An ANOVA was

performed prior to and after attendance in the SLP to determine if there was a difference

in the means of the factors of the PEI. As can be seen in Table 4, the *p*-value of 0.000

indicated that at least one of the means of the factors was different prior to attendance in

the SLP. A Tukey's test was performed to determine which factor mean was different.

Table 4

One-Way ANOVA Analysis of the PEI Factors-Pre-SLP attendance

Source	*df*	*SS*	*MS*	*F*	*p*
Between Groups	3	28.35	9.450	8.68	0.000
Within Groups	716	779.48	1.089		
Total	719	807.83			

Table 5

One-Way ANOVA Analysis of the PEI Factors-Post SLP Attendance

Source	*df*	*SS*	*MS*	*F*	*p*
Between Groups	3	10.81	3.602	3.14	0.026
Within Groups	248	284.19	1.146		
Total	251	295.00			

Table 6

Tukey's Outputs and t-test findings for PEI

		Pre-Scores			Post-Scores			Pre to Post Tests		
PEI Factor		Mean	SD	Differs from	Mean	SD	Differs from	t	*p*	df
1	Impact	5.4	1.1	4	5.9	1.2		2.70	0.00	101
2	Autonomy	5.5	1.1	4	5.8	1.2	4	1.50	0.14	97
3	Confidence	5.7	1.0	4	5.9	0.9		2.08	0.04	111
4	Meaning	5.9	0.9	1, 2, & 3	6.3	0.7	2	3.59	0.00	133
TOTAL PEI		5.6	1.00	n/a	6.0	1.1	n/a	4.61	0.00	430

The meaning factor was statistically different (higher) from the other three factors at a

0.05 level of confidence in the pre SLP attendance data (Table 6). There was not a

significant statistical difference in the means of factors confidence, autonomy, and impact

in the pre SLP attendance data. An ANOVA was also performed post attendance in the

SLP. The results of the ANOVA (Table 5) with a *p*-value of 0.026 indicated that at least

one of the means of the factors was different after attending the SLP. A Tukey's test was

performed to determine which factor mean was different. The meaning factor was

different (higher) from the autonomy factor, and the autonomy factor was different

(lower) from the meaning factor in the post SLP attendance data (Table 6). As can be

seen in Table 6, there was not a statistical difference in the means of factors confidence and impact in the post attendance data. A two-sample *t*-test was performed for the four factors of the PEI. Based on an alpha risk of 0.05, with the exception of the factor autonomy, there was a statistically significant positive difference in the scores from before to after attendance in the SLP in the t-test findings as shown in Table 6. Similar to the TEIQue-SF factors, the ANOVA and Tukey's tests were performed to understand differences between scores before and after the SLP, to support exploration of relative changes between the factors after SLP attendance. Figure 6 contains a boxplot showing the differences in the medians pre and post attendance in the SLP PEI scores.
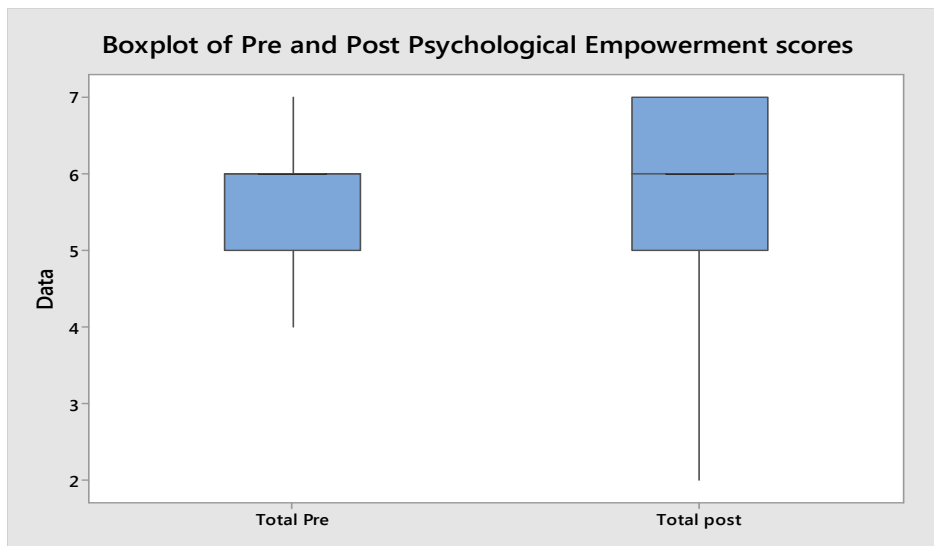
Figure 6. Boxplot of differences in the means pre and post attendance in the PEI scores.

Phase 1, Hypothesis 2, **Analysis and Synthesis**

Hypothesis 2 was that there would be a difference in the mean Psychological Empowerment scores before and after participation in the Selfless Leadership Program. Analysis of the data showed that the participation in the SLP did result in a change in the PEI mean scores. The results of the statistical analysis of the pre SLP attendance PEI across all factors was ($M = 5.6$, $SD = 1.0$), post SLP attendance ($M = 6.0$, $SD = 1.1$). The results of the two-sample t-test, at a 0.05 level of significance, for post SLP attendance compared to pre SLP attendance for all PEI factors was 0.000 indicating that the mean of the post-SLP mean was significantly higher from the mean of the pre SLP attendance. The tests were conducted with a 95% confidence interval (CI) for the difference, at a 0.05 level of significance, CI [5.6, 5.7] pre-SLP attendance, CI [5.9, 6.1] post SLP-attendance. Analysis of the Phase 1 PEI does support hypothesis two that there was a difference in the mean scores following participation in the SLP.

Phase 1 Analysis Summary

There could have been a number of reasons that the participants of the first five cohorts did not demonstrate a difference in their TEIQue-SF factors immediately after SLP participation. The attendees consisted of the senior leaders in the organization, who were mature in age, high in position and rank, and therefore they may have started with a high level of emotional intelligence. It was also possible that the participants did not notice a change, as the program was conducted over a period of 10 months, and the changes were too incremental to measure within that time frame. Based on the Phase 1 results, a Phase 2 research design was conducted. The decision was made not to utilize the PEI in Phase 2 as it did not measure behaviors addressed in the SLP as closely as the TEIQue-SF.

Also, the median PEI score was 6 prior to SLP attendance. As this score was relatively high prior to attendance in SLP, utilizing the survey again was not predicted to bring any new meaningful information.

Phase 2 Introduction

There were three possible reasons why the participants did not demonstrate a difference in their TEIQue-SF factors before and after participation in the SLP:

1. The time the post survey was given was too soon after completion of the SLP (one day following graduation).

2. The questions were not specific enough to measure if the SLP had an impact on the participants.

3. The individual had to leave LRMC to see the change clearly (i.e., begin work in a new venue or with new subordinates in order to enact significant behavior change).

Based on the scores in the TEIQue-SF, the research study was expanded to make it a repeated measured design with a longer span between measurements. The PEI was not given in Phase 2 as the primary goal of the SLP was enhancing emotional awareness and not psychological empowerment factors. Phase 2 of the study tested the three hypotheses:

Hypothesis #1: There will be a difference in the TEIQue-SF participants' scores one year or more after graduation from SLP.

Hypothesis #2: More specific questions regarding the SLP will elicit more precise information regarding the impact of the Selfless Leadership Program on the individual.

Hypothesis #3: Leaving LRMC made it easier (or would make it easier) to implement new leadership behaviors learned through participating in SLP.

