

CE Directed Reading

This article is a Directed Reading. To earn continuing education credit for this article, see the instructions on Page 618.

After completing this article, the reader should be able to:

- Define the concepts of leadership, followership, and servanthip.
- Describe the importance of compassion, empathy, and altruism in patient care.
- Explain the ongoing need to evaluate one's leadership and followership in the workplace.
- Discuss the varying leadership and service roles of the radiologic science professional.
- Explain how health care professionals' servanthip can enhance patient care.

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he primary role of all health care workers is that of patient servant. In health

care, being a patient servant requires compassion for the patient, and many professionals personally aspire to have empathy and altruism in all patient encounters. As followers, health care workers might be free to choose which leader they desire to follow and a level of commitment they will provide to the leader and the organization. Lastly, health care workers, including medical imaging technologists, can be in leadership roles within an organization, and workers should study leadership concepts routinely to prepare for these roles.

Service and Leadership

A given individual's choice to enter a helping profession is the foundation for patient care. Studies have reported that nurses provided the following reasons for their career choice¹:

- Caring for people.
- Rewarding work.
- Possible career advancement.
- Family history of working in health care.
- Career security.
- Socialization.
- Job satisfaction.
- Interest in the human body and medicine.

An Australian study of nearly 800 nurses and nursing students identified the top 5 reasons for entering the nursing profession as it being an interesting job, an opportunity for caring for others, working with people, the perception that nursing was a calling, and a sense of giving to the community.¹ Although health care workers choose to work in a field in which they take care of others for various reasons, providing honest patient care has been long established as a primary motivation. The health care culture typically stresses that medical professionals place the needs of their patients and society above all other considerations.² Servanthip, also called servanthood, relates to how health care practitioners serve the needs of patients and the

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Radiologic technologists often perform diverse roles throughout the workday, and they should have at least a minimal understanding of the responsibility and effects of these roles on the patient and organization. Although technologists can practice independently or as part of a work group, individuals should be prepared to improve patient care and to function as a servant, follower, and leader for the overall success of the organization. This article examines those roles, emphasizing servanthip.

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satisfaction refers to the pleasure and gratitude an individual feels when providing the best patient care one can offer.⁴ As a result, the compassionate caregiver feels a sense of personal benefit when generously contributing to a positive change in patient care or outcomes.⁵ Compassion satisfaction benefits the patient as well and leads to gaining and sustaining patient trust when health care professionals exhibit excellence, altruism, skillfulness, and accountability.⁶ An ancient Native American teaching maintains that “each time you heal someone, you give away a piece of yourself until, at some point you will require healing.”⁷ Working with individuals in pain and distress is a component of most caring professions, but continual exposure to the suffering of others has a cost: compassion fatigue. Compassion fatigue, often referred to as the cost of caring, is the combination of burnout and secondary traumatic stress.^{4,7} Burnout is a prolonged response to chronic job-related emotional and interpersonal stressors characterized by emotional exhaustion, depersonalization, and a feeling of decreased personal accomplishment. Secondary traumatic stress relates to working with people whose illness or pain is uncontrollable, thus leading to a sense of powerlessness.^{4,8} Eventually, compassion fatigue can lead to disillusionment, which has been identified as a primary reason why nurses choose to leave health care.⁹ Unhappiness at work leads to increased turnover, absenteeism, safety risks, and poor judgment, all of which negatively impact the community (see Box 1). Helping professions, such as those in patient care, offer a fitting environment for individuals who are inclined to serve others. For the radiologic technologist, serving the needs of patients should not be viewed simply as a job requirement, but as the norm, and as a genuine opportunity to make a distinctive difference. Imaging technologists play a unique role in patient care. Whereas a nurse might spend an entire shift (often as many as 12 hours in critical care units) with a few patients, an imaging technologist might spend 10 minutes or less performing a single diagnostic examination. However, limited time should not keep imaging professionals from providing the patient with individualized care, and the time spent serving patients is amply rewarded. Servantship is based on acts of compassion, empathy, and altruism, with altruism being the ultimate goal (see Figure). Compassion, Empathy, and Altruism in Health Care The compassionate nature required of health care professionals is associated with benefits and risks. Compassion is described as a virtue that causes an individual to consider seriously another person’s reality, inner self, emotions, and external circumstances.³ William J Bennett stated that courage allows a person to stand by others in challenging situations, but compassion causes a person to stand with others who are in painful situations.³ Freely exhibiting compassion often results in what has been called compassion satisfaction. Compassion Box 1

Essentials of Servantship in Health Care

Smile.

Ensure patient dignity.

Respond to patient needs appropriately.

Value the uniqueness of the patient (eg, age, race, gender, emotional state).

Advocate patient rights and safety.

Never demonstrate disrespect towards the patient.

Thank the patient.

Serve the patient with compassion.

Help others serve the patient.

Identify patient mistreatment and demand improvement.

Portray professionalism.

