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How Communicative Leadership influences co-workers' health

- A Quality Management perspective

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Abstract

Purpose - The purpose of this paper is to describe leaders' views on how Communicative Leadership influences co-worker health by comparing their opinions with the health-related values within Quality Management.

Design/methodology/approach - A multinational manufacturing organization that has been working with Communicative Leadership for several years was investigated. 21 managers trained in Communicative Leadership were interviewed and asked about their views on how their communication influences both the well-being of their co-workers and the working environment. Various communication behaviors and communication methodologies emerged from the interviews and were then analyzed versus the health-related Quality Management dimensions.

Findings - The result shows concrete communication behavior and methodologies that influence co-worker well-being and the working environment positively and negatively. Another result is a description of the prerequisites for managers to be able to communicate in a way that influences co-worker well-being and the working environment. The analysis of the communication behaviors and communication methodologies versus the health-related Quality Management values shows that several of the health-related Quality Management dimensions were present.

Research limitations/implications – A limitation of this research is that it is just managers' view that has been investigated and analyzed.

Practical implications – Managers acting and behaving in accordance with the communicative behaviors and methodologies described in the results can influence co-worker health and the working environment in a positive way. The level of awareness of the prerequisites could help managers to influence co-worker well-being and create a good working environment.

Originality/value – The connection between Communicative Leadership and health-related Quality Management values is rarely made. This research can contribute to greater understanding in both areas.

Keywords Health-related Quality Management, co-worker health, Communicative Leadership, well-being, working environment.

Paper type Research paper.

1. Introduction

According to top management, the most important factor for organizational success is good communication skills (Barrett, 2006). A leader's communication behavior can enthuse co-workers with a sense of purpose, direction and identity (Miller and Monge, 1986, Fairhurst, 2001). Face-to-face communication, which is related to leaders' openness, listening skills and careful articulation of strategic messages, has been found to be important for co-worker awareness of strategic goals, (Berson and Avolio, 2004). Leadership communication is also important to ensure low levels of sickness absence, and in organizations where this is practised, a systematic leadership philosophy is probably implemented (Stoetzer et al., 2014). The concept of 'Communicative Leadership' is used in Swedish business and private organizations (Johansson, Miller, & Hamrin, 2014) and it relates to research findings on the kind of leadership communication which leads to higher levels of individual performance as a result of role clarity, co-worker commitment and engagement, (DeRue et al., 2011, Kozlowski and Bell, 2003, Morgenson et al., 2010). During the past decade, both public and private organizations have referred to the concept in the context of leaders who 'engage others in communication'. In the late 1990s, Communicative Leadership emerged in Sweden in response to a more complex and changing business environment according to Högström et al. (1999). It was also discussed in Norway, in the context of public institutions by Eriksen, (1997, p. 164), who commented that: "Communicative Leadership generally is characterized by greater openness and dialogue with the employees". Communication is put forward as the actual work of leaders, who every day spend about five to seven hours of their time communicating (Mintzberg, 1973; Tengblad, 2006), (Alvesson & Sveningsson, 2003). However, as Johansson, Miller and Hamrin (2014) emphasize, the concept carries a "quality" aspect, leaders who are communicative are not just communicating, which all organizational leaders and members do continuously, but they are perceived by their co-workers as being good at communicating. This assumption also means that communication competence can be

evaluated and developed (ibid). Bäckström et. al. (2014) found in a theoretical study a connection between the dimensions of health-related Quality Management and the key principles of Communicative Leadership. That theoretical analysis shows that six of eight key principles of Communicative Leadership match the underlying dimensions of health-related Quality Management which have been shown to improve health among co-workers (ibid). The Quality Management value 'Leadership Commitment' includes the underlying dimensions: Presence and Communication, Integrity, Empathy and Continuity (Lagrosen and Bäckström, 2005; Lagrosen et al., 2010). Further, the Quality Management value 'Participation of Everybody' was seen to include the underlying dimensions 'Development', 'Being Informed' and 'Influence' (ibid). These are also recognized methodologies, leadership behaviors, values and practices in successful organizations that have created a good workplace health environment, such as: excellence in leadership, good work environment, co-worker health and co-workership, along with improved profitability, (Bäckström, 2009). This is in line with Liu and Liu, (2014) who claim that Quality Management practices are essential for encouraging quality and efficiency and also for increasing co-worker well-being.