Hypothesis 3 arose from a conversation with a former LRMC military officer who noticed that she could more easily integrate her changed behaviors into her new organization, as she was unknown, than she could in her former organization. Although I was not given any identifiable information regarding the Phase 1 survey data, I was given a roster of the participants of the program and who were no longer at LRMC. A total of 21 participants of the first five cohorts were no longer with the LRMC, but were still with the U.S. Medical Command when Phase 2 of the study was conducted.

Phase 2 Data

The survey for Phase 2 was sent to the 60 participants of the first five cohorts of the SLP. As can be seen in Figure 7, there were 36 responses (60% response rate), with 19 of the respondents being female and 17 male. A test of Equal Variances was conducted on the Phase 2 TEIQue-SF scores. The results of the test, a Levene's *p*-value of 0.07 (at an alpha risk of 0.05), indicated that the usage of parametric tests was appropriate. Additionally, an ANOVA was performed to determine if there was a difference in the means of the factors of the TEIQue-SF in this second "post" data collection. As Table 7 illustrates, the *p*-value of 0.000 indicated that at least one of the means of the factors was different.
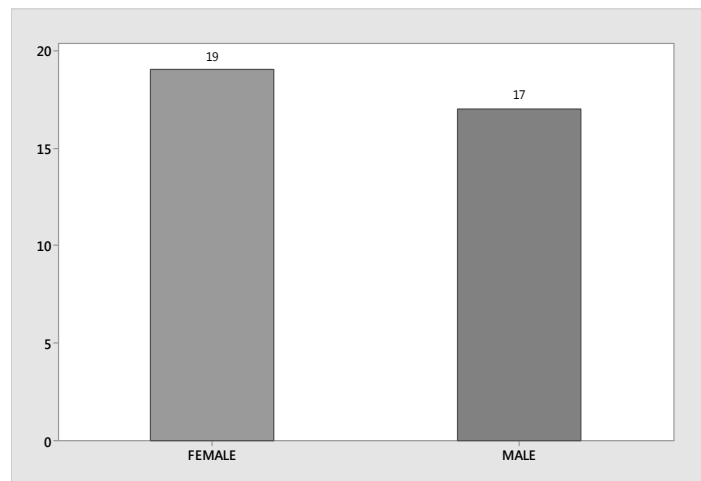
Figure 7. Phase 2 Demographic data

Table 7

One-Way ANOVA Analysis of the TEIQue-SF Phase 2 Analysis

Source	*df*	*SS*	*MS*	*F*	*p*
Between Groups	3	17.38	5.79	10.57	0.000
Within Groups	140	76.70	0.55		
Total	143	94.08			

A Tukey's test was performed to determine which factor mean was different. As depicted in Table 8, the well-being factor was statistically different from the other three factors in the Phase 2 (P2) post scores. Similar to the Phase 1 (P1) post data, in the P2

post data the factor well-being had the highest mean. Emotionality and sociability had

the lowest means in the P2 data.

A two-sample *t*-test was performed for the four factors of the TEIQue-SF. As can

be viewed on the two-sample *t*-test in Table 8, each factor of the TEIQue-SF from the

survey, conducted in March 2017 (P2) and August 2015 (P1) did not show a statistical

difference ($p > 0.05$) in the means. The data reflects that the mean of the total TEIQue-

SF were only slightly higher status post one year or more graduation from SLP, but not

statistically significantly different. Figure 8 contains a graphical representation of the

difference in the means in the P2 TEIQue-SF scores. Table 9 details these outputs and the

t-test findings.

Table 8

Tukey's Outputs and t-test findings for TEIQue-SF

		P1 Post-Scores			P2 Post-Scores			P1 Post to P2 Post		
TEIQue-SF Factor		Mean	*SD*	Differs from	Mean	*SD*	Differs from	*t*	*p*	*df*
1	Self-Control	5.0	1.0		5.1	0.6	4	0.45	0.7	30
2	Sociability	4.9	1.0	4	4.9	0.6	4	0.44	0.7	29
3	Emotionality	4.8	1.0	4	4.9	0.8	4	0.43	0.7	31
4	Well-Being	5.8	0.9	2 & 3	5.8	0.9	1, 2 & 3	0.10	0.9	40
Total TEIQue-SF		5.2	0.9	n/a	5.3	0.6	n/a	0.44	0.7	29
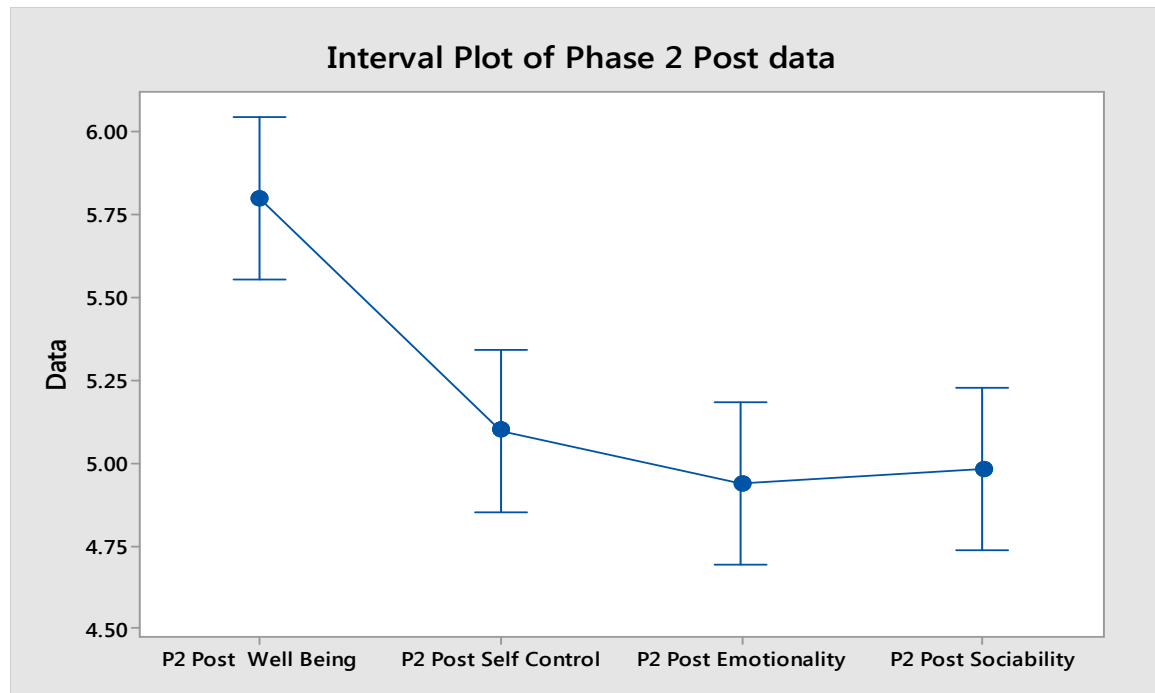
Figure 8. Graphical representation of Phase 2 factor differences.

The results of the statistical analysis of the P1 post SLP attendance TEIQue-SF across all factors was ($M = 5.2$, $SD = 0.9$), P2 one year or more post SLP attendance ($M = 5.3$, $SD = 0.6$). The tests were conducted with a 95% confidence interval (CI) for the difference 0.05 level of significance, CI [4.8, 5.6] P1 post-SLP attendance, and CI [5.1, 5.4] P2 post SLP-attendance one year or more after graduation. Analysis of the P2 TEIQue-SF data does not support hypothesis one that there would be a difference in the mean scores one year or more following participation in the SLP.

Seven single-item survey analysis. In addition to the TEIQue-SF, seven additional survey questions were administered via Survey Monkey to the SLP participants (Appendix F). A Likert scale was used that ranged from *1 (completely disagree)* to *5 (completely agree)*. The analysis of each of the questions is listed below.

