

The Effect of Self-leadership and Empowerment on Job Satisfaction among Clinical Nurses

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Received: 14-September-2022

Revised: 16-November-2022

Accepted: 18-December-2022

Abstract

The higher the job satisfaction accomplishes voluntary job performance and effectively achieving goals of medical institution and nursing organization. It is essential factor to achieve the goals of hospital organizations through stable workforce management. It also provided crucial information for advancing the clinical nurses' sense of work fulfillment. The members were 244 clinical nurses working at three general medical clinics in M-city, who figured out the reason for this study and consented to partake in the study. Using SPSS Adaptation 20.0 for Windows, descriptive statistics, t-test and ANOVA, Pearson's correlation coefficient, and other regressions were used to analyse the data. As per general attributes, self-leadership was found to show massive contrasts regarding religion and complete clinical experience, and huge contrasts in strengthening by age and absolute clinical experience. Job satisfaction was uncovered tremendous contrasts to age, all out clinical experience, and occupation title in like manner general qualities. The factors affecting job satisfaction were empowerment and age. These findings present the necessity to develop and apply education programs to improve empowerment to improve the job satisfaction of clinical nurses. Especially, Intervention strategies focusing on training nurses with little clinical experience is also necessary

Keywords: -job satisfaction, clinical nurses, self-leadership, and empowerment.

1. INTRODUCTION

Background

Human environments are ever-evolving and are being managed via Human resource management the largest professional group in hospitals is the nursing community, and they are essential to achieving the goals and maintaining the standard of care provided by healthcare facilities. In hospital organizations, they make up 40%–50% of the staff [1][2]. Since nurses are responsible for the majority of patient care, raising the standard of nursing practise will also improve the standard of medical treatment [3]. Therefore, effective nursing workforce management is important in providing quality services to healthcare consumers [4]. Nurses who are satisfied with their jobs provide better quality nursing services to patients and have positive attitudes toward their work environment[5], form positive organizational cultures and help improve organizational productivity[6]. In addition, job satisfaction is one of the main factors influencing turnover intention [7][46], so efforts are needed to enhance nurses' job satisfaction to improve the effectiveness of nursing organizations through managing nursing workforces [8][47]. Primary factors affecting job satisfaction include personal characteristics such as age, education level, and religion, and organizational characteristics such as autonomy, professionalism, self-leadership, and empowerment. Among them, self-leadership and empowerment are the variables that can be controlled through education and experience [5] [8], so nursing organizations and hospitals need to consider these variables to solve their challenges in workforce management due to the high turnover rate of clinical nurses.

Self-leadership is a whole self-impact perspective that focuses on motivating oneself to complete tasks that are often inspiring and supervising oneself to handle business that needs to be handled but isn't typically inspiring[9] [48]. It is formed when autonomy and responsibility are given developed and maintained through learning and education, and it lowers the turnover intention of nurses and increases job engagement and

satisfaction [8][9][10]. Self-leadership enhances one's abilities and positively affects organizational performance [11], and influences nurses' job satisfaction through setting goals for themselves based on future vision and intrinsic compensation [8][11]. In particular, self-leadership in nursing organizations is closely related to nursing work performance [12][13], so managers should consider and prepare measures at the level of nursing and hospital organizations to improve self-leadership.

Empowerment is also emphasized to improve the efficiency of nursing organizations and increase job satisfaction. Empowerment is the demonstration of giving power and position to somebody, which makes it clear to managers or members from an association how to play out their obligations following the vision and mission of the association, and what their obligations are [14][15]. Empowering nurses increases the effectiveness of work through personal changes, brings voluntary efforts to the role of members, and improves job satisfaction as a significant factor in achieving goals [14]. Empowered nurses strive to achieve organizational goals, are autonomous in making decisions, increase communication efficiency, and have more self-confidence, thereby improving the quality of patient care [16]. Stronger job satisfaction, reduced burnout, higher self-confidence, and better work performance are all correlated with nurses' perceived sense of empowerment [17] [18]. Increased work efficiency through empowerment allows employees to increase their job satisfaction through voluntary job performance and leads to effectively achieving organizational goals [19].

As above, past studies showed that self-leadership and empowerment were huge variables affecting the job satisfaction of nurses. Although many studies reported self-leadership [20][21][22] and empowerment [23][24] as factors affecting nurses' job satisfaction, there is still a lack of research on examining these variables (empowerment, self-leadership, and job satisfaction) together. Therefore, to contribute to achieving the goals of hospital organizations through stable workforce management of nursing organizations, this study aims to give essential data expected to effectively oversee nursing workforces and develop training programs by examining factors influencing job satisfaction.