These relationships stress the importance of leaders' communication for the well-being and health of co-workers. Since Communicative Leadership seems to enhance the well-being of co-workers, it is interesting to investigate how leaders perceive that it actually influences co-worker health. Thus the purpose of this paper is to describe leaders' views on this issue by comparing their opinions with the health-related values within Quality Management.

2. Health-related Quality Management and its underlying dimensions

In Quality Management, all employees in the organization ought to participate in the quality work (Sila and Ebrahimpour, 2002; Bergman and Klefsjö, 2010) and co-worker participation

increases both organizational outcomes (Eriksson et al., 2003; Hendricks and Singhal, 1996) and health outcomes (Karasek and Theorell, 1990). Dolbier et al. (2001) have investigated the connection between Quality Management and employee health and found a relationship between psychologically insufficient working environments and a high frequency of sickness. This is in line with Vinberg, (2006) who found that a good working environment is related to improved workplace well-being and organizational performance. Co-workers are also more pleased with their work when they have awareness of the organization's goals and believe that they can affect them (Arnetz, 2002). Furthermore, Lindberg (2006), underlines that there would be substantial advantages for individuals, workplaces and society if the number of co-workers affected by physical and mental illnesses could be reduced. In addition, Bäckström, Larsson and Wiklund (2009) state that organizations that were working according to Quality Management had healthy co-workers and low levels of sickness absence.

The previously mentioned underlying dimensions of the health-related Quality Management value 'Leadership Commitment' are further described below and illustrated in Figure 1.
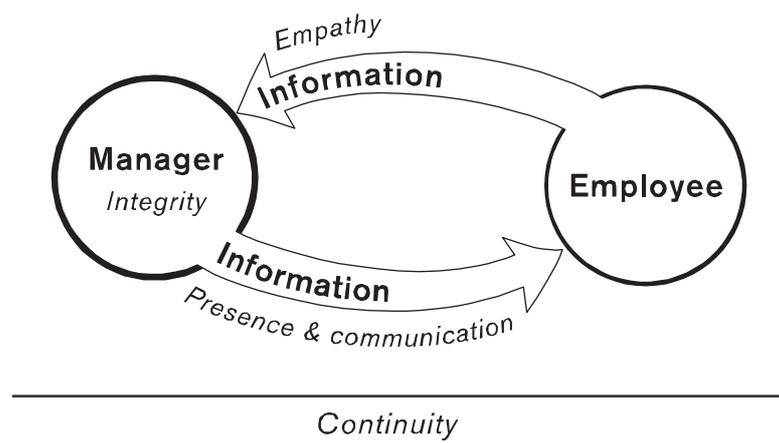

Figure 1. A model of the dimensions of 'Leadership Commitment' – the managers' perspective (Lagrosen et al., 2010).

'Presence and Communication' is the first dimension and it means that managers perform visible leadership and that this is also recognized and appreciated by their co-workers. It is important that managers are easily accessible and that it is very clear what they expect their co-workers to do. It is also vital, in this regard that managers and leaders have a clear and distinct way to communicate with their co-workers. 'Integrity', as the second dimension, deals with a manager's own integrity. She or he should possess qualities such as independence, trustfulness and fairness. Furthermore, acting as a role model and providing a good example in terms of attitude and motivation was seen as a vital ingredient in this dimension. In addition, the independence aspect includes the ability to learn from others, for instance their mentors. The third dimension, 'Empathy', implies that managers have to be aware of the needs of their co-workers, understand the co-workers' situation and acknowledge their contribution, including giving positive feedback when they have done a good job. Managers seeing and listening to their co-workers and taking part in annual co-worker development interviews are important parts of this dimension. A prerequisite for being successful with the dimension empathy is that a manager likes working with people and human relations. 'Continuity' means there should be continuity and balance in everything, including no regular changes of managers and co-workers, since building up mutual confidence can take quite a while to achieve. In addition, what is said in the development interviews cannot be ignored or forgotten if one wishes to achieve continuity and balance (ibid).

The three underlying dimensions of the health-related Quality Management value 'Participation of Everybody' are described here and illustrated in Figure 2.