Question 1. When asked if as result of their participation in SLP, the participants were more aware of their emotions as they experienced these emotions, 51.4% of the SLP

participants agreed and 48.6% strongly agreed ($M = 4.4$, $SD = 0.7$). The results of the analysis showed that the participants were more aware of their emotions as they experienced these because of their participation in SLP.

Question 2. When asked if as result of their participation in SLP, the participants were more aware of their emotional influence on others, 2.6% of the respondents neither agreed nor disagreed, 44.7% agreed, and 52.6% strongly agreed ($M = 4.6$, $SD = 0.6$). The results of the analysis showed that the participants were more aware of how their emotions influenced others because of their participation in SLP.

Question 3. When asked if as result of their participation in SLP, the participants were more aware of the non-verbal messages other people sent, 2.9% disagreed; 11.1% neither agreed, nor disagreed; 41.7% agreed; and 44.4% strongly agreed ($M = 4.6$, $SD = 0.6$). The results of the analysis showed that the participants were more aware of the non-verbal messages other people sent because of their participation in SLP.

Question 4. When asked if as result of their participation in SLP, the participants were more aware of the non-verbal messages they sent to others, 2.6% disagreed; 7.9% neither agreed, nor disagreed; 50.0% agreed; and 39.5% strongly agreed ($M = 4.3$, $SD = 0.7$). The results of the analysis showed that the participants were more aware of the non-verbal messages they sent to others because of their participation in SLP.

Question 5. When asked if as result of their participation in SLP, the participants were better able to understand why their emotions changed, 5.4% neither agreed, nor disagreed; 64.9% agreed; and 29.7% strongly agreed ($M = 4.3$, $SD = 0.6$). The results of the analysis showed that the participants were better able to understand why their emotions changed because of their participation in SLP.

Question 6. When asked if as result of their participation in SLP, the participants could easily recognize their emotions as they experienced these emotions, 8.1% neither agreed, nor disagreed; 64.7% agreed; and 27.0% strongly agreed (*M* = 4.2, *SD* = 0.6). The results of the analysis showed that the participants could easily recognize their emotions as they were experiencing these emotions because of their participation in SLP.

Question 7. When asked to what extent they agreed or disagreed that leaving LRMC made it easier (or would make it easier) for them to implement new leadership behaviors learned through their participation in SLP, 5.4% of the participants strongly disagreed; 5.4% disagreed; 21.6% neither agreed, nor disagreed; 40.5% respondents agreed; and 27.0% respondents strongly agreed.

The analysis of Question 7 tested Hypothesis 3. The results showed that the respondents agreed that leaving LRMC had (or would) make it easier to implement new leadership behaviors. A graphical representation of the responses to the 7-item survey is displayed in Figure 9.
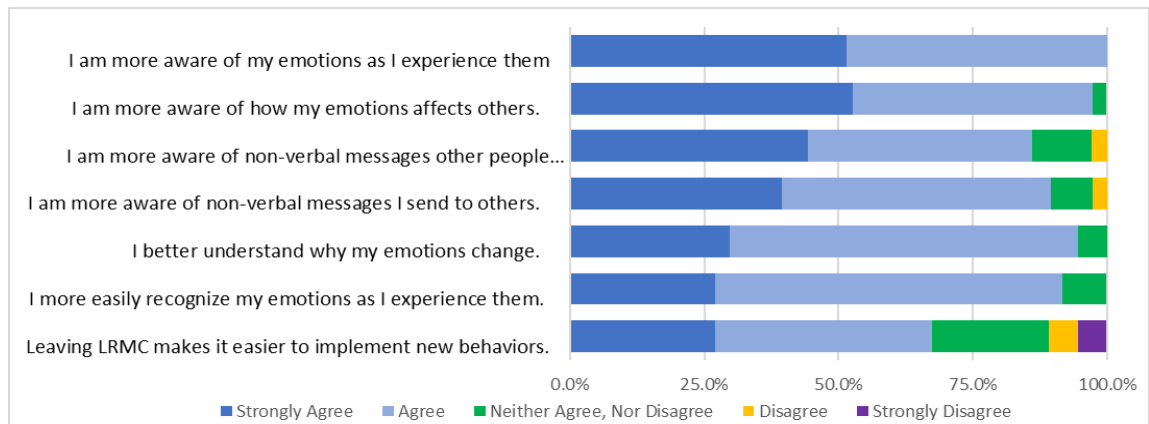
Figure 9. Graphical representation 7 single-item survey

Summary

Hypothesis 1, formed in Phase 1 of the study, was not supported by the analysis of the data. The Phase 1 data showed that the participation in the SLP did not change the global trait emotional intelligence (TEIQue) scores. Hypothesis 2, formed in Phase 1, was supported by the analysis of the data analysis of the Phase 1 data. The analysis of the data indicated that the participants did experience a change in their psychological empowerment. The data showed that the participants of the SLP did experience a change in the 3 of the 4 psychological empowerment factors, with only the autonomy not showing a difference. Autonomy is described by Spreitzer (1995) as the ability of individuals to make decisions about the methodology used to complete tasks, the speed, or the effort required. In a study conducted by Sherman, Lee, Cuddy, Renshon, Oveis, Gross and Lerner (2012), it was found that senior leadership positions were associated with less stress. Sherman et al. (2012) believed that senior leaders had more autonomy and therefore had less stress. The first five cohorts of SLP were senior leaders within the organization, and as a result of their seniority, there may have been a high level of autonomy within this group of leaders. The analysis of the total PEI score of all factors showed a change was noted overall, before and after attendance in the program.

Based on the TEIQue-SF results, a Phase 2 study was planned and three new hypotheses formed. The data supported did not support hypothesis one, but did support hypotheses two and three. While the data indicated that overall, participants in the SLP did experience a change in their behavior because of their participation in the program, these results were not reflected in the TEIQue-SF analysis, but were reflected in the single-item survey formulated specifically to understand the effect of the SLP on the

participants. Hypothesis 3, showed that over 67% of the SLP participants believed that it would be easier to implement the new behaviors learned in SLP once they had departed LRMC. Further study is required to understand why the participants believe departing LRMC would make (or had made) it easier to implement the new behaviors.

CHAPTER FIVE: CONCLUSIONS AND RECOMMENDATIONS

Introduction

This study examined the effect of the SLP on individuals by measuring their global trait intelligence and psychological empowerment, before and after participation in the program. Specific questions were also asked related to the SLP to examine the extent of the effect of the program on the behavior of the individuals.

Purpose of the Study

The purpose of this quantitative study was to identify what individual behavioral changes occurred in the Landstuhl Regional Medical Center (LRMC) Selfless Leadership Program (SLP) participants since the implementation of the program.

Aim of the Study

The aim of this study was to provide an evidence-based assessment of the effectiveness and impact of the SLP with recommendations for appropriate next steps. The next steps could include expansion of the program into other military medical facilities and expanding the program to include the LRMC Army health clinics in Belgium and Italy.

Proposed Solutions

Given that the aim of the study was to provide an evidence based assessment of the effectiveness and impact of the program with recommendations, the proposed solutions stemmed from the analysis of the data collected throughout this research project. These solutions included the following:

1. Continue to support the SLP.

2. Use a survey that allows a 360-degree assessment of the impact of the behavioral changes of the SLP participants on the subordinates, colleagues, and teammates of the participants of the program. A limitation of this study was that the impact of the changed behavior could not be measured on groups and on the organization.