Purpose

By surveying clinical nurses' job satisfaction, self-leadership, and empowerment as well as identifying factors affecting job satisfaction, this study aims to provide important information for further increasing the job satisfaction of clinical nurses.

The specific objectives are:

- Assess the members' level of job satisfaction, self-leadership, and empowerment.
- Determine how participant characteristics affect differences in work satisfaction, self-leadership, and empowerment.
- Identify the correlation between the participants' job satisfaction, self-leadership, and empowerment
- Identify factors affecting the job satisfaction of the participants.

2. METHOD

Design

The participants were 244 clinical nurses working at three general emergency hospitals in M-city, who figured out the reason for this study and consented to take part in the research. The sample size determined utilizing G*Power 3.1 was 194 individuals (in light of a medium impact size = .15, importance level = .05, and power = .95). However, 250 copies were distributed, considering a 30% dropout rate. The final statistics and analysis included data from 244 copies, excluding 6 copies with insufficient information.

3. RESEARCH TOOLS

Self-leadership

Self-leadership was estimated with an instrument created by Manz [25] and changed and enhanced by Kim [26]. There is three of each of the following 18 things, which are divided across six subspaces: preparing oneself, creating goals, compensating one, being critical of one, and thinking constructively. The reliability in this study was .89, compared to .87 in Kim's concentrates [26].

Empowerment

A tool created by Chandler [28] and based on Kanter's idea [27] was used to quantify empowerment. To meet the nursing settings in Korea, Yang [29] translated and condensed the original 34 things to 28 items, which Park [30] then adjusted and added to. It has 26 components broken down into groups like opportunity (eight), information (seven), support (eight), and resources (eight) (3). On a Likert scale of 1 to 5, with 1 denoting "Not at all" and 5 denoting "A lot," everything is rated. Compared to Park's focus, this review had a reliability of .94 as opposed to .89 [30].

Job Satisfaction

An instrument developed by Slavitts et al. [31], modified by Park and Yeun [32], and improved and changed by Kim [33], was used to measure job satisfaction. Things 1 through 15 received opposite scores. The dependability in this review was .90, compared to .86 in Kim's concentrates [33].

4. DATA COLLECTION AND ANALYSIS

Data Collection

Data were collected at three general hospitals in M-city. In the wake of clearing up the reason for this study for the top of the nursing division of every emergency clinic and getting endorsement, the specialist clarified the motivation behind this study for clinical nurses who consented to partake and got composed assent prior to conveying the questionnaires. After filling out the self-report questionnaires, nurses sealed the copies in envelopes and submitted them to the researcher. In this study, 244 (97.6%) out of 250 copies were used for statistical analysis, excluding those with insufficient or missing information. The dropout rate was 2.4%.

Data Analysis

The collected data were investigated utilizing SPSS/WIN 20.0 as follows.

- The participants overall qualities were determined and portrayed in numbers and percentages.
- The participant's self-leadership, empowerment, and job satisfaction were determined and portrayed in mean and standard deviation values.
- The correlation between's the members' self-leadership, empowerment, and job satisfaction was investigated utilizing Pearson's Correlation Coefficient.
- Various regressions were utilized to recognize the primary variables influencing the participants' job satisfaction.

Ethical Consideration

The survey was carried out with approval from the Institutional Review Board (IRB) of University C. (IRB number: CIRB-2017-07-01). The study's objectives and its components were described at the top of each questionnaire while taking ethical issues into account. The study's assent structure maintained anonymity, made it obvious that the data would only be used for research, and gave participants the option to leave the study at any time. Each participant carefully read each paper, confirmed its substance, and signed consent before completing the surveys.

5. RESULTS

General Characteristics

The study participants were 92.6% female and 50.0% of them were 20-29 years old. Of the participants, 63.5% were single, 59.0% were not religious, and 50.0% had a bachelor's degree. In terms of clinical experience, 35.8% worked 1-5 years, and 46.7% received a monthly salary of 2.5 million won or more. In terms of departments, 55.0% worked in internal medicine and surgery. As for shift type, 76.6% of the participants worked in three shifts and general nurses accounted for the most (85.6%) in terms of job titles Table 1.