In the underlying dimension 'Development', competence and personal development are included. 'Influence' means that it is important for co-workers to be able to influence their own work situation and that both minor and major questions are taken seriously and acted upon. The third and final dimension is 'Being Informed' and is specific about receiving enough information and about communication in general. It is central that managers communicate with all co-workers.

Figure 2. A model of the dimensions of 'Participation of Everybody'- the co-workers' perspective, (Lagrosen et al., 2010).

Recent research shows that all the underlying dimensions of the health-related value 'Leadership Commitment' correspond to the key principles of Communicative Leadership except for the underlying dimension 'Continuity' (Bäckström et. al 2014). All the underlying dimensions of the health-related value 'Participation of Everybody' correspond to the key principles of Communicative Leadership (ibid).

3. Communicative Leadership and key principles

In recent years, four central communicative behaviors of leaders: *structuring*, *facilitating*, *relating*, and *representing*; eight principles of communicative leadership, and a tentative definition of the concept have been presented (Johansson, et al., 2014). They define a communicative leader as someone "who engages employees in dialogue, actively shares and

seeks feedback, practices participative decision-making, and is perceived as open and involved." (ibid, p. 155)

The eight key principles of Communicative Leadership can guide the research on development of leaders' communication competence within organizations, (Johansson, et al., 2014). These principles are briefly described below:

1. Communicative leaders coach and enable employees to be self-managing.

2. Communicative leaders provide structures that facilitate the work.

3. Communicative leaders set clear expectations.

4. Communicative leaders are approachable, respectful, and express concern for employees.

5. Communicative leaders actively engage in problem solving, follow up on feedback, and advocate for the unit.

6. Communicative leaders convey direction and assist others in achieving their goals.

7. Communicative leaders actively engage in the framing of messages and events

8. Communicative leaders enable and support sensemaking. (Johansson, et al., 2014).

The eight key principles of Communicative Leadership correspond with most of the underlying dimensions of the health-related Quality Management values; 'Leadership Commitment' and 'Participation of Everybody', thus it was concluded that working in accordance to the key principles of Communicative Leadership stimulates co-worker well-being (Bäckström et. al. 2014).

4. Communicative Leadership in a Quality Management perspective

Structuring, facilitating, relating, and representing, all of which have been pointed out as essential communicative behaviors of leaders by Johansson, et al. (2014), are also mentioned in different areas. For instance Wreder, (2008) found communication, relation building,

delegation and coaching as critical leader accomplishments when she investigated organizations working successfully with Quality Management who had created a good working environment. According to Bergman and Klefsjö (2003), the Quality Management value 'Participation of Everybody' is accomplished with methodologies based on communication, delegation, and training. The European Foundation for Quality Management (EFQM) do not explicit mention communication or the essential communication behaviors in their criteria of the quality award model but assert that excellent organizations *'have leaders who shape the future and make it happen, acting as role models for its values and ethics' (EFQM).* That description of leader behaviors can be considered to have some relevance to the definition of a communicative leader who "*engages employees in dialogue, actively shares and seeks feedback, practices participative decision making, and is perceived as open and involved." (*Johansson, et al., 2014 p.p. 155). When considering the health and job satisfaction of employees, a good leader: shows respect towards employees; initiates structure when required – especially in stressful situations; allows employees to supervise their working environment and makes empowerment structures accessible and creates the possibility for participation, independence, and control; inspires employees to see a higher meaning in their work; offers intellectual stimulation (Nyberg et al. (2005)). When seeing Communicative Leadership from a Quality Management perspective, the communication within leadership seems to be vital but is not always mentioned explicitly but in relation to co-worker health communication seems to be mentioned more distinctly.

5. Co-worker health, well-being and working environment

According to The World Health Organization (WHO): "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity" (WHO constitution). Health can also be described as a mixture of self-assessed health, the lack of chronic conditions and absence of subjective illnesses, (Mackenbach et al., 1994). According

to Arnetz (2002), leaders have the possibility to influence how co-workers view and experience effectiveness within their organizations. He suggests that co-workers who work in efficient organizations tend to be more pleased (ibid). Dolbier et al., (2001) and argues that there is a relation between a psychologically unsatisfactory working environment and a high frequency of sickness absence among co-workers. Work conditions with little possibility for self-management, concerning one's own work, and repetitive or non-qualified work tasks are related to a low level of psychological well-being and a high level of physical health problems (Karasek and Theorell, 1990). Managers themselves define health as; having a sense of physical and mental well-being, (pp. 421, Lundqvist et al., 2012). Recent research confirms that Quality Management practices can not only help co-workers to increase their sense of togetherness and happiness but also decrease their work stress and work overload, thus QM is related to co-worker well-being in a positive way (Liu and Liu, 2014). We can establish that there is a close relation between co-worker health, well-being and working environment and in this research we have asked about these in order to investigate the influence of Communicative Leadership on co-worker health.