3. Have the SLP as part of the onboarding (the integration of new employees into the organization) process when a new employee arrives at the organization. Schein (2010) stated that the culture of a group could be defined as a pattern of shared assumptions learned by the group. Having the program as part of the onboarding will bring new personnel into the culture of enhanced emotional intelligence and the consequences of the enhancement. As stated by Schein (2010), after a group has a culture, it will pass elements of this culture to new generations of group members. By viewing culture as the day to day transactions between people, each transaction then becomes an opportunity to enrich the quality of the interchange between individuals. By introducing the concepts of the SLP to newly arrived personnel, the desired behaviors become integrated into the culture. In a study performed by the Partnership for Public Service and Booz Allen Hamilton (2008), it was found that when done wisely, onboarding can improve employee engagement, employee retention and performance. Cheung-Judge and Holbeche (2015) posited the following three ways to change culture and behavior:

a. Pragmatic approach: Work backwards by focusing on the desired goals

of the organization and then focus on the behavior that will support the

delivery of the change goal.

b. Anthropological approach: This view believes that organizations do

not have cultures, the organization is the culture. The anthropological

view is that culture is not inside or outside but in-between the people.

The culture between-ness of the people.

c. Pattern versus culture change approach: Stop using the terminology

culture change, instead begin using less complicated terms such as

shifting patterns. (p. 195)

4. Expand the program throughout Medical Command. The Selfless Leadership

Program is only in one command (Regional Health Command-Europe).

Expanding the program throughout the entire five commands will promulgate

the principles of the program, meeting the intent of Mission Command 6-0

(build cohesive teams through trust).

Support for the Solution

Two of the overarching goals of the DoD (2017) include (a) sustaining a ready

force to meet mission needs, and (b) strengthening and enhancing the health and

effectiveness of the total workforce. Sustaining a ready force requires military and

civilians to stay within the DoD. Retaining employees in the DoD allows the mission to

continue. Chapter Four displayed the results of the SLP. The consequences or benefits

to improved emotional intelligence, detailed in Chapter Two, are increased trust and a

more engaged workforce. As the literature review showed, the antecedents of retention are engagement, which begins with emotionally intelligent leaders.

Wellins, Bernthal, and Phelps (2015) stated that organizations that focused on engagement had employees with higher engagement scores, which resulted in employees more satisfied with their jobs, less likely to leave a workforce, and more capable of achieving organizational results. The U.S. OPM (2016) report on employee engagement showed that leadership behaviors and interpersonal relationships (i.e., trust, respect, and support) were factors in engaging employees. The analysis of the data showed that participants taking part in the SLP were more aware of their emotions and how their emotions impacted others, based on the results of the 7 single –item survey questions after completing the program. Leaders who lead with emotional intelligence can build cohesive teams on a foundation of trust.

Factors and Stakeholders Related to the Solutions

Policies influencing the proposed solutions. Policies to support the implementation of the proposed solution require the SLP to become part of the culture of the organization. The previous and current commanders of the organization took a risk when supporting the program implementation. LRMC is an organization that uses appropriated funding that comes from the taxpayers. It is the responsibility of the commander to ensure that the funds are being used responsibly. Military members of the organization attend leadership training as part of their military careers. Civilian members attend newly established civilian education that provides leader development training (Army Management Staff College [AMSC], 2017). The training provided in the SLP is

not meant as a replacement for these valuable training programs; instead it is meant to compliment these programs.

The medical environment relies on teamwork. As stated in ADRP 6-0 (2012), it is the responsibility of leaders to build cohesive teams through mutual trust. The relationship between emotional intelligence and trust is critical if the army is to be successful. Evans et al. (2014) documented that the DoD had been under a hiring freeze for several years. The hiring freeze was part of the 2013 sequestration measures taken in response to Budget Control Act of 2011 that required $487 billion in cuts over 10 years in the DoD (Odierno, 2013). Evans et al. (2014) stated that the civilian federal employees seemed to be losing faith in the government's ability to make decisions on their behalf. Building an organization that can withstand the political turmoil of hiring freezes and budgetary constraints begins with leaders who are emotionally intelligent.

Potential barriers and obstacles to proposed solutions. Creating a program to enhance the emotional intelligence of leaders requires senior leadership support. While change can happen at the individual level, it requires the group to sustain the change (Gibson & Hodgetts, 1985). While the behavior of the participants is changing over the course of the program, sustaining the change requires mentoring, coaching and feedback from the group. Cheung-Judge and Holbeche (2015) stated that sustainable culture change would require a high degree of voluntary action and that genuine behavior change required the members of the organization to process why such change remained necessary. As a military organization, LRMC changes commanders every two years. The incoming commander may not support the program. Not only is financial support required to continue and/or expand the program, but support is also required to take

members of the organization out of their roles within the medical center to attend the training.

Another potential barrier to the program is the personnel who facilitate the program. As the program was being implemented, two facilitators were trained by an experienced facilitator (train-the-trainer). Delivery of the program requires specialized training that is not only lengthy to achieve, but also costly. If the training is to be a permanent part of the organization, succession training of the facilitators must be conducted.

Financial and budget issues related to the proposed solutions. Maintaining and sustaining the program requires funding to become part of the annual budget requirement presented through the budget office. The constant change in leadership leaves the program vulnerable, especially if measurable results are not routinely assessed. The direct costs of the program include training the facilitators and the cost of their salary. The indirect costs of the program are those related to the participants' attendance in the program. If the participant delivers direct patient care, he or she is measured in terms of productivity. Justifying why one does not deliver hands-on patient care to attend the program will have to be seen as a benefit to the leadership of the organization.

Existing support structure and resources. The military and civilian leadership schools, which members of the DoD attend, focus on teaching one abilities to lead from a strategic level. Until the advent of SLP, no concentrated office took all the different aspects required to enhance emotional intelligence and shaped it to deliver a leadership program that allows participants to examine their behavior. A known structure currently exists that is producing results, but it will require leadership to continue taking risks both

from a professional standpoint in attending the program and financially to continue supporting the program. As a result of this study, there is now an effective evaluation strategy for assessing the outcomes of the program.

      Change theory. The social cognitive theory proposes that behavior change is shaped by the environment, personal factors, and elements of the behavior itself (Robbins, 2003). Bandura (1968) first postulated the social cognitive theory in the 1960s, which was also known as the social learning theory. The social cognitive theory considers the manner in which individuals develop and maintain behaviors, while considering the environment where the individuals perform the behavior. Bandura (1977) hypothesized that social cognitive theory was comprised of four processes of goal realization. He further stated that the more reliable the experiential sources, the greater the change in perceived self-efficacy. Individuals process and synthesize information from sequences of events (Bandura, 1977). The social cognitive theory postulated by Bandura (1978) stated that cognitive individual and environmental factors interact to determine motivation and behavior. Figure 9 demonstrates Bandura's (1978) triadic reciprocal determinism model regarding the transformative process of facilitating, and support offered to the participants attending the SLP. The results of this study showed that behavior, personal factors and environmental factors, which according to Bandura 1977) are the areas where individuals perform the behavior are transformed by attending the SLP.
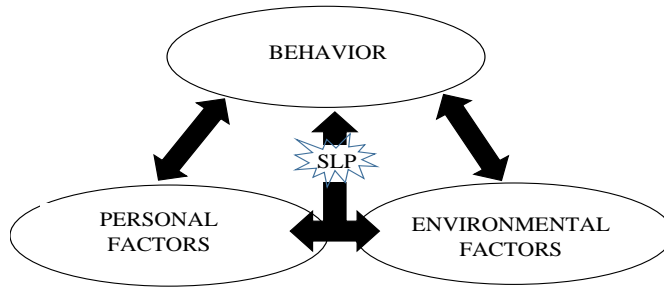
Figure 10. Adapted from Bandura's (1978) triadic reciprocal determinism.