Altruism

(only for others)

Empathy

(connecting with others)

Compassion

(considering others)

Figure. *Patient care model where altruistic patient care is the ultimate goal. Image courtesy of the author.*

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patients ultimately leads to the personal benefits of compassion satisfaction, personal growth, self-actualization, and the potential to exhibit empathy.¹⁰ Unfortunately, studies have shown that empathy in the United States is on the decline. According to Anderson and Konrath, empathy in college students was 40% lower in 2011 compared with 20 or 30 years prior. This included a 48% drop in empathic concern, which is the tendency to possess concern for others' emotions.¹¹ The authors stated hypothetical societal causes of decreased empathy such as:

- An increase in reality television shows, which center on narcissistic main characters.
- The rise of social media.
- A focus of primary education on self-esteem vs encouraging the cultivation of empathy.

According to the authors, this is why the millennial generation has been referred to as "Generation Me."¹¹ Empathy is enhanced compassion. It can be defined as an ability to recognize and feel or share the emotions and feelings of others with a minimal distinction placed on the difference between self and others.⁸ Empathy often is confused with sympathy, which is concern for others.⁸ Although sympathy demonstrates care for another's situation, empathy is characterized by sharing the perspective of feelings regarding the circumstances of another. Furthermore, empathy is the capacity to be affected by and share the emotional state of another person, while assessing the reasons behind the other person's emotional state by identifying and adopting the person's perspective.¹² Most people have the capacity for empathy and the concept can be seen in nature and early in human life. In nature, mobbing demonstrates empathy. Mobbing is an instinctive antipredator behavior that occurs when a creature from an established colony warns the colony or attacks a predator to save others within the group. Infants as young as 12 months have shown the capacity to comfort victims of distress, while by age 18 months, they can display spontaneous helping behaviors.⁸ In patient care, empathy is a step above compassion because empathy demands that caregivers put themselves in the patient's situation, and that they recognize that the caregiver could be in a similar state of ill health a patient faces. affect patient care.⁴ Physical manifestations of compassion fatigue have been demonstrated and include gastrointestinal issues, headaches, physical exhaustion, insomnia, and substance abuse.⁷ Burnout has been shown to hinder patient care if the affected professional begins to treat patients in an uncaring manner.⁸ According to Aycock and Boyle, health care workers who are most at risk for compassion fatigue are those who bring high expectations to a job, are aged 30 years or younger, and are unmarried or lack an intimate partner.⁸ Slocum-Gori et al demonstrated that compassion satisfaction provides an effective counterbalance to the risks of compassion fatigue. A negative correlation has been established between compassion satisfaction and compassion fatigue and burnout.⁵ An individual can accomplish compassion satisfaction by acknowledging the symptoms of compassion fatigue. Compassion fatigue can be overcome by focusing on others instead of oneself and through activities that help reinvigorate the passion for caring for others that once was felt.⁴ Stress management and relaxation techniques, exercise, rest, a healthy diet, forgiveness, and taking care of oneself all work to increase compassion satisfaction and battle compassion fatigue.⁷ An individual who regularly can balance the concern of self and others often is called a mature carer or mature caregiver.¹⁰ These individuals can maintain a healthy emotional balance, showing compassion toward others while maintaining a professional distance. The self-awareness and self-confidence of mature caregivers strengthens their ability to care.¹⁰ By contrast, caregivers distraught with compassion fatigue appear to create a protective yet invisible emotional barrier between the caregiver and the patient. As the caregiver begins to unintentionally build up a defensive emotional fortification, compassion begins to erode. Establishing an emotional barrier between caregiver and patients can support self-preserving efforts. The analogy of building a barrier resembling a window vs a wall demonstrates how best to handle emotional barriers. A window provides the opening for compassionate care while simultaneously providing an emotional barrier to maintain a professional distance. The caregiver can continue to see the patient's pain and point of view through the metaphorical window to provide compassionate care. Honest compassion for