6. Methodology and case description

The research started with a literature review within the research area of Communicative Leadership and health-related Quality Management values. To investigate how leaders' communication influences the well-being of co-workers and the working environment, an empirical study using qualitative interviews was preferable. A complete investigation of the question would be to ask both managers and co-workers. A multinational manufacturing company that has been working with Communicative Leadership for several years was selected as it could contribute knowledge that was useful to other organizations. The company has its headquarters in Sweden and operations and sales offices all over the world.

As it was not possible to interview both co-workers and managers, 21 managers located in Sweden were interviewed and asked about their views. The leaders in this company have had training in Communicative Leadership as a part of a leadership program, and were considered to have good knowledge for answering the questions. The interview questions were about their view of how managers' communication influences the well-being of co-workers and the working environment. These questions were put together to give insight on co-worker health. The questions were part of a bigger interview guide investigating communicative leadership from different perspectives and the questions asked and analyzed in this article were:

- Can your way of communicating affect your co-workers well-being? If so, in what way? Please describe an occasion where you have observed that communication has affected your co-workers in a positive or negative way.
- Can your way of communicating affect the working environment at your department? If so, in what way? Please describe an occasion where you have observed that communication has affected the working environment in a positive or negative way.

The interviews were taped and transcribed verbatim. They were read by the research team members separately and all methodologies and behaviors found were underlined. In a discussion, these were then written down on post-it notes. Each methodology and behavior was only written once, even if more than one manager had mentioned it. These post-it notes were then organized and categorized into behaviors and methodologies that were perceived by the leaders to influence co-worker health positively or negatively. When analyzing the results, the researchers also identified a new category: personality prerequisites. It was not possible to categorize some of the answers from the managers into behaviors and methodologies, instead the answers were found to be prerequisites for being able to communicate in order to influence co-worker well-being and the working environment.

The communication methodologies and communication behaviors, which were found to influence co-worker well-being and the working environment in a positive way, were then analyzed versus the seven dimensions of health related Quality Management values in order to categorize them. The purpose of the categorization was to see if all dimensions of health-related Quality Management were represented in the communication methodologies and communication behaviors.

7. Results

5.1 How the managers' communication influences the well-being of the co-workers

The analysis shows that there are prerequisites for managers to be able to communicate in a way that influences co-worker well-being. There are also behaviors and methodologies that influence co-worker well-being positively and others that influence it negatively. The prerequisites, the behaviors and the methodologies are presented in Table 1.

5.2 How managers' communication influences the working environment

The analysis shows that there are prerequisites for managers to be able to communicate in a way that influences the working environment. There are also behaviors and methodologies that influence the working environment positively and others that influence it negatively. The prerequisites, the behaviors and the methodologies are presented in Table 2.

5.3 Managers' view of how communication influences co-worker well-being versus health-related values within Quality Management

The managers' views of how communication influences co-worker well-being positively were analyzed versus the health-related values within Quality Management. The behaviors and methodologies from the managers' point of view versus the health-related value 'Leadership Commitment' are presented in Table 3.

Leaders' communication behaviors and communication methodologies that influence co-worker well-being in a positive way match the health-related dimension 'Empathy' and the dimension 'Presence and Communication' to a great extent. None of the leaders' communication behaviors and communication methodologies matched the dimension 'Continuity'. The dimension 'Integrity' matched with a few behaviors and methodologies.

The behaviors and methodologies from the managers' point of view versus the health-related value 'Participation of Everybody' are presented in Table 4.

Leaders' communication behaviors and communication methodologies that influence co-worker well-being in a positive way match the health-related dimension 'Being Informed' to some extent. One behavior matched the dimension 'Influence' but none matched the dimension 'Development'.