Implementation of the Proposed Solution

Continued support and maintenance of the SLP will require senior leader support. Using a 360-degree assessment could begin with the colleagues, subordinates and leaders of the participants currently going through the program. Implementing either the total program or elements of the program into the onboarding process could be done in coordination with the LRMC Education Department. Introducing new members of LRMC to the elements of program will allow further dialogue to continue when the new employee is fully on-boarded into the culture of the organization. Expanding the program into other elements of the Regional Health Command-Europe will either require additional resources to ensure that additional facilitators are trained and are embedded within the other areas of the command or have the capacity for travel to the other areas throughout Europe. The program needs continued leadership support to ensure that when nominated to attend the program, supervisors allow participants to attend. Sponsorship from the commander must not only to communicate the value of the program throughout the medical center, but also to his superiors outside of the medical center.

Factors and Stakeholders Related to the Implementation of the Solution

The leadership of the organization must approach the SLP as an investment in personnel. As documented by both Watson (2010) and Knight et al. (2015), there is a ripple effect of enhanced emotional intelligence on patient satisfaction.

Building support for the proposed solution. As the senior military leadership of the organization rotate to new assignments, their replacements are usually known to them months prior to their departure. Discussing the program with their replacements prior to their arrival in the organization will assist in the program becoming a routine part of the organization. Having the new personnel attend the program upon their arrival will integrate them into the environment. The current environment has personnel who have already gone through the program. Having new personnel attend the program upon arrival in the organization will expand the base of leaders who have actively worked to enhance their emotional intelligence.

Additional considerations for implementation and assessment. The senior leaders of the organization should champion attendance of personnel within their directorates. By supporting the attendance of their personnel, the leaders can begin to develop outcome measures to determine the difference that attendance in the program is having on their staff. Outcomes measures could include enhanced team effectiveness, patient satisfaction and reduced turnover rates in civilian employees.

Global and external implications for the organization. LRMC is one medical center within the U.S. Army Medical Command (MEDCOM). There are five additional medical centers and dozens of medical clinics (Army Medicine, 2017). Expanding the program throughout MEDCOM will incorporate the changed behaviors into all areas of

the command. Warren (2013), stated that emotional intelligence has a positive association with healthcare providers and patient relationship to include increased empathy, teamwork, and communication and stress management. The aspects of behavior, and in particular, behaviors that are not aligned with the Army medicine's value of selfless service, are addressed during participation in the SLP, with the objective of affecting organizational change through behavioral change in individuals.

Evaluation and Timeline for Implementation and Assessment

The SLP is already a program conducted within the organization. Using a 360 degree assessment and measurement tool, such as the Emotional and Social Competency Inventory (ESCI), will provide a deeper level of understanding the impact of the SLP as it surveys not only the participants, but also colleagues, subordinates and leaders of the participant. The implementation plan is to ensure that the program continues and becomes a normal part of the daily operations. The solutions offered within this research study should be implemented in stages as new personnel arrive within the medical center. The analysts already in the organization can ascertain which organizational effectiveness metrics, already collected, can potentially be affected by a change in leadership behaviors. These measures can then be monitored on a regular basis, determining if expansion of the program will yield greater results. By measuring the impact of the program on newly assigned personnel via the use of a survey instrument, an assessment can be made if the proposed solution is changing behavior to determine if that change of behavior is benefiting the patient. Although not measured during this study, research conducted during the study demonstrates that patient outcomes are positively correlated with the emotional intelligence of healthcare providers.

Implications

Practical Implications

The practical implications for this study are that enhancing the emotional intelligence of leaders has a ripple effect throughout the organization. The DoD (2017) has been experiencing budget restrictions, hiring freezes, and sequestration in the last five years. All of these factors have the capability to erode trust and negatively influence the DoD workforce of both military and civilians. Having leaders who can build cohesive teams through mutual trust and create an engaged workforce will achieve the mission of the DoD.

Implications for Future Research

This study was conducted in one military medical center, surveying only the participants who had completed the SLP during the first five cohorts. The analysis showed that when the personnel rotated to different organizations, the principles of the program followed. One measure of the program might involve following this line of inquiry to understand why it was easier to implement new leadership behaviors at a new location. The study can also be expanded to compare changes in the emotional intelligence of participants completing the program to those who have not gone through the program. Implementing a 360 degree feedback instrument, such as those described by Durgin (2006), will allow the key factors of changed behavior be measured.

Implications for Leadership Theory and Practice

There are multiple agencies, including the Department of the Army, Department of the Air Force, and Department of the Navy, and while each agency uses a different methodology to accomplish the mission, each agency falls under the umbrella of the

DoD. Each military agency provides training to the individual military members on the proficiency needed at the time of war. Emotionally intelligent leaders can understand their emotions and the emotions of others to build a culture of trust, collaborative environment, and innovation. The results of the literature review showed that leaders with a high level of emotional intelligence are able to work collaboratively. Collaboration becomes critical when working with other agencies. The results of this study focused on the results of a leadership training that focused on emotional intelligence.

In 2009, the military made resiliency a priority by introducing the Combined Soldier Fitness (CSF) initiative (Sewell, 2011). The goal of the initiative was to increase resiliency using a holistic approach to "enhance resiliency, decrease post-traumatic stress, decrease the undesirable and destructive behaviors, lead to a greater likelihood of post-adversity growth and success" (Sewell, 2011, p. 80). The five domains of strength, identified as increasing resiliency, include physical, emotional, social, family, and spiritual aspects of life. According to Sewell (2011), each of the domains of strength is shaped by how well the individuals understand themselves, their relationship with others, and their environments. All of these domains are elements of emotional intelligence. By enhancing the emotional intelligence of the U.S. military and civilians, it is likely that resiliency will also increase.

Summary of the Study

U.S. Army doctrine states that it is the responsibility of leaders to build cohesive teams through mutual trust. The research conducted during this study showed that leaders with a high level of emotional intelligence are able to build trusting relationships.

The research focused on the outcomes of a leadership program at one military medical center. The emotional intelligence of the participants was measured and the program was found to be affecting the participants in a positive manner. The research study focused not only on emotional intelligence and psychological empowerment as measured using the TEIQue-SF and PEI, but also the consequences, or as labelled during this research— the ripple effect of emotional intelligence. While not measured during this research (i.e., the impact of the program on groups and the organization), the literature review indicated that enhanced emotional intelligence in leaders does effect groups and consequently the organization. Enhanced emotional intelligence in leaders has been shown in the research to produce a heightened sense of self-awareness which in turn leads to the building of trusting relationships. The literature review conducted during this study showed that when there is a culture of trust, it fosters communication, which promotes collaboration, which results in innovation. This study looked at the behavioral changes that the participants experienced as a result of their attendance in SLP, the evidence demonstrates that individual changes occurred as a result of attendance in the SLP. The individual changes included a more enhanced level of their emotions, a better understanding of how their emotions affected others, and a better understanding of non-verbal messages.

Phase one of the study was conducted using pre-existing survey data in a repeated-measures design. The analysis of the data showed that the participants experienced a difference in the three of the four psychological empowerment factors (meaning, confidence, and impact), but did not experience a difference in the autonomy factor. The behavior change measured indicated that the participants felt a heightened sense of purpose (meaning), enhanced self-efficacy (confidence), and they felt they were

making a greater impact. Analysis of the global trait emotional intelligence did not find changes from before to after participation in the program and a phase two study was created.