Table 1: Participant Characteristics in General

Characteristics	Categories	n	%
Gender	Male	18	7.4
	Female	226	92.6
Age	20-29	122	50.0
	30-39	88	36.1
	40-49	29	11.9
	Above 50	5	2.0
Marital Status	Single	155	63.5
	Married	89	36.5
No. of Children	0	166	67.8
	1	29	12.0
	2	43	17.8
	3	5	2.0
	4 and more	1	0.4
Religion	No	144	59.0
	Yes	100	41.0
Education	College graduate	104	42.6
	Bachelor's degree	122	50.0
	≥ Master's degree	18	7.4
Experience	< 1 year	40	16.4
	1-5 years	87	35.8
	5-10 years	54	22.0
	≥ 10 years	63	25.8
Salary	< 2 million won	30	12.3
	2 - 2.5 million won	100	41.0
	≥ 2.5 million won	114	46.7
Department	Internal medicine	56	23.0
	Surgery	78	32.0
	Others	110	45.0
Shift Type	1 shift day	55	22.6
	1 shift night	2	0.8
	3 shifts	187	76.6
Job title	General nurse	209	85.6
	Charge nurse	21	8.6
	Head nurse	11	4.5
	Others	3	1.3
Total		244	100.00

The participants' level of self-leadership, empowerment, and job satisfaction

The average score for self-leadership was 3.38 (± 0.48), empowerment 2.98 (± 0.51), and job satisfaction 3.08 (± 0.47) Table 2.

Table 2: Levels of self-leadership, empowerment, and work satisfaction among participants (N=244)

Variables	Mean \pm SD	Range
Self-Leadership	3.38 \pm 0.48	1 ~ 5
Empowerment	2.98 \pm 0.51	1 ~ 5
Job Satisfaction	3.08 \pm 0.47	1 ~ 5

Self-leadership, empowerment, and job satisfaction variations based on participant general characteristics

According to religion, there were pronounced disparities in self-leadership ($t=-2.980, p=.003$) and total clinical experience ($F=4.800, p=.003$). As a result of post-hoc analysis, religious people had a significantly higher score (3.49) in self-leadership than non-religious people. In terms of total clinical experience, the participants with 10 years or more clinical experience had a significantly higher score (3.54) in self-leadership than those with 5-10 years of experience.

Age and total clinical experience both significantly affected empowerment ($F=2.960, p=.033$ and $F=5.790, p=.00$ respectively). According to the findings of the post-hoc analysis, participants with less than one year of experience exhibited higher levels of empowerment than those with one to five and ten years of experience. Individuals with 10 years or more of experience had an average empowerment score that was considerably higher than participants with 5 to 10 years of experience.

There were significant differences in job satisfaction according to age ($F=7.720, p=.001$), total clinical experience ($F=8.170, p<.001$), and job title ($F=3.470, p=.017$). As a result of post-hoc analysis, participants aged 40-49 years and over 50 years had significantly higher job satisfaction than those aged 20-29 years and 30-39 years. In terms of total clinical experience, subjects with less than 1 year and 10 years or more experience had significantly higher job satisfaction than those with 1-5 years and 5-10 years. As for job titles, head nurses had significantly higher job satisfaction than general nurses Table 3.

Table 3: Disparities in self-leadership, empowerment, and job satisfaction were discovered based on participant general characteristics (N=244)

Characteristics	Categories	Self-Leadership			Empowerment			Job Satisfaction		
		M \pm SD	t or F (Scheffe)	p	M \pm SD	t or F (Scheffe)	p	M \pm SD	t or F (Scheffe)	p
Gender	Male	3.46 \pm 0.41	-0.657	.512	2.94 \pm 0.53	0.332	.740	3.02 \pm 0.54	0.555	.579
	Female	3.38 \pm 0.49			2.99 \pm 0.51			3.09 \pm 0.46		
Age	20-29a	3.34 \pm 0.44	1.880	.134	2.99 \pm 0.47	2.960	.033	3.06 \pm 0.40	7.720 (a,b<c,d)	.001
	30-39b	3.38 \pm 0.53			2.90 \pm 0.55			3.00 \pm 0.51		
	40-49c	3.57 \pm 0.48			3.13 \pm 0.51			3.33 \pm 0.44		
	\geq 50d	3.36 \pm 0.53			3.42 \pm 0.55			3.74 \pm 0.36		
Marital Status	Single	3.35 \pm 0.44	-1.525	.128	2.96 \pm 0.51	-1.005	.316	3.06 \pm 0.45	-1.246	.214
	Married	3.45 \pm 0.54			3.03 \pm 0.50			3.13 \pm 0.50		
Religion	No	3.31 \pm 0.45	-2.980	.003	2.94 \pm 0.50	-1.488	.138	3.08 \pm 0.45	-0.175	.861
	Yes	3.49 \pm 0.51			3.04 \pm 0.52			3.09 \pm 0.49		
Education	College graduate	3.32 \pm 0.50	2.600	.076	2.94 \pm 0.50	0.950	.389	3.03 \pm 0.47	1.560	.211
	Bachelor	3.41 \pm 0.47			3.01 \pm 0.49			3.11 \pm 0.44		