5.4 Managers' view of how communication influences the working environment versus health-related values within Quality Management

Leaders' communication behaviors and communication methodologies that influence the working environment in a positive way match the health-related dimension 'Empathy' to some extent. None of the leaders' communication behaviors and communication methodologies matched the dimension 'Continuity'. The dimension 'Presence and Communication' matched with two behaviors and methodologies and the dimension 'Integrity' with only one.

The managers' view of how communication behaviors and communication methodologies influence the working environment matches the health-related QM value 'Participation of Everybody' to some extent through the dimensions 'Influence' and 'Being Informed'.

8. Conclusion and discussion

The analyses from the interviews show that there are prerequisites for being able to communicate in order to influence co-worker well-being and the working environment. According to the interviewed managers, the *prerequisites* for being able to communicate in a way that influences the well-being of co-workers are:

- That the managers feel good themselves or, if this is not the case, do not let that affect the way they communicate.

- That the managers have training in how to communicate e.g. when it comes to "difficult conversations".

- That the managers themselves believe in the message they are communicating.

The *prerequisite* for being able to communicate in a way that influences the working environment are:

- That the manager is secure in her or himself and is humble

The prerequisites regarding how the managers feel themselves is supported by Lundqvist, et al., (2012) who showed that managers who did not feel well did not provide their co-workers with enough support and guidance, suggesting that "managers´ health, through their leadership, has profound consequences at the workplace". Raising the level of awareness of these prerequisites could help managers to be able to influence co-worker well-being and create a good working environment.

An expanded analysis shows that some of the behaviors and methodologies that influence co-worker well-being and influence the working environment in a positive way have some similarities. See Table 1 and Table 2. These are for example:

Influence co-worker well being	Influence the working environment
"Give and take feedback" "Give co-workers positive feedback"	*"Give constructive feedback and do not name and shame anybody"*
"Motivate decisions taken"	*"Explain why certain rules exist, not only that they should be followed"*
"Personal dialogue with co-workers"	*"Dialogue is important for creating commitment"*
"The managers are open-minded and honest"	*"That the manager is honest and does not promise too much"*

Thus, it can be concluded that these behaviors are important when managers want to influence both co-worker well-being and the working environment positively.

The behaviors and methodologies that influence co-worker well-being and the working environment negatively have much in common, such as, for example, 'Give orders', see Table 1 and 2. These behaviors and methodologies should thus be avoided by the managers.

Leaders and managers in organization can assimilate the results and try to behave in accordance to them when striving to create co-worker well-being and a good working environment. The results can also be used practically in policies for hiring or developing leaders in an organization. Communication, HR and Quality Management departments can consider the results when planning leadership programs. Most of the dimensions from the health-related Quality Management value 'Leadership Commitment' were represented when they were analyzed versus the communication behaviors and communication methodologies. Two of three dimensions from the health-related Quality Management value 'Participation of

Everybody' were represented when they were analyzed versus the communication behaviors and communication methodologies. It can hence be concluded that Communicative Leadership influences co-worker well-being and the working environment to a great extent as it matches the health-related QM dimensions; 'Presence and Communication', 'Integrity', 'Empathy', Influence' and 'Being informed'. This means that if managers are acting and behaving in accordance with the communicative behaviors and communicative methodologies described in the tables above, they can influence co-worker health and the working environment in a positive way. If Communicative Leadership is then complemented with the health-related QM dimensions 'Development' and 'Continuity', managers are working in accordance with the health-related QM values 'Leadership Commitment' and 'Participation of Everybody'.

Communicative Leadership seems not to support the health-related QM dimension 'Development' in this context. Stoetzer et al. (2014) found six relevant factors in organizations with low levels of sickness absence, one of these was employee development which strengthens the assumption for the importance of complementing Communicative Leadership with that dimension. A limitation of this investigation is that it is just the managers' views that have been investigated and analyzed. For a more comprehensive picture, the views of co-workers are also important, in that case maybe the dimension 'Development' would be visible. An interesting area for future research is to interview co-workers and ask how managers' communication influences co-worker well-being and influences the working environment and then compare the results with those in this study. That could also be done as a quantified study by e.g. a questionnaire; measuring the occurrence of the Key Principles of Communicative Leadership and its correlation with Health related Quality Management values.

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Tables

Table 1 Managers' prerequisites, behavior and methodologies that influence the co-workers' well-being.