Similar to Phase 1 but over a longer span from pre-to-post-scores, a sequential repeated measured design was used in Phase 2, utilizing the TEIQue-SF instrument in addition to a series of new questions aimed at eliciting more specific information about the SLP. Analysis of the data in Phase 2 showed that the participants did not experience a change in their global trait emotional intelligence factors (emotionality, sociability, self-control and well-being). The analysis indicated that the participants of the program did not see themselves as more emotionally capable, more in touch with their feelings and the feelings of others (emotionality), more adept at social interaction (sociability), better able to control their impulses (self-control), or that they felt happier and more fulfilled (well-being) in the post-responses in Phase 2 (one year or more after graduation from SLP) than they did in the post responses in Phase 1. The results of the 7 single-item survey did show that the participants of the SLP overwhelmingly indicated that they experienced the desired changes after participation in the program.

The proposed solutions include continued support of the program from the leadership of the organization, measuring the impact of the program on a wider scale (subordinates, teammates and colleagues of the participants), having the program as part of the onboarding of newcomers to the organization, and expanding the program into other organizations. Support entails ensuring that their replacement leaders are aware of the program and acknowledging the benefits members of the organization are experiencing due to the program. Measuring the impact of the program on the

subordinates, colleagues and teammates of the participants' who have completed the program will also measure if the behavioral changes have an effect on the group and organization. Having the program as part of the onboarding process will promulgate the desired behaviors from the start of the new employee's tenure. Finally, expanding the program throughout the medical command will ensure that the changes experienced at the individual level are supported at the group level upon the participants' departure from the organization.

This study will contribute to the literature on the effect of enhanced emotional intelligence in the soldiers and civilians of the United States Army. This study has provided an awareness of the contributions of enhanced emotional intelligence in leaders. The Selfless Leadership Program was created for leaders of the Landstuhl Regional Medical Center with the intent to help the participants understand their core needs and to maximize their potential. Based on this research, the SLP is helping LRMC leaders increase their emotional intelligence and be more effective in their leadership roles.

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Appendix A

The Trait Emotional Intelligence Questionnaire (TEIQue)

Instructions: Please answer each statement below by putting a circle around the number that best reflects your degree of agreement or disagreement with that statement. Do not think too long about the exact meaning of the statements. Work quickly and try to answer as accurately as possible. There are no right or wrong answers. There are seven possible responses to each statement ranging from 'Completely Disagree' (number 1) to 'Completely Agree' (number 7).

1 . . . . 2 . . . . 3 . . . . 4 . . . . 5 . . . . 6 7

Completely Disagree   **Completely Agree**

1. Expressing my emotions with words is not a problem for	1	2	3	4	5	6	7
2. I often find it difficult to see things from another person's viewpoint.	1	2	3	4	5	6	7
3. On the whole, I'm a highly motivated person.	1	2	3	4	5	6	7
4. I usually find it difficult to regulate my emotions.	1	2	3	4	5	6	7
5. I generally don't find life enjoyable.	1	2	3	4	5	6	7
6. I can deal effectively with people.	1	2	3	4	5	6	7
7. I tend to change my mind frequently.	1	2	3	4	5	6	7
8. Many times, I can't figure out what emotion I'm feeling.	1	2	3	4	5	6	7
9. I feel that I have a number of good qualities.	1	2	3	4	5	6	7
10. I often find it difficult to stand up for my rights.	1	2	3	4	5	6	7
11. I'm usually able to influence the way other people feel.	1	2	3	4	5	6	7
12. On the whole, I have a gloomy perspective on most things.	1	2	3	4	5	6	7
13. Those close to me often complain that I don't treat them right.	1	2	3	4	5	6	7
14. I often find it difficult to adjust my life according to the circumstances.	1	2	3	4	5	6	7
15. On the whole, I'm able to deal with stress.	1	2	3	4	5	6	7
16. I often find it difficult to show my affection to those close to me.	1	2	3	4	5	6	7
17. I'm normally able to "get into someone's shoes" and experience their emotions.	1	2	3	4	5	6	7
18. I normally find it difficult to keep myself motivated.	1	2	3	4	5	6	7
19. I'm usually able to find ways to control my emotions when I want to.	1	2	3	4	5	6	7
20. On the whole, I'm pleased with my life.	1	2	3	4	5	6	7

21. I would describe myself as a good negotiator.	1	2	3	4	5	6	7
22. I tend to get involved in things I later wish I could get out of.	1	2	3	4	5	6	7
23. I often pause and think about my feelings.	1	2	3	4	5	6	7
24. I believe I'm full of personal strengths.	1	2	3	4	5	6	7
25. I tend to "back down" even if I know I'm right.	1	2	3	4	5	6	7
26. I don't seem to have any power at all over other people's feelings.	1	2	3	4	5	6	7
27. I generally believe that things will work out fine in my life.	1	2	3	4	5	6	7
28. I find it difficult to bond well even with those close to me.	1	2	3	4	5	6	7
29. Generally, I'm able to adapt to new environments.	1	2	3	4	5	6	7
30. Others admire me for being relaxed.	1	2	3	4	5	6	7

Trait Emotional Intelligence Questionnaire – Short Form (TEIQue-SF). This 30-item form includes two items from each of the 15 facets of the TEIQue. Items were selected primarily on the basis of their correlations with the corresponding total facet scores, which ensured broad coverage of the sampling domain of the construct. The –SF can be used in research designs with limited experimental time or wherein trait EI is a peripheral variable. Although it is possible to derive from it scores on the four trait EI factors, in addition to the global score, these tend to have somewhat lower internal consistencies than in the full form of the inventory. The –SF does not yield scores on the 15 trait EI facets.

Scoring key: Reverse-score the following items and then sum up all responses

I often find it difficult to show my affection to those close to me. (R) 16

I often find it difficult to see things from another person's viewpoint. (R) 2

I normally find it difficult to keep myself motivated. (R) 18

I usually find it difficult to regulate my emotions. (R) 4

I generally don't find life enjoyable. (R) 5

I tend to change my mind frequently. (R) 7

I tend to get involved in things I later wish I could get out of. (R) 22

Many times, I can't figure out what emotion I'm feeling. (R) 8

I normally find it difficult to stand up for my rights. (R) 10

I tend to "back down" even if I know I'm right. (R) 25

I don't seem to have any power at all over other people's feelings. (R) 26

On the whole, I have a gloomy perspective on most things. (R) 12

Those close to me often complain that I don't treat them right. (R) 13
I find it difficult to bond well even with those close to me. (R) 28

I often find it difficult to adjust my life according to the circumstances. (R) 14

*Numbers on the right correspond to the position of the items in the short form of the questionnaire.
**If you would like to derive factor scores based on the long form, see Webnote 2 on the website.

Appendix B

Spreitzer's Psychological Empowerment Instrument

Listed below are a number of self-orientations that people may have with regard to their work role. Using the following scale, please indicate the extent to which you agree or disagree that each one describes your self-orientation.

A. Very Strongly Disagree   E. Agree
B. Strongly Disagree   D. Neutral   F. Strongly Agree
C. Disagree   G. Very Strongly Agree

I am confident about my ability to do my job.

The work that I do is important to me.

I have significant autonomy in determining how I do my job.

My impact on what happens in my department is large.

My job activities are personally meaningful to me.

I have a great deal of control over what happens in my department.

I can decide on my own how to go about doing my own work.

I really care about what I do on my job.

My job is well within the scope of my abilities.

I have considerable opportunity for independence and freedom in how I do my job.

I have mastered the skills necessary for my job.

My opinion counts in departmental decision-making.