	≥ Master	3.59±0.40			3.09±0.67			3.21±0.56		
Total Clinical Experience	< 1 year a	3.43±0.42	4.800 (d>c)	.003	3.19±0.48	5.790 (a>b,c, d>c)	<.001	3.27±0.41	8.170 (a,d>b,c)	<.001
	1-5 years b	3.35±0.45			2.91±0.47			2.98±0.42		
	5-10 years c	3.22±0.47			2.82±0.53			2.94±0.41		
	≥ 10 years d	3.54±0.52			3.10±0.52			3.24±0.53		
Salary	< 2 million won	3.52±0.50	2.290	.103	3.15±0.50	1.800	.168	3.16±0.38	0.550	.581
	2~2.5 million won	3.32±0.46			2.97±0.50			3.06±0.45		
	≥ 2.5 million won	3.41±0.49			2.95±0.51			3.09±0.50		
Department	Internal medicine	3.40±0.53	0.330	.717	3.09±0.60	2.000	.138	3.15±0.46	1.400	.248
	Surgery	3.41±0.44			2.99±0.51			3.11±0.44		
	Others	3.36±0.49			2.92±0.45			3.03±0.48		
Shift Type	1 shift_day	3.49±0.53	1.630	.198	3.01±0.54	0.090	.916	3.05±0.56	0.140	.869
	1 shift_night	3.42±0.51			3.04±0.38			3.07±0.30		
	3 shifts	3.35±0.46			2.98±0.50			3.09±0.44		
Title	General nurse a	3.38±0.49	0.100	.962	2.97±0.52	0.740	.532	3.05±0.46	3.470 (c>a)	.017
	Charge nurse b	3.40±0.43			2.97±0.37			3.14±0.42		
	Head nurse c	3.44±0.47			3.19±0.58			3.47±0.51		
	Others d	3.44±0.29			3.12±0.24			3.38±0.14		

Self-leadership, empowerment, and Job Satisfaction among Participants

The results of the study on the correlations between these three variables and job satisfaction showed that job fulfillment showed a substantial positive relationship with self-leadership ($r=.312$, $p.001$) and empowerment ($r=.711$, $p.001$). Additionally, there was a strong positive association between self-leadership and empowerment ($r=.485$, $p.001$) Table 4.

Table 4: Relationship between Participants' Self-Leadership, Empowerment, and Job Satisfaction (N=244)

Variables	Self-Leadership $r(p)$	Empowerment $r(p)$	Job Satisfaction
Self-Leadership	1	.485(<.001)	.312(<.001)
Empowerment		1	.711(<.001)
Job Satisfaction			1

Factors Affecting Participants' Job Satisfaction

Among the overall qualities that were critical in job satisfaction, the impacts old enough, all out clinical experience, and occupation title on job satisfaction were utilized for stepwise various regression examinations. The consequences of looking at multicollinearity between the independent factors showed that everything was good to go on the grounds that the variance inflation index (VIF) was 1.05~1.13, not exactly the limit of 10. Because of residual examination, the regression supposition that was fulfilled by affirming the independence between the errors terms (Durbin-Waston 1.813).

Because of examining the variables influencing the participants' work fulfillment, strengthening ($\beta=.648$, $t=13.731$, $p<.001$) and age ($\beta=.094$, $t=2.000$, $p=.047$) fundamentally affected job satisfaction. The regression model was genuinely huge ($F=38.522$, $p<.001$), and its logical power was 52.1% Table 5.

Table 5:Participants' Job Satisfaction and Related Factors (N=244)

Variables	B	SE	β	t(p)	Durbin- Waston	Adj R2	F(p)
Age	.154	.047	.094	2.000(.047)	1.813	.521	38.522(<.001)
Empowerment	.710	.047	.648	13.731(<.001)			

6. DISCUSSION

The findings of this study, which examined the factors impacting clinical nurses' empowerment, self-leadership, and job satisfaction, are as follows.

The job satisfaction score of clinical nurses in this study was 3.08 out of 5, like 3.05 for authoritative nurse and 3.03 for clinical nurse in Jang and Suh [39] 3.10 of Jun et al. [24] and higher than 2.56 in Lee et al [43], 2.74 in Sung and Lee [22] and 2.96 in Lee and Ahn [44]. Although it is difficult to make a direct comparison due to tool discrepancy, this study showed lower than 3.40 points of An and Park [45]. In terms of the distribution by item, 'My work is undoubtedly important' was the highest, followed by 'My colleagues in my nursing unit do not hesitate to encourage each other when there are challenging tasks,' and 'I can provide better quality care to my patients if I have more time.' On the other hand, 'My job has many opportunities for promotions' was the lowest. In Kim [33], which used the same tool, 'I will choose this profession again even if I am given another chance,' 'I discuss problems and implementations with head nurses or higher,' and 'My working hours are reasonable' showed the highest scores, which were different from this study. Appreciating nursing work and having positive emotions can increase the efficiency of nursing work because it makes one do their best in nursing. However, the perception that one's opinions are not reflected in planning and implementing hospital policies or promotions can be discouraging. So, it is necessary to create a desirable organizational culture to effectively reflect the voices of nurses, considering the number of nurses within the organization and the significance of their work.