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altruism in patient care focuses less on the monetary rewards, professional recognition, or even patient appreciation, but is purely for the sake of the other, or patient.¹⁰ Servantship Within the Code of Ethics Examples of servantship can be found in the Standards of Ethics established by the American Registry of Radiologic Technologists (ARRT). Within the standards is a code of ethics, which the ARRT says can guide radiologic technology professionals in how they “evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues, and other members of the healthcare team.”¹⁵ The code of ethics is considered aspirational, or conduct that radiologic professionals should constantly strive to meet.¹⁵ Several key points within the code of ethics relate to servantship. The ARRT’s first ethical code states that professionals should respond to patient needs and offer support for other team members.¹⁵ Responding to the needs of the patient requires a considerate approach from the health care professional and continual mindfulness of the changing health needs of each patient. In this regard, imaging professionals must serve others by being completely available and accountable to patients. Accountability is the willingness to accept responsibility for and the consequences of one’s actions.¹⁶ Dealing with the various and changing needs of each patient requires radiologic technologists to appreciate the dynamic environment in which they are engaged. Those interested in enhancing servantship should strive to augment existing knowledge in their fields of expertise beyond the minimal requirements imposed by certification organizations. Lifelong learning directly benefits the patient and the technologist. The support role of the imaging technologist encourages teamwork and all health professionals should share in the concern for the patient, working together for the patient’s benefit. The ARRT’s second ethical code articulates that the imaging technologist should strive “to provide services to humanity with full respect for the dignity of mankind.”¹⁵ Every individual has dignity, which can be fragile and easily bruised.¹⁷ Wounding a patient’s dignity erodes trust, making serving the patient more difficult.¹⁷ As the technologist demonstrates respect At the core of patient care is the ancient maxim of treating others as one would like to be treated—often referred to as “the golden rule.” Yet health care professionals can face decreased empathy, emotional burnout, and reduced altruistic motivation, resulting in less productive and effective patient care.¹² Like compassion fatigue, a caregiving individual must recognize and address decreased empathy. Empathy is much like a muscle that can atrophy but regrow and regenerate if an individual chooses to focus on others instead of self.¹¹ Focusing more on the needs of others typically results in an increase in personal and professional satisfaction.⁴ The empathy-altruism hypothesis claims that empathy directed toward improving another person’s welfare evokes altruistic behavior.¹² Altruism, rooted in the French word *autrui*, meaning “other people,” is a human quality synonymous with selflessness, taking others’ perspectives, and showing concern for others for the sake of the other people rather than for oneself.^{10,13} The opposite of altruism is egoism. Egoism includes social reward-seeking behavior and punishment avoidance.¹² Narcissism can be considered an extreme form of egoism. Narcissists have high emotional aptitude in that they can identify the emotions of others, but rather than aligning themselves with the other person’s emotions and feeling empathetic, narcissists use the other person’s emotions for personal gain or to manipulate.¹¹ These self-serving individuals tend to prey upon the perceived weaknesses of others. According to some authors, an entire generation of individuals once served the United States and the world in a manner that might never be matched. For example, in his book *The Greatest Generation*, Tom Brokaw describes the story of the servant-minded Chuck Van Gorder, MD. Gorder, who was a World War II field surgeon, returned to America after the war to continue offering his medical expertise in a small community. In the early days of his struggling medical practice, Gorder accepted garden vegetables or wild game as payment for the care he provided to the less fortunate patients in his community.⁷ Gorder stated that in the past, “medicine was more altruistic.”⁷ An altruistic individual is someone who is a servant intrinsically.¹⁴ True altruistic care is ideal in that the act is unconditional, spontaneous, and selfless.¹⁰ Possessing

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supports the leader while simultaneously meeting the mission of the organization and the professional directives or standards of ethics placed upon the individual by the profession. The imaging technologist is an example of a frontline follower in health care. Followers perform the fundamental, yet vital, functions that involve commitment to the leadership of the organization, while simultaneously satisfying customer needs. As a result, everyone in the health care workplace could be described as a follower, even the chief executive officer, who typically reports to a board of directors. Some might perceive followers as those individuals within an organization who lack power, authority, or influence, but who are led from 1 task to another by a leader.¹⁹ Further, society's view of leadership means that followership positions might be considered ancillary to accomplishing an organization's overall mission.²⁰ But a leader with a group of helpful, competent followers can accomplish a great deal, while a leader with a dysfunctional group of followers will struggle and likely fail. The most valuable followers are said to be skilled, self-directed individuals who invest time and energy in the work group and who use critical thinking effectively.⁴ The courageous follower model suggests that effective followers share and assume responsibility for a common purpose with their leaders, support the leader, constructively challenge the leader, participate in transformational needs required to fulfill the leader's mission and organization, and take a moral stand when warranted (see Box 2).²¹ For a patient's dignity, a reciprocated respect is created between the caregiver and patient, resulting in mutual trust and a commitment to the common aim of appropriate diagnosis and recovery.¹⁰ Patients who have high trust in their caregivers tend to have better quality of care and outcomes.¹⁸ This person-oriented approach to professionalism compels a technologist to invest himself or herself in patient interactions and to commit to doing the best possible job for the person in need.¹⁰ In the third and fifth codes, the ARRT states that the technologist should deliver "patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of sex, race, creed, religion, or socio-economic status."¹⁵ Truthful servanthip regards all patients as equals, regardless of whether the patient reciprocates the sentiment. Many patients have underlying emotional needs that are not evident at the time of the first encounter. Although some patients exhibit rudeness or disrespect, technologists should always act "in the best interest of the patient," particularly when the reasons for the patient's behavior can be unknown or beyond health care professionals' understanding.¹⁵ In the eighth ethical code, the technologist is encouraged to practice "ethical conduct appropriate to the profession" and protect "the patient's right to quality radiologic technology care."¹⁵ The rules of ethics, which are mandatory standards of professional conduct, also are found in the ARRT's Standards of Ethics. These rules help ensure the competence of the technologist as well as patient protection, safety, and comfort.¹⁵ Technologists who aspire to practice honest service follow these rules and ensure that others follow the rules as well.

Followership

Business literature is replete with research on leadership and models or suggestions for leaders. By comparison, followership research appears to be lacking. However, followership is a vital component of overall leadership effectiveness because leaders need followers in order to lead. Although many radiologic technologists serve as leaders at some point in their careers, the overwhelming majority of a radiologic technologist's time is spent as a follower.^{4,19} In the clinical setting, followership relates to how the follower

Courageous Follower Model²¹

The follower should have the courage to:

- Support the leader and do everything possible to contribute to the leader's success.
- Assume responsibility for the common purpose and act independently.
- Challenge constructively the leader or group's behaviors or policies if these threaten the common purpose.
- Participate in any transformation needed to improve the leader-follower relationship and the organization's performance.
- Take a moral stand when warranted to prevent ethical abuses or, at the very least, to refuse to participate in them.