The work I do is meaningful for me.

I have significant influence over what happens in my department.

I am self-assured about my capabilities to perform my work activities.

I have a chance to use personal initiative in carrying out my work.

Appendix C

Demographic Data Collection

Before-Selfless Leadership Program attendance demographics data

1. What is your gender?

2. What category below includes your age?

3. What types of leadership training have you previously had?

4. What are your expectations for this Selfless Leadership Program?

After-Selfless Leadership Program attendance demographics data

1. What is your gender?

2. What category below includes your age?

3. What types of leadership training have you previously had?

4. Were your expectations for this Selfless Leadership Program met?

Appendix D

Expectations of Selfless Leadership Course

- To learn more about myself as a leader: my strengths, weaknesses, preferential style, and ultimately how to be a better leader.
- Develop more confidence; learn more about myself to understand how I can adapt to different styles of personnel.
- To improve resiliency for not only myself but for my team. Augment the "tools" I have and add to help make me a better OIC and to help guide our team to work more harmoniously and efficiently thus making everyone happier to come to work.
- New ideas on leadership - styles, supporting staff.
- To become more self-aware.
- Gain knowledge and insight of my leadership style and develop more effective leadership habits.
- Learn communication skills. Work on leadership development: self and others
- To become an effective leader to my subordinates and to not get overwhelmed.
- My expectation is to learn how to break down barriers in interacting and influencing those that I lead and serve.
- Opportunity to reflect on and hone my leadership style.
- Aid in leading subordinates
- To learn a more efficient way how to positive influence the workforce - improve myself
- Incorporate more tools into my toolbox to be a successful leader.
- Learn human systems tools to become a better leader, peer, subordinate and human being.
- Relearn what I've been taught in previous Leadership Trainings but tend to put them in play but sometimes backtrack due to the increased workload of trying to stay afloat. My expectations are to take what I learn in the class about myself and implement it not only at work but throughout my life.
- To help me refocus myself as a leader to help me improve my relationships with my team and in my personal life.
- To enhance customer service and team building within my section/organization and my personal life.
- Learn how to better deal with my shortcomings and further enable my coworkers and subordinates.
- To grow and learn, and to be able to help the organization
- Increased self-awareness of leadership style
- To garner new concepts/ideas to expand my leadership potential.
- To increase my awareness of and attention paid to both weaknesses and strengths in how I interact with others, inspire commitment and support from people I supervise as well as those with whom I collaborate. I would like to be able to enhance my self-confidence to lead; I feel that if I am more confident about this, it will free up more of my energy to spend focusing on others rather than worrying about myself and how I'm being perceived.

- I expect to learn more about myself as a leader, understand new methods/techniques for developing a more effective work environment, and hopefully be able to apply what I learn.
- I would like to identify, validate, and assess leadership strategies which we can use to motivate and retain the civilian workforce. We are in a period of tough financial times which means the traditional awards are limited, and the risk of sequestration makes many civilians want to leave the workforce. I would like to know how other leaders are addressing these issues.
- None. I'm just open to receive whatever is meant for me to receive through this experience.
- Improve understanding and ability to lead within a large organization.
- To better understand myself and others that I work with and to determine how I can better lead others to lead...to be a force multiplier...not to be a genius, but to be a "Genius Maker"
- Get up to date on latest in leadership development, trends, and buzz words and how to best utilize in my current position.
- Shrink my blind spot, improve my level of emotional intelligence and interpersonal skills
- Identify weaknesses and discover ways to improve them
- To become a more well-rounded civilian leader in a military organization.
- Explore options for effective leadership styles   See what is new in this area Delve into /exercise effective conflict management techniques Develop interpersonal relationships with current leaders at LRMC
- Renewed and refocused understanding of solid leadership priorities and goals, collaboration and hopefully a few fresh nuggets to take away that can be applied in my day to day interactions as well as long term goal setting.
- I have been a supervisor for many years. I would love to be able to evaluate myself to see how good or bad my supervisor/leadership skills really are. Also, I am certain there is room for improvement when dealing and interacting with coworkers and subordinate staff on a daily basis.
- Better leadership tools to adapt to today's Soldier and managing their expectations with the reality of mission requirements.
- To lead in a way to create a collaborative team and a positive working environment.
- Improve my leadership senses, skills and behaviors. Build or improve on current leadership abilities.
- To hopefully become a better leader.
- To improve on my leadership skills
- Gain self-awareness and general approach to different but effective leadership styles/approaches.
- A different perspective or a confirmation of my current perspective of leadership.
- To learn more about myself, my co-workers, and identify opportunities to contribute to a stronger LRMC.
- To learn and develop the skills needed to become a selfless leader. To bring the skills I learn back to my clinic and share what I learn with my team mates.

- To learn more about myself to grow as a leader who can help others recognize & achieve their goals.
- Understand what motivates others to lead
- Too learn more about the Selfless Leadership program
- Identify and improve my leadership weaknesses, use my leadership strengths, understand the personal and professional motivations of others (subordinates, peers, and superiors) in order to lead and serve them better.

Appendix E

Consent Form

Selfless Leadership Program Consent Form

You are invited to participate in a web-based online survey on "The effect of the Selfless Leadership Program on individuals, groups, and Landstuhl Regional Medical Center." This is a research project being conducted by Lee Tapia, a student at Creighton University. It should take approximately 30 minutes to complete.

PARTICIPATION
Your participation in this survey is voluntary. You may refuse to take part in the research or exit the survey at any time without penalty. You are free to decline to answer any particular question you do not wish to answer for any reason.

BENEFITS
You will receive no direct benefits from participating in this research study. However, your responses may help us learn more about the effect of the Selfless Leadership Program (SLP).

RISKS
There are no foreseeable risks involved in participating in this study other than those encountered in day-to-day life.

CONFIDENTIALITY
Your survey answers will be sent to a link at SurveyMonkey.com where data will be stored in a password protected electronic format. Survey Monkey does not collect identifying information such as your name, email address, or IP address. Therefore, your responses will remain anonymous. No one will be able to identify you or your answers, and no one will know whether you participated in the study.

CONTACT
If you have questions at any time about the study or the procedures, you may contact me at leetapia@creighton.edu

If you feel you have not been treated according to the descriptions in this form, or that your rights as a participant in research have not been honored during the course of this project, or you have any questions, concerns, or complaints that you wish to address to someone other than the investigator, you may contact the IRB Office Contact Information Location: Criss I, Room 104, Creighton University, 2500 California Plaza, Omaha, NE 68102, Phone: 402-280-2126, Fax: 402-280-4766 or Email: IRB@creighton.edu

ELECTRONIC CONSENT: You may print a copy of this consent form for your records. By taking the survey, you agree that:

You have read the above information
You voluntarily agree to participate
You are 18 years of age or older

Appendix F

Phase 2: Additional Survey Questions

Scale

1…………....…..2……………..…..3………..…..…...4…………..…......5
Strongly disagree   Disagree   Neither agree   Agree   Strongly agree
                               Nor disagree

To what extent do you disagree or agree with each statement (1-5 scale above):

For questions 1-6, As a result of my participation in SLP,

1. I am more aware of my emotions as I experience them.

2. I am more aware of how my emotions affects others.

3. I am more aware of non-verbal messages other people send.

4. I am more aware of non-verbal messages I send to others.

5. I better understand why my emotions change.

6. I more easily recognize my emotions as I experience them.

7. To what extent do you agree or disagree that leaving LRMC (PCS) made it easier (or would make it easier) for you to implement new leadership behaviors learned through SLP?