In this review, job satisfaction as per general attributes showed huge contrasts in age, all out clinical experience, and job title. Post-hoc analysis revealed that the job satisfaction of head nurses and nurses aged 40–49 and 50–plus, with less than one year and ten years or more of cumulative clinical experience, respectively, was higher than that of nurses aged 20–29 and 30–39, with one to five years and ten years of experience, and general nurses. These findings were partially consistent with the study by Yang & Jeong [21], which reported higher job satisfaction with age.

The self-leadership score of clinical nurses was 3.38 out of 5, like 3.37 in the concentrate by Sung and Lee [23], 3.34 in Hwang [34] and marginally lower than 3.48 in Choi et al. [35], 3.59 by Park [36]. The sub-areas of self-leadership were high in the request for self-remuneration, practice, self-assumption, self-analysis, objective setting, and helpful reasoning. Self-pay was seen the most in this review. It was additionally high in examinations utilizing a similar device, for example, Kim [26] on middle school teachers and Jang and Kim [37] on nurses, which was reliable with the discoveries of this review. The high self-compensation scores in this study show that clinical nurses are rewarding themselves for successful work processes and results. This is significant as it inspires the desire to work and influences future behavior choices. In addition, studies by Han and Park [38] on general hospital nurses reported low constructive thinking scores, which was consistent with this study. On the other hand, in the study by Yang & Jeong [21], the sub-scales were high in the order of rehearsal, self-expectation, and goal setting.

In case of religion, self-leadership was high, and as a result of the post-hoc analysis of clinical experience, 10 years or more was higher than 5-10 years. This was comparable to Kim's study [26] on nurses who used the same technique. In this study, the self-leadership scores increased according to more clinical experience, which was attributed to higher professionalism in work according to more experience because

nurses could take responsibility for more tasks by them. These findings show the need to make organizational efforts to enhance the self-leadership competencies of clinical nurses with little clinical experience.

The empowerment score of clinical nurses in this study was 2.98 out of 5. It was significantly lower than the 3.1 in Jeon et al. [25], 3.26 for administrative nurse and 3.35 for clinical nurse in Jang & Suh [39], 3.37 in Kim & Kwon [40], 3.56 for advanced practice nurses and 3.50 for general nurses in Jung & Kim [41], and the 3.60 in Oh & Chung [2]. However, it was higher than 2.86 in Park & Park [42]. According to age and total clinical experience, there were substantial disparities in empowerment, which was in line with Park & Park's findings [42], according to which nurses over the age of 36 were more empowered than those between the ages of 26 and 30. Given these findings, initiatives will be required to empower young clinical nurses with less training.

The survey tracked down a substantial positive relationship between self-leadership, empowerment, and job satisfaction among clinical nurses. There was likewise a significant positive relationship among empowerment and job satisfaction. These revelations were consistent with the examinations by Benevolent and Chung [23] and Yang and Jeong [21], which reported basic connections between's self-leadership, empowerment, and job satisfaction among nurses.

In this study, work satisfaction was influenced by age and empowerment. This was in line with Oh & Chung [23], who claimed that nurses were more, satisfied with their jobs the more empowered they were.

Therefore, nursing and hospital organizations should develop training programs and apply strategies to empower nurses to improve their job satisfaction.

7. CONCLUSION

This study examined clinical nurses' self-leadership, empowerment, and job satisfaction as well as elements that affect job satisfaction to provide important details for enhancing clinical nurses' job happiness.

As per the overall qualities, Self-leadership was found to give huge contrasts regard to religion and absolute clinical experience. Furthermore, empowerment had a massive distinction as per age and complete clinical involvement with general qualities. There were likewise massive contrasts in job satisfaction as per age, absolute clinical experience, and job titles.

The analysis of the relationships between self-leadership, empowerment, and job satisfaction found that self-leadership and empowerment had a very significant positive association as well as a very significant positive relationship with job satisfaction.

Factors influencing the job satisfaction of the members were age and empowerment. The illustrative force of the model was 52.1%. These findings highlight the necessity of developing and implementing planning projects to increase empowerment and boost clinical nurses' job satisfaction. In particular, Intervention strategies focusing on training nurses with little clinical experience are also necessary.