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In almost every situation, followers outnumber leaders. Consequently, it is clear that a group of inharmonious followers can disrupt the productivity of an organization, ultimately negating the overall effectiveness of the leader and the organization. Therefore, although followers do not have to be eternally happy, they need their leaders to provide a clear vision, perhaps with an explanation of collective goals. Failing to provide the connections and direction needed to maintain follower engagement could be the difference between effective and ineffective leadership. Thus, for the leader to be effective, the leader and follower must view their shared fundamental mission similarly. In effect, it is easier for a follower to develop a secure pattern of attachment to a leader when the leader and follower share a strong degree of synergy in values, goals, work, and communication styles.²³ Followership requires a personal commitment to contribute within a collaborative environment.²⁴ Being a team player with personal accountability is crucial for the follower to excel. Birds demonstrate teamwork in nature when they fly in the “V” formation. The lead bird works the hardest, helping the entire group benefit from the aerodynamics of the formation. However, birds instinctively appreciate the need to cooperate and share the lead position in a group for the benefit of all, so they rotate positions throughout their migratory flights. Like birds, followers should occasionally rise to a casual leadership position when needed for the betterment of the group. Serving as an efficient follower and a valued employee also is linked (see Box 3). Employers want to hire individuals who consistently²⁸:

- Demonstrate honesty and integrity.
- Have positive attitudes.
- Are reliable, professional, and intrinsically motivated.
- Convey cheerfulness and friendliness in the workplace.

Choosing to be an efficient follower can improve leadership potential and place the follower in a position that might improve his or her opportunity to advance within the organization.

Leadership

The word leader originates from the word *leden*, which means to travel or to show the way.²⁷ The idea of Examples of followership styles and types range from the follower offering the leader diminutive support and challenge just to maintain employment, to high support and challenge in which the follower serves more as a partner with the leader than an employee to accomplish shared goals and uphold the overarching mission of the organization (see Table 1).²¹ Followership types also relate to the view from the leadership position. According to Thomas, the most effective or valuable followers tend to be those who are talented critical thinkers.²² These individuals do not have to be told what to do and often practice informal leadership.²² Bureaucratic followers, commonly referred to as “brown nosers,” are conformists who follow the rules but lack leadership and critical thinking skills.²² Slackers are followers who do the minimum required or less than the minimum. Criticizers are followers who are disgruntled, pessimistic, and who work to manipulate the work environment negatively by using petty tactics of disruption. Leaders must thus appreciate the fact that if followership styles and types are perceptible, then followers should not be viewed simply by the leader as perfunctory subordinates, but rather as individuals with the freedom to choose which leader they want to help be successful.²² Equally, it also is evident that followers can choose which leader to undermine. Both must share in the recognition and remediation of work troubles, as the dysfunction of a follower is not always the sole fault of the follower, but it could be a symptom of ineffectual leadership.

Table 1

Followership Styles¹

Style	Explanation
Resourceful	Will do enough to retain position but no more. Individualistic
Will	Will speak up when others are silent, but voice is marginalized because it is too chronically contrarian.
Implementer	Will do whatever the leader wants them to do regardless of the consequences. They tend to not challenge the leader's authority.
Partner	Assumes full responsibility for their own actions and leader's behavior and acts accordingly.

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leaders' charge, or followers, in a desired manner to achieve specific goals. That is, leaders know what they need from followers, and effective leaders know how to get the desired results. This fundamental description of leadership acknowledges that leadership exists in all aspects of life—at home, work, and even in associations with strangers. If everyone has some leadership skills required and used in daily practice, then it stands to reason that everyone has some degree of leadership potential. However, on observation, it also is clear that some people are more likely to excel as leaders than are others.³⁵ One must accept that although leadership can be learned, and that most people have evident or dormant skills that must be honed, leadership manifests more naturally in some individuals.³⁶ Further, although some leadership skills are innate, most appear to be learned over the course of life experiences.¹⁸ Great acts of leadership exist throughout history. On April 15, 1912, as the Titanic began to sink and people fought for survival, 8 musicians played a solemn harmony as they stood on the deck of the plummeting leadership dates to Plato's time (427 to 347 bc).²⁶ Plato recognized 3 leadership concepts or laws in his early work *The Republic*; these are the rules of reason, desire, and spirit.²⁹ Since Plato, many others have sought to define leadership and to consequently acknowledge the need to study leadership as a component of essential human existence. The term leader was noted as early as the 13th century, but the term leadership was not used until the 17th century.³⁰ The organized study of leadership is essentially a novel endeavor, with the true scientific research beginning early in the 20th century.³⁰ Subsequently, much has been written about leadership and the construction of numerous definitions and theories, including the study of traits, qualities, and behaviors of effective leaders as they encourage others to participate, grow, and commit to an organization (see Table 2).³⁰ Leadership has been characterized broadly as the ability to influence others to accomplish a specific goal.³³ When one seeks to influence the thoughts, behaviors, or development of others, he or she is adopting the role of a leader.³³ Leadership is a process that requires a group context and the aim to reach a defined goal.²⁹ According to Fioravante, leadership consists of 2 fundamental functions: offering a clear vision and the ability to incentivize others to follow.³⁴ Consequently, effective leaders influence those who are under the Box 3

Qualities of an Efficient Follower²⁵

- Aligns personal goals with those of the organization and commits to achieving those shared goals.
- Recognizes connections between own work and the broader mission of the organization.
- Competent at completing a job.
- Seeks opportunities to advance skills without being told to do so.
- Can self-manage and self-assess.
- Uses critical thinking effectively.
- Appreciates and respects the leader.
- Is compliant, but unafraid to offer a different viewpoint from the leader respectfully, along with suggestions.
- Interacts constructively with the leader and others in the workplace.
- Leads by example.