Appendix G

Post Selfless Leadership Program Attendance Survey Responses

Question1: To what extent did the Selfless Leadership Program meet your expectations?

- Exceeded
- Somewhat
- Exceeded
- Exceeded
- I did not have expectations
- Exceeded
- Exceeded
- Exceeded
- Exceeded
- Exceeded
- Exceeded
- I had no expectations.
- Exceeded
- Exceeded
- I did not know what to expect when the program started but it exceeded anything I could have expected.
- Exceeded
- Exceeded
- Exceeded
- Exceeded
- Exceeded

Question 2: What do you consider the strengths of the program?

- The program took the time to help each individual grow at their own pace. The SLP leadership would challenge people to help them overcome issues. I think we are lacking really good peer mentorship in the AMEDD. This program allows people to discuss topics with peers that they would never have met without the program.
- Focuses on relationships and understanding why you do things vs. leadership theory. Each session built on the previous session and allowed time between sessions to work on things.
- Good review of leadership principles.
- The group process
- Being able to meet and work with other medical personnel that I would otherwise not work with in the hospital. Learning new leadership tools to better myself as a leader.
- Organized plan of reevaluating self and seeing people as people to maximize high efficiency team. Allowed self-reflection and self-evaluation as perceptions as a leader
- The networking opportunity in such a large organization and the material itself.
- The instructors are great. They present the information in a clear and concise manner.

– Interactions with other leaders who shared their views and perceptions about balance of family, work and religion. Chance to step back from the workplace (totally) and engage in self-reflection and leadership learning.
– The instructors are definitely a strength. Also the ability to get tools and have a common language in which to communicate. Providing an understanding of the human system and how complex it is.
– Small group breakouts.
– Meeting with equal level colleagues on a regular basis. There are many people that I would barely meet or get to know and this course allowed us to have a full day every month to interact. This fosters teamwork as we better understand each other's goals/needs in light of the "mission."
– Networking and the opportunity to build a professional relationships that can offer support. Introducing models to use in leadership positions. Opening our apertures to the environment/mission around us. Improving our awareness and support of the higher mission. Balancing personal and professional lives.
– The ability of the proctor to be able to make the attendees think and participate. It was very flexible and adaptable to the participants
– Going through this program you are really encouraged and you really have no other choice but to self-examine and move on from there.
– It stresses the importance of seeing people as people and of looking at things from others' perspectives.
– Relationships Self-awareness Practical tools
– The ability to help in the creating of meaningful working relationships. The encouragement of open and honest communication. The realization that it is okay to be vulnerable.
– Having two sessions a month.
– Relationship building and learning a leadership style which is geared toward you the leader versus the staff you lead.

Question 3: Which areas of the program could be improved?

– I wish the program could be longer.
– Contract with students at the beginning of the course to attend at least 90% of the sessions. We had a few people that missed a few classes which detracted from the program.
– None
– Not taking a full day out of work. We are all busy but I think the material could be condensed so folks didn't have to leave early or miss out on time because they had more pressing things back at work.
– would like to see more organization of the classes and more out of class interactions with the cohort
– None
– Sustainment of the foundations developed in the course.
– Length of class
– I like the frequency and the pace. Would not change a thing.
– A follow on program.

- Develop an off the shelf, exportable product which compliments core principles of SLP and integrates a common operating language and operational picture for the entire organization. Lunch and learns, Friday afternoon trainings, CEU's, etc.
- Although some of the projects that we did seemed goofy and minimally helpful, I can see how they all have their place and somebody will have found them useful even if others did not. Thus, no particular change.
- No comments. The program was very solid.
- Not sure, I really got a lot out of it.
- Cannot think of any.

Question 4: What skills learned in the program are you currently using?

- I had the unique challenge of taking on new jobs that I did not except during the program. I was able to discuss issues with peers and program leaders and develop real time solutions. These solutions helped make things successful. What is unique about LRMC is how many of the senior leaders went thru the program. As the interim troop commander, I was able to use the skills I learned in the program along with other key leaders that were in different iterations of the program. We were able to develop several key programs during my tenure as a team. Using our new communication skills and seeing each other as people and not objects really helped us move forward in challenging situations.
- 3 legged stool application (particularly ego management) and I'm more willing to ask for help. Also the disengagement session was applicable for me and caused me to be more deliberate in disengaging w/ my recent PCS.
- Check-in
- Spectrum Development, support systems, system thinking, sound & current Data, Feedback - everything.
- Contracting, support systems, human systems analysis, feedback and four lenses to understand personalities
- how am I a problem for others, spectrum
- self-evaluation and trying to identify colleagues' needs
- Trying not to be a problem for others!!
- In/Out of the box thinking. Learning what needs others have and how they interfere with day to day interactions.
- - Starting meetings with an interesting check-in - Very well received. - Being cognizant and focusing on "how am I a problem for others" - Identifying people who I may be in conflict with and having tools to facilitate resolution. - Key improvement in my listening skills which offers a powerful indication of whether I am regarding the speaker as an object or a person. - Being aware of the color spectrum and gaining experience with detecting an individual's color has been very successful in both personal and professional life.
- Contracting, sound and current data. The influence pyramid and more.
- I am trying to incorporate all the skills learned - some better than others.
- Framing my interactions w/ others in terms of understanding others "outside triangles" and seeing them as people as much as possible, rather than a means to an end.

– Intentional in building relationships and trying to promote the value of our human interaction. Purposeful in communication to be clear such as contracting. Reaching out for support
– Building better relationships with my coworkers.
– Seeing people as people and not objects is something I am trying to apply daily.
– crucial conversations; sound and current data
– Stool Pyramid Colors
– Check-ins. Coordinating with Work Force Development to assist with the team in forming stronger relationships
– Trying to be my best adult.
– Influence pyramid

Questions 5: Do you have any other thoughts regarding the program not addressed?

– I think it takes time to trust others and develop relationships. Many times as we progress in rank, we do not get to know others in our rank or the next rank higher. The SLP allowed us to get to know each other in many situations in small groups. As we built our relationships, we started to trust each other more. I feel that this is the most valuable leadership program I have ever attended. Many thanks to the leadership team for all the hard work they put into the program to ensure it was successful,
– I felt this was a worthwhile program and appreciated the opportunity to participate.
– This type of course is better suited for new leaders (E-5s, LTs/CPTS). I do not think that the best audience is senior leaders.
– Keep doing it, it is beneficial for all ranks
– Need sustainment infrastructure in place
– This really is a great program and should be pushed down to lower levels, i.e. CPTs and E-6s.
– More on conflict resolution and poor performer management.
– I am very pleased that leadership decided to invest in and offer this training; honored to have been selected, and fully support continuation and expansion throughout the organization.
– Developing a corporate sustainment plan for skills learned.
– To be honest, I think the main advantage of this process was to force people to take time to get together and talk so that we get to know each other. This helps the organization run more smoothly as we can more easily call a friend to get things done. This could be done in many different ways, but to force discussions to open people up, there does need to be some sort of format and this SLP provides that. However, other formats could work just as well.
– The perceptions of those that are not in the program, as I understand it, are that the leaders are going to the program and there is no result from this. However, I believe that they just don't know what to look for. Case in point. I was in someone's office yesterday, when a team member from my cohort walked in. Seeing me, he called me by my first name, gave me a huge hug, told me it was good to see me and updated me, quickly, on things that were going on from his perspective. When he left, the person whose office I was in, and who has worked with this team member on a daily basis for nearly 2 yrs., commented, "I have never seen him hug anyone before now!" The

relationship that we have established repaired a long standing adversarial relationship and is invaluable. It has resulted of wins in my division, as well as the organization as a whole!