Managers´ view of how their communication influences the co-worker well-being				
Prerequisites				
That the managers feel good themselves or, if not, doesn't let that effect the co-workers	That the managers have education in how you communicate e.g. when it comes to "difficult conversations"	That the managers believe in the message themselves		
Behaviors and methodologies which influence positively				
Talk directly to the person it concerns	Give and take feedback	Personal dialogue with co-workers	Address specific problems personally and then discuss more general in the whole group	Being transparent down through the organization when it comes to information
Give co-workers positive feedback	Focus on the positive things during e.g. changes	Gather everybody and ask how they feel, what they think and what they want.	Deal with conflicts at once	Follow up and ask for results
Deal with things directly e.g. disputes	Motivate decisions taken	Keeping short informal meetings to tell in their own words what the manager knows	That the managers are straightforward and clear in their communication	That the managers are open-minded and honest
Behaviors and methodologies which influence negatively				
Only hearing negative things & never something good affects how people feel negatively	Negative feedback in the group affects the openness "it become silent"	Negative if the manager does not take the time "and just gives orders"		

Table 2 Managers' prerequisites, behaviors and methodologies that influence the working environment.

Manager´s view of how the manager´s communication effects the working environment			
Prerequisites			
That the manager is secure & humble			
Behaviors and methodologies which influence positively			
Discuss and come up with ideas	See all individuals and care on a personal level	Allowing the co-workers to make their voices heard and give their views on "things"	Understand the co-workers´ conditions and plans how the manager communicates e.g. demands
Explain why certain rules exist, not only that they should be followed	The dialogue is important for creating commitment	Give constructive feedback and do not "name and shame" anybody	That the manager is honest and does not promise too much
Behaviors and methodologies which influence negatively			
Communicate individually in a change, not to the whole group, it created uneasiness and "talk"	Give orders		

Table 3 The result of the analysis of the behaviors and methodologies from the managers' point of view versus the health-related QM value 'Leadership Commitment'.

		Behaviors and methodologies which influence well-being positively			
Underlying dimensions of the Health-related Quality Management value 'Leadership Commitment'	*Presence and Communication*	Talk directly to the person concerned	Give co-workers positive feedback	Give and take feedback	Follow up and ask for results
		Motivate decisions taken	Holding short informal meetings to tell in their own words what the manager knows	That the managers are straightforward and clear in their communication	
	Integrity	Being transparent down through the organization when it comes to information	That the managers are open-minded and honest		
	Empathy	Talk directly to the person concerned	Gather everybody and ask how they feel, what they think and what they want.	Deal with conflicts at once	Deal with things directly e.g. disputes
		Give and take feedback	Personal dialogue with co-workers	Give co-workers positive feedback	
	Continuity				

Table 4 The analysis of the behaviors and methodologies from the managers' point of view versus the health-related value 'Participation of Everybody'.

		Behaviors and methodologies which influence well-being positively		
Underlying dimensions of the Health-related Quality Management value' 'Participation of Everybody'	*Being informed*	Talk directly to the person concerned	Gather everybody and ask how they feel, what they think and what they want.	Personal dialogue with co-workers
	Influence	Give and take feedback		
	Development			

Table 5 The result of the analysis of the behaviors and methodologies from the manager' point of view versus the health-related QM value 'Leadership Commitment'.

		Behaviors and methodologies which influence the working environment positively			
Underlying dimensions of the Health-related Quality Management value 'Leadership commitment'	*Presence and Communication*	Explain why certain rules exists, not only that they should be followed	Give constructive feedback and do not "name and shame" anybody		
	Integrity	That the manager is honest and does not promise too much			
	Empathy	See all individuals and care on a personal level	Allowing the co-workers to make their voices heard and give their views on "things"	Understand the co-workers conditions and plan how the manager communicates e.g. demands	The dialogue is important for creating commitment
	Continuity				

Table 6 The result of the analysis of the behaviors and methodologies from the managers' point of view versus the health-related QM value 'Participation of everybody'.

		Behaviors and methodologies which influence the working environment positively	
Underlying dimensions of the Health-related Quality Management value 'Participation of Everybody'	*Development*		
	Influence	Discuss and come up with ideas	Allowing the co-workers to make their voices heard and give their views on "things"
	Being informed	Understand the co-workers' conditions and plan how the managers communicates e.g. demands	Dialogue is important for creating commitment