Table 2

Overview of Historical Leadership Theories^{1,3}

Leadership Theory	Time of Study	Explanation	Trait
Early 20th century	Sought to define effective leaders by analyzing shared personality traits or qualities.	Behaviorist	Late 1940s
Concentrated on leader actions vs personal qualities.	Contingency	1960s	Refined version of situational leadership emphasizing that situation best predicts appropriate leadership style.
Transactional	1980s to present	Focuses on the contractual leader-follower relationship and the mutual benefits derived.	Transformational
1980s to present	Focuses on follower change and personal growth and development.		

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Truly great leaders develop their skills over a life-time.⁴⁰ The consequence of a manager taking on a true leadership role represents a focus shift. Whereas the manager's primary obligation is to produce acceptable end results for overall organizational success, the manager-leader also must concentrate on creating personal connections to engage followers.²⁷ Essentially, management is solely about building business, and leadership is about building business and relationships. If a manager desires to be a leader, then the manager should strive to include relationship building as part of the management skill set because it is clear that people are the most significant resource in an organization.⁴¹

Demonstrating Leadership

Through study of leadership skills of renowned individuals, scholars have developed an extensive list of characteristics to describe the qualities of great leaders. These qualities also are called leadership traits. In many situations, these traits also are called virtues. Trait theories of leadership arose as a way to identify specific characteristics of a successful leader; although the list is expansive, several are common throughout the literature. These trait theory skills include³³:

- Technical skills.
- Friendliness.
- Task motivation.
- Social skills.
- Emotional control.
- General charisma.
- Intelligence.

Other common leadership skills identified include creativity, diplomacy, verbal fluency, knowledge, organization, persuasiveness, and the ability to understand abstract concepts.³¹ The virtues of honesty and integrity should be evident in leaders. Honesty is truthfulness, being free of fraud or deception. Thus, honesty is a virtue that can be honed to become an essential part of an individual's character. The most successful leaders are honest and are accountable for their own actions.⁴² Honesty is accomplished through a conscious effort to live in truth. Honesty breeds integrity, and integrity develops credibility.⁴² Ultimately, integrity is honesty demonstrated, as integrity is open-mindedness in thought, word, and deed.⁴³ For the leader, honesty and ship. The musicians' calm offering in a time of human tragedy demonstrated noble leadership. Unfortunately, all 8 musicians died in the frigid waters of the North Atlantic Ocean.³⁷ On September 11, 2001, in the midst of the hijacking of United Airlines Flight 93, passenger Todd Beamer declared "let's roll!" which portrayed leadership in the midst of a horrifying situation. That day, the hijacked plane was headed toward any number of susceptible targets in the nation's capital, but it is believed that Beamer and others onboard overtook the hijackers. Although the plane crashed in a field, the passengers prevented the loss of additional human lives had the original target been hit.³⁸ These historical examples demonstrate extraordinary leadership in practice, but routine leadership also is evident in everyday lives. For example, parents influence their children, and therefore are leaders. At work, a health care professional can be a leader among a group of coworkers.³⁹ Still, when asked for an example of a leader within an organization, many people often look to those who have significant power within the chain of command.⁴⁰ True leadership has nothing to do with one's occupation or level within an organization.⁴⁰ Anyone can display leadership skills at anytime. Thus, leadership can be formal or informal. Formal leadership is exhibited by an individual in an assigned role who has allocated powers within an organization, but informal leadership can be demonstrated by members of a work group, such as a collection of staff technologists, who share a leadership role to accomplish routine tasks.⁴ Often, definitions of management and leadership overlap, yet there is a clear distinction between leadership and management. Management has been described as preparing, arranging, staffing, and controlling actions of followers to achieve specific goals.⁴ Managers often focus on outcomes, make the best possible decisions for a group, and concentrate on the bottom line. However, managers are placed at optimal power levels within organizations to exercise leadership simply because managers oversee, and therefore lead subordinates in day-to-day organizational tasks and efforts.²⁷ Holding a manager title does not necessarily make someone a leader. However, managers can study and cultivate their individual leadership styles.