ACKNOWLEDGEMENTS

Funding

There was no special grant for this research from public funding organizations.

Authors' contributions

All authors agreed to be accountable for all elements of this work and contributed to data analysis, drafting, and revision of the publication.

Declaration of Conflicts of Interests

The authors affirm their lack of any conflicts of interest.

Consent for Publication

Each author has reviewed the article and is aware that it will be published in the Journal for Reattachment Therapy and Developmental Disabilities.

Data Availability Statement

The database developed and/or examined during the current work is not publicly accessible due to privacy concerns; however it is available from the relevant author upon a valid request.

Declarations

All works are original, according to the author(s), and this material hasn't been published in another journal.

REFERENCE

- [1] Y. J. Jun, I. A. Kim, G. S. Han, and J. Y. Lim, "The effects of empowerment on job satisfaction: focusing on followership style," *Journal of Korean Nursing Administration Academic Society*, vol. 11, no. 1, pp. 23-31, 2005.
- [2] E. H. Oh and B. Y. Chung, "The effect of empowerment on nursing performance, job satisfaction, organizational commitment, and turnover intention in hospital nurses," *Journal of Korean Academy of Nursing Administration*, vol. 17, no. 4, pp. 391-401, 2011. <https://doi.org/10.1111/jkana.2011.17.4.391>
- [3] C. C. Huang, C. S. You, and M. T. Tsai, "A multidimensional analysis of ethical climate, job satisfaction, organizational commitment, and organizational citizenship behaviors," *Nursing Ethics*, vol. 19, no. 4, pp. 513-529, 2012 <https://doi.org/10.1177/0969733011433923>
- [4] M. H. Kim and M. S. Jung, "The effect of head nurse's emotional leadership on nurse's job satisfaction & organizational commitment," *Journal of Korean Academy of Nursing Administration*, vol. 16, no. 3, pp. 336-347, 2010 <https://doi.org/10.1111/jkana.2010.16.3.336>
- [5] J. Choi and H. J. Park, "Professional self-concept, self-efficacy and job satisfaction of clinical nurse in schoolwork," *Journal of Korean Academy of Nursing Administration*, vol. 15, no.1, pp. 37-44, 2009
- [6] B. M. Bang, S. Y. Lee, and J. O. Cheong, "Empirical study on the turn-over intention of university hospital nurses," *Journal of Digital Convergence*, vol. 13, no. 2, pp. 205-213, 2015. <https://doi.org/10.14400/JDC.2015.13.2.205>
- [7] L. H. Aiken, S. P. Clarke, D. M. Sloane, J. Sochalski, and J. H. Silber, "Hospital nurse staffing and patient mortality, nurse burnout, and job dissatisfaction," *The Journal of the American Medical Association*, vol. 288, no. 16, pp. 1987-1993, 2002. <https://doi.org/10.1001/jama.288.16.1987>
- [8] S. H. Choi, I. S. Jang, S. M. Park, and H. Y. Lee, "Effects of organizational culture, self-leadership and empowerment on job satisfaction and turnover intention in general hospital nurses," *Journal Korean AcadNursAdm*, vol. 20, no. 2, pp. 206-214, March 2014. <https://doi.org/10.1111/jkana.2014.20.2.206>
- [9] C. C. Manz and H. P. Sims, "Super leadership; beyond the myth of heroic leadership," *Organizational Dynamics*, vol. 19, no. 4, pp. 18-35, 1991. [https://doi.org/10.1016/0090-2616\(91\)90051-A](https://doi.org/10.1016/0090-2616(91)90051-A)
- [10] J. Y. Kim and J. Y. Hong, "Self-leadership, job stress and job satisfaction among clinical nurses," *The Journal of Korean Nursing Administration Academic Society*, vol. 13, no. 2, pp. 184-189, 2007.
- [11] G. A. Seomun, "The relationship of self-leadership, job satisfaction and perceived outcome in nurses," *Journal of Korean Academy of Nursing Administration*, vol. 11, no. 1, pp. 45-58, 2005.
- [12] D. S. Chung, "An exploratory study for transformation leadership, perceived organizational support and job performance in general hospital organization: Focus on self-efficacy," *Journal of The Korean Data Analysis Society*, vol. 7, no. 6, pp. 2191-2208, 2005.
- [13] G. A. Seomun, S. O. Chang, K. H. Cho, I. A. Kim, and S. J. Lee, "The relation between self-leadership and outcome of nursing practice," *Journal of Korean Academy of Nursing Administration*, vol. 12, no. 1, pp. 151-158, 2006.
- [14] R. C. Ford and M. D. Fottler, "Empowerment: A matter of degree," *Acad Manage Rev*, vol. 9, no. 3, pp. 21-29, 1995. <https://doi.org/10.5465/ame.1995.9509210269>
- [15] M. S. Koh, "A study on the influence of empowerment on job satisfaction and organizational commitment of clinical nurses," *Korean Journal of Hospital Management*, vol. 9, no. 2, pp. 23-45, 2004.