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research a revolutionary concept referred to as emotional intelligence (EI). Although EI has been defined and then redefined by others, the 5 domains of emotional intelligence are:⁵⁴ • Knowing one's emotions. • Managing one's emotions. • Motivating oneself by organizing emotions. • Recognizing the emotions of others. • Managing the emotions of others. EI and leadership have been linked throughout the literature, and authors often establish direct relationships between leadership effectiveness and EI.⁵⁰ A statistically significant correlation between EI and the leader's job performance has been reported.⁵⁰ Researchers consistently report that the leader who has higher EI often is more effective.⁵³ Batool stated that EI can help reduce stress, develop performance, improve sense of achievement, and enhance the productivity of the employee by meeting organizational goals.⁵⁴ Some authors claim that EI is a better predictor of a leader's success than is intellectual quotient (IQ).⁵⁵ Four components make up EI: self-awareness, self-management, social awareness, and relationship management (see Table 3).⁵¹ A leader who is self-aware can recognize his or her strengths, weaknesses, and feelings. Being self-aware requires humility. Management author Jim Collins described leader levels, with level 5 as the highest level of leadership. These high-level leaders combine humility and will.⁵⁶ Thus, it may be surmised that level 5 leaders possess a higher EI because they have the ability to appreciate the important contributions of followers and to look in the mirror to apportion responsibility. Being humble enough to manage ego and power is a mark of an emotionally strong leader. Effective leaders are willing to make well-informed decisions to the best of their ability and are bold enough to stand by those decisions. Leaders also should be willing to admit when they make mistakes, a task that requires the courage to reflect upon one's actions. Emotionally intelligent leaders also can manage relationships with followers and self-manage their own emotions to breed an environment of trust.⁵⁰ Finally, emotionally intelligent leaders have social awareness, which demonstrates the capacity to empathize integrity are demonstrated in straightforwardness in all interactions with followers, which in turn yields respect and trust from followers.⁴⁴ Trust is vital for the leader, and leaders who make personal connections by establishing trust with followers tend to be more effective.⁴¹ If a follower trusts a leader, then trust in the organization also can increase, and trust in an organization has been shown to be positively associated with work engagement, sharing of knowledge, teamwork, and employee performance.⁴⁵ Effective leaders are true to themselves and their followers.⁴⁶ John Wooden, famed University of California, Los Angeles, basketball coach, claimed that before one can lead others, one must be able to lead oneself.⁴⁶ Because health care professionals are responsible for the lives of others, honest personal reflection and accountability always should thrive in patient care, even in leadership positions. Blanchard and Miller suggested that the leader continuously gain knowledge, reach out to others, open their worlds, and walk toward wisdom (GROW).⁴⁷ In clinical practice, the application of the as low as reasonably achievable (ALARA) concept, as it relates to diagnostic imaging of any kind, is an example of honesty and integrity a leader can promote consistently. The Image Gently Alliance, which was founded by the American Society of Radiologic Technologists, Society for Pediatric Radiology, American College of Radiology and the American Association of Physicists in Medicine, operates on similar principles. Image Gently aims to advocate on behalf of and ensure safe and effective imaging care for children worldwide.⁴⁸ Parents usually are unaware of the radiation exposure their child receives and the potential for biological effects from diagnostic examinations. Leaders who have the courage to demonstrate honesty and integrity in imaging practice know and enforce ALARA principles and practice standards, are patient advocates, and gain patient trust, ultimately supporting enhanced patient care. The courage to demonstrate honesty and integrity in leadership is not so much fearless as it is a willingness to act out of conviction.⁴⁹

Emotional Intelligence and Leadership

In the mid-1990s, psychologist and writer Daniel Goleman helped bring to the forefront of leadership

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the changing definition of EI appears to cause some confusion and difficulty among academic scholars, and others denounce the existence of EI altogether.⁵⁰ Still, emotions likely play a vital role in leadership success; leaders who are self-aware, manage themselves, and can relate to others appear to create a work environment favorable for success.^{52,54} Leadership Models George Washington, Martin Luther King Jr, and Mahatma Gandhi are considered impressive, efficient leaders. Although these individuals did not know each of their followers personally, followers were said to feel a personal connection with the leaders because each demonstrated an evident concern for followers.⁵⁷⁻⁵⁹ Great historic leaders in health care also have made distinctive contributions to evoke change. Examples include Clara Barton, the founder of the American Red Cross; Wilhelm Conrad Roentgen, the engineer and physicist who discovered x-rays; and Alexander Fleming, the Scottish scientist who discovered penicillin.⁶⁰⁻⁶² Leadership in health care is facing some challenges.¹⁸ Reasons suggested for these challenges include the lack of a formal leadership model specifically for health care, time constraints on those in leadership positions in the health care setting that are secondary to time needed for clinical responsibilities, and the financial limitations of an ever-evolving health care system.¹⁸ As a result, several leadership styles have been proposed. Transactional leadership, transformational leadership, and servanthship are fundamental forms of leadership that are practical for use in a health care organization, although the emphasis on the leader-follower relationship varies markedly among them. Transactional Leadership Transactional refers to accordance or a contract between people, or a group of people, that results in an exchange.⁴² In business, transactional leadership is an approach in which the leader-follower relationship is focused on the mutual benefits when an effort-reward contract is in place.³¹ For example, if one follower were to outperform another follower on a specific task, the transactional leader would recognize the higher achiever through recognition, remuneration, or some other with others. The common characteristic among these concepts appears to be reflection upon self without neglecting others. Leaders with high EI might practice situational leadership, which emphasizes that a leader must adapt his or her style according to the situation of the leader's team or organization.⁴⁴ EI has been demonstrated as important for followers as well. A follower's EI contributes to the leader's assessment of the follower's potential and credibility.⁵¹ Essentially, an emotionally intelligent follower respects the power of the leader and can delineate his or her unique role within the organization. Complex EI inventories, scales, questionnaires, and online tools have been created to measure EI.⁵⁰ However, since its introduction, the concept of EI has been criticized. Although the control and malleability of emotions clearly is necessary for leadership, a definitive model for measuring EI has not yet been established, resulting in possible ambiguity.⁵⁰ Some authors also suggest that participants can falsely self-report, leading to skewed data. Finally, critics say that Table 3

Dimensions of Emotional Intelligence^{4,5}

Dimension	Capacity to Explain	Self-awareness	Appreciate one's individual emotions, strengths, and weaknesses
Sought to define effective leaders by analyzing shared personality traits or qualities.	Relationship management	Influence, handle disagreement, and inspire change	Concentrated on leader actions vs personal qualities.
Social awareness	Relate to and empathize with others	Refined version of situational leadership emphasizing that situation best predicts appropriate leadership style.	Self-management
Be truthful and control emotions that can be harmful to relationships	Focuses on the contractual leader-follower relationship and the mutual benefits derived.		

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Transformational Leadership Whereas the transactional leader motivates via an exchange relationship with the follower, the transformational leader clearly communicates his or her vision and inspires followers by promoting self-respect, pride, and mutual trust.⁵⁸ For example, in his celebrated “I Have a Dream” speech, Martin Luther King Jr provided an example of transformational leadership through symbolic oratory by identifying and articulating a clear vision, providing a model for change, establishing lofty expectations, and fostering acceptance.⁵⁸ Transformational leadership strongly predicts job satisfaction, ratings of effectiveness, high group performance, and increased overall work effort by followers when compared with transactional leadership.⁵⁴ Clarence Francis, once the chief executive officer of General Foods, stated that “You can buy a person’s time; you can buy his physical presence at a given place, but you cannot buy enthusiasm. You cannot buy loyalty. You cannot buy the devotion of hearts, minds, and souls. These you must earn.”⁶⁵ This statement relates to the transformational leader, because followers of transformational leaders often view the leader as a benevolent parent who remains responsive and treats the follower as an equal despite the disparity in knowledge and experience.³⁰ Transformational leaders ultimately acquire trust, fondness, admiration, loyalty, and respect from followers.³⁰ Transformational leadership is thus rooted in emotion and has been linked with the leader’s EI level.⁵¹ Transformational leaders with high EI use empathy to connect with followers and work to encourage expression of emotions from individuals or group members.⁴⁹ Having empathy for followers is thus a precursor for the transformational leadership model because the leader’s ability to express emotions is vital for the success of the group.⁴⁹ Several benefits to transformational leadership have been reported. Transformational leaders recognize the need for the follower to learn and evolve continually. Govaerts et al studied 972 employees and revealed that empowering employees to do more and learn about their strengths encourages the employees to stay with the organization.⁶⁶ Authentic leadership is similar to transformational leadership, but at a more personal level established incentive. Conversely, a punishment would follow the breaking of an established rule or agreed-upon custom. Although financial or social rewards have been reported to increase feelings of fairness and satisfaction, punishment exerts a negative influence on the follower.⁶¹ Transactional leadership has been cited as the most common leadership model used in health care.¹⁸ However, studies suggest flaws in transactional leadership. One study claimed that out of 845 employees, only 9% agreed their performance was motivated by transaction.³⁰ And although transactional leadership often helps leaders accomplish specific goals, it also can stifle creativity and innovation by discouraging individuality and expecting compliance.⁴⁴ Disparity between the effort and resulting reward for similar contributions (or punishment for infractions) can create ambiguity among followers. For example, if 1 employee’s frequent tardiness and laziness remains unpunished, but an employee who is continually punctual and hardworking is not recognized, the latter employee could become unhappy and lose respect for the leader. The punctual, hardworking employee might even feel mistreated or taken advantage of for simply doing what is expected. Employees often experience burnout when not recognized and offered rewards or even gratitude.⁶⁴ Transactional leadership is an impersonal form of leadership because there is no attempt to change or recognize the follower’s attitudes or values, resulting in a follower who experiences a great deal of anxiety and uncertainty about his or her employment.³² Transactional leadership is related to directive leadership, also called autocratic, controlling, or authoritarian leadership.³⁶ An autocratic leader assumes complete sovereignty and control of the group. Autocratic leaders do not recognize the benefit of cultivating an intrinsically motivated employee, but rather focus on extrinsically motivating each employee equally to accomplish specific goals for the leader or organization.¹⁸ Transactional leaders also fail to build trust between the leader and follower.¹⁸ Although a transactional leader might be viewed as successful by his or her superiors, especially for producing results, followers can feel subjugated and isolated as they submit to the changing needs of the leader.

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and professional goals (see Table 4).⁶⁷ Models of leadership in which the leader's behaviors more significantly and positively influence a follower's self-identity appear to produce a positive effect on follower behaviors and the overall success of the organization.^{67,69} Servant leadership is a value-laden leadership model that encourages the ethical treatment of followers, thus gaining follower trust and increasing overall effectiveness of the group.⁶⁷ Transformational leadership contrasts with servant leadership because transformational leaders focus on the well-being of the organization, but servant leaders, though mandated to serve the organization, focus on the best interests of their followers first.⁶⁹ The servant leadership model appears to be ideal in the health care setting because health care workers typically emphasize serving patients.¹⁸ Thus, those who accept a leadership role in a caregiving setting should be, at their core, naturally predisposed to offering compassionate guidance.⁶⁸