- [16] M. A. Madden, "Empowering nurses at the bedside: What is the benefit?" *Australian Critical Care*, vol. 20, pp. 49-52, 2007. <https://doi.org/10.1016/j.aucc.2007.02.002>
- [17] A. Patrick and H. K. Laschinger, "The effect of structural empowerment and perceived organizational support on middle level nurse managers' role satisfaction," *Journal of Nursing Management*, vol. 14, no. 1, pp. 13-22, 2006. <https://doi.org/10.1111/j.1365-2934.2005.00600.x>
- [18] M. S. Song, "The relationships between the empowerment, nursing performance, job satisfaction and turnover intention of long-term care hospital nurses," *Journal of the Korea Academia-Industrial cooperation Society*, vol. 14, no. 5, pp. 2304-2314, 2013. <https://doi.org/10.5762/KAIS.2013.14.5.2304>
- [19] L. Kuokkanen and H. Leino-Kilpi, "Power and empowerment in nursing: Three theoretical approaches," *Journal of Advanced Nursing*, vol. 31, no. 1, pp. 235-241, 2000. <https://doi.org/10.1046/j.1365-2648.2000.01241.x>
- [20] H. N. Moon and M. H. Sung, "Impact of ego-resilience, self-leadership and stress coping on job satisfaction in emergency department (ED) nurses," *Korean Journal of Occupational Health Nursing*, vol. 25, no. 4, pp. 268-276, November 2016. <https://doi.org/10.5807/kjohn.2016.25.4.268>
- [21] S. K. Yang and E. Jeong, "Convergence effects of positive psychological capital and self-leadership in clinical nurses on job satisfaction," *Journal of Digital Convergence*, vol. 15, no. 6, pp. 329-337, 2017.
- [22] M. H. Sung and M. Y. Lee, "Effects of self-leadership, clinical competence and job satisfaction on nurses' job involvement," *Journal of Korean Clinical Nursing Research*, vol. 23, no. 1, pp. 1-8, April 2017.
- [23] E. H. Oh and B. Y. Chung, "The effect of empowerment on nursing performance, job satisfaction, organizational commitment, and turnover intention in hospital nurses," *J Korean AcadNurs Admin*, vol. 17, no. 4, pp. 391-401, 2011. <https://doi.org/10.11111/jkana.2011.17.4.391>
- [24] S. Y. Jun, H. J. Rho, and J. H. Lee, "The impact of organizational justice, empowerment on the nursing task performance of nurses: Focused on the mediating effect of job satisfaction and organizational commitment," *Korean Journal of Occupational Health Nursing*, vol. 23, no. 2, pp. 55-66, May 2014. <https://doi.org/10.5807/kjohn.2014.23.2.55>
- [25] C. C. Manz, "The art of self-leadership: strategies for personal effectiveness in your life and work," New Jersey: Prentice-Hall Inc, 1983.
- [26] H. S. Kim, "The relationship between teachers' self-leadership and the job satisfaction at secondary schools," Soongsil University Seoul, Master's theses, pp. 52, 81-82, 2003.
- [27] R. M. Kanter, "Power failure in management circles," *Harvard Review*, pp. 65-75, July-August 1979.
- [28] G. E. Chandler, "The relationship of nursing work environment to empowerment and powerlessness," University of Utah Salt Lake City, Ph.D dissertation, 1986.
- [29] K. M. Yang, "Analysis of the relationship between the empowerment, the job-related individual characteristics and the work performance of nurses," University of Kyung Hee Seoul, Ph.D dissertation, pp. 31-32, 69, 1999.
- [30] J. Y. Park, "Study on empowerment level, job stress and nursing work performance," Chung-Ang University Seoul, Master's theses, pp. 71-72, 2003.
- [31] D. B. Slavitt, P. L. Stamps, E. B. Piedmont, and A. M. B. Hasse, "Nurses' satisfaction with their work situation," *Nursing Research*, vol. 27, no. 2, pp. 114-120, 1978. <https://doi.org/10.1097/00006199-197803000-00018>
- [32] S. A. Park and S. N. Yeun, "Measurement of Job Satisfaction of nurses and health workers in health center," *Journal of Korean Academy of Nursing*, vol. 22, no. 3, pp. 316-324, 1992. <https://doi.org/10.4040/jnas.1992.22.3.316>
- [33] M. S. Kim, "Influence of career ladder system on nursing performance, job satisfaction, organizational," Ph.D dissertation, p. 93, 2012.
- [34] H. J. Hwang, "The effect of clinical nurses' self-leadership and stress-coping type on resilience," *Journal of Learner-Centered Curriculum and Instruction*, vol. 21, no. 18, pp. 679-691, 2021, <https://doi.org/10.22251/jlcci.2021.21.18.679>.
- [35] I. Y. Choi, N. H. Park, and J. H. Jeong, "Effects of clinical nurses' self-leadership and nursing organizational culture on nursing performance," *The Journal of the Korea Contents Association*, vol. 19, no. 12, pp. 502 - 516, 2019. <https://doi.org/10.5392/JKCA.2019.19.12.502>