Conclusion

Patients rightly anticipate and merit the best possible health care. Serving the needs of others with compassion is the primary obligation of professionals who work in health care. Some health care professionals might be required to perform the functions of servant, follower, that is based on the concept of being genuine. Authentic leaders inspire others and motivate followers on an intellectual level while simultaneously providing them with individualized attention.⁴⁵

Servant Leadership Although many leadership theories focus on the top-down approach to leadership, in which the source of power is placed solely on the leader, the servant leadership model establishes a bottom-up organizational view in which the followers' needs are regarded before the leader's desires.⁶⁷ Thus, servant leadership focuses on the welfare of the follower rather than the glorification of the leader. This model establishes a servant-first, leader-second attitude.³⁰ Robert K Greenleaf often is credited with first recognizing and espousing the value of the selfless leader (see Box 4).³⁷ However, this form of leadership has been demonstrated throughout history. The Bible says that Jesus espoused the concept of servant leadership when he said, "whoever wants to be great among you must be your servant, and whoever wants to be first must be your slave—just as the Son of Man did not come to be served, but to serve."⁶⁸ George Washington often closed his letters by signing "your humble obedient Servant."⁵⁷ Despite the fact that these historical figures were in a position that offered them great power over their followers, they chose to humble themselves to promote the welfare of others first. With servant leadership, the leader functions as a steward, recognizing followers as individuals who should be nurtured to achieve their highest personal Box 4

Characteristics of Servant Leaders¹⁸

- Listening skills
- Empathy
- Healing focus
- Awareness
- Persuasive ability
- Conceptualization skills
- Foresight
- Possesses stewardship ethics
- Commitment to follower growth
- Community-building skills

Table 4

Key Ways Leaders Can Serve⁶⁸

Action

Purpose

See the future.

Servant leaders should provide followers a vision for the future.

Engage and

develop others.

Servant leaders put the right people in the right positions and cultivate followers' potential.

Reinvent

continually.

Servant leaders should never stop learning and always encourage follower education.

Value results and

relationships.

Servant leaders obtain financial strength and profits from enhanced relationships with customers and employees.

Embody values.

Servant leaders continually build trust between customers and followers while embodying the values of the organization.

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- and leader simultaneously, or shift between roles to meet the needs of employers, employees, and customers. Striving daily to satisfy these needs requires that the health care professional be honest and demonstrate integrity when interacting with others. Ultimately, it is professionally warranted that health care workers continually research and gain knowledge about the concepts of service, followership, and leadership to adapt to an ever-changing health care environment, especially to provide the best possible individualized patient care.
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several textbooks and articles related to medical imaging, education, and patient care. His imaging specialties include radiography and abdominal, pediatric, and obstetrical/gynecological sonography. He is the lead instructor for the medical sonography program at Johnston Community College in Smithfield, North Carolina.

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Directed Reading Quiz

continued on next page

Read the preceding Directed Reading and choose the answer that is **most correct** based on the article.

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4. The ability to recognize the emotions and feelings of others with a minimum distinction placed upon the difference between self and others is known as:

- a. advocacy.
- b. self-sacrifice.
- c. attentiveness.
- d. empathy.

5. Health care professionals who face decreased empathy and reduced altruistic motivation have:

- a. additional focus and drive.
- b. a decreased likelihood of burnout.
- c. less productive and effective patient care.
- d. better patient engagement.

1. Which of the following is **not** an element upon which servanthship is based?

- a. sympathy
- b. empathy
- c. compassion
- d. altruism

2. Compassion fatigue is the result of the combination of _____ and _____ .

- a. secondary traumatic stress; empathy
- b. burnout; secondary traumatic stress
- c. burnout; self-sacrifice
- d. self-sacrifice; empathy

3. Someone who regularly can balance the concern of self and others is considered a:

- a. mature caregiver.
- b. self-preserver.
- c. follower.

d. potential caregiver.

Directed Reading Quiz

10. Critiques of EI include that:

1. a definitive model for measuring EI has not been established.
2. participants can falsely self-report their EI.
3. the changing definition of EI causes confusion.

- a. 1 and 2
- b. 1 and 3
- c. 2 and 3
- d. 1, 2, and 3

11. Which leadership style is used *most* in health care?

- a. servant
- b. transactional
- c. transformational
- d. situational

12. Which leadership model encourages the leader to focus on the welfare of the follower rather than on the glorification of the leader?

- a. servant
- b. transactional
- c. transformational
- d. situational

6. In the courageous follower model, the follower should:

1. take a moral stand when warranted to prevent ethical abuses or to refuse to participate in them.
2. participate in any transformation needed to improve the leader-follower relationship and the organization's performance.
3. constructively challenge the leader or group's behaviors or policies if these threaten the common purpose.

- a. 1 and 2
- b. 1 and 3
- c. 2 and 3
- d. 1, 2, and 3

7. The _____ follower will do enough to retain the current position but no more.

- a. resourceful
- b. partner
- c. implementer
- d. individualistic

8. _____ leadership is demonstrated by a member in a workgroup, such as a collection of staff technologists, in which a secondary leadership role is shared.

- a. Formal
- b. Servant
- c. Informal
- d. Alternative

9. Which of the following is *not* a domain of emotional intelligence (EI)?

- a. knowing one's emotions

- b. recognizing the emotions of others
- c. motivating oneself by organizing emotions
- d. manipulating the emotions of others



Carefully cut or tear here

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