- [36] Y. R. Park, "The effect of nursing unit managers' super-leadership on nurses' self-leadership and job satisfaction," *Journal of the Korean Data Analysis Society*, vol. 14, no. 3 (B), pp. 1507-1517, June 2012.
- [37] M. K. Jang and H. Y. Kim, "A convergence study on the effects of self-leadership and self-esteem on nursing performance," *Journal of the Korea Convergence Society*, vol. 9.no. 2, pp. 51-59, 2018.
- [38] Y. H. Han and Y. R. Park, "Effects of Self-leadership and job involvement on clinical competence in general hospital nurses," *J Korean AcadNursAdm*, vol. 19, no. 4, pp. 462-469, September 2013. <https://doi.org/10.11111/jkana.2013.19.4.462>
- [39] S. J. Jang and W. S. Suh, "Impacts on the influence of role conflict and job stress on empowerment, job satisfaction, and organizational commitment: Comparative analysis of administrative nurses and clinical nurses, health & welfare," vol. 22, no. 2, pp. 161-184, June 2020. <https://doi.org/10.23948/kshw.2020.06.22.2.161>.
- [40] S. Y. Kim and Y. E. Kwon, "Effect of happiness and empowerment on nursing performance of clinical nurses. journal of the korea academia-industrial cooperation society, vol. 21, no. 1, pp. 112-120, 2020. <https://doi.org/10.5762/KAIS.2020.21.1.11>.
- [41] I. J. Jung and Y. M. Kim, "A comparison of empowerment, job satisfaction, organizational commitment between advanced practice nurses and registered nurses of hospital," *The Journal of the Korea Contents Association*, vol. 16, no. 3, pp. 354-365, 2016. <https://doi.org/10.5392/JKCA.2016.16.03.354>
- [42] J. S. Park and B. N. Park, "The influence of empowerment on job satisfaction, task performance and turnover intention by hospital nurses," *J Korean AcadNurs Admin*, vol. 14, no. 2, pp. 150-158, June 2008.
- [43] T. K. Lee, J. A. Yun, and I. S. Kang, "The Influences of leisure satisfaction and burnout on job satisfaction of clinical nurses," *Journal of Industrial Convergence*, vol. 20, no. 5, pp. 111-123, 2022. <https://doi.org/10.22678/JIC.2022.20.5.111>
- [44] K. S. Lee and S. A. Ahn, "Mediation effect of job satisfaction in the relationship between nurses' violence experience and turnover intention," *Journal of Digital Convergence*, vol. 18, no. 12, pp. 315-323, 2020. doi:10.14400/JDC.2020.18.12.315.
- [45] E. M. An and J. Y. Park, "Effects of head nurses' authentic leadership, job satisfaction and organizational commitment perceived by newly licenced nurses on turnover intention," *J Korean AcadNursAdm*, vol. 26, no. 4, pp. 428-437, 2020. <https://doi.org/10.11111/jkana.2020.26.4.428>.
- [46] J. -H. Yang and A. -S. Park. "Impact of emotional labor on the turnover intention of medical technology workers in general hospital". *International Journal of Advanced Nursing Education and Research*, vol.4, no.2, Aug. 2019, pp.13-18, doi:10.21742/IJANER.2019.4.2.03
- [47] J. -H. Jang, M. -S. Jun, G. -Y. Ko, E. -J. Soun, and Y. -S. Choi, "The influence of job satisfaction, workplace learning on nursing performance among clinical nurses." *International Journal of Advanced Nursing Education and Research*, vol.3, no.1, May. 2018, pp.13-18, doi:10.21742/IJANER.2018.3.1.03.
- [48] J. -H. Kwon and B. -S. Choi. "The effects of psychological well-being and academic efficacy on the self-leadership of nursing students ". *International Journal of Advanced Nursing Education and Research*, vol.5, no.1, Apr. 2020, pp.55-62, doi:10.21742/IJANER.2020.5.1.07