# Perception of Leadership as a Predictor of Absenteeism

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**Despite the fact that there is an abundance of literature that examines leadership traits, none was found that determined how unexcused absenteeism and employee perception of leadership were related; such research is important in order to maximize productivity of an organization. A theoretical model of moral development was used to predict self-reported unexcused absence among employees in a hospice setting based on self-reported leadership perceptions of the immediate supervisor. One hundred and thirty-seven participant responses to the researcher-developed Leadership Perception and Absenteeism Survey were analyzed quantitatively. The results demonstrate that employee perception of the leadership of the immediate supervisor is a factor in the inappropriate use of sick leave, a form of unexcused employee absenteeism. The analysis shows that more favorable perception of the leadership of the immediate supervisor reduces the use of sick leave days as unexcused absence to avoid contact with the immediate supervisor. © 2010 Oklahoma Academy of Science.**

## INTRODUCTION

The costs associated with absenteeism may include temporary help, overtime pay, loss of business, and employee morale problems. Absenteeism has an impact, economically at least, on small businesses and possibly on larger multinational businesses (Markowich, 1993). Absenteeism, regardless of the reason, has a financial and ethical impact on the business enterprise (Markowich, 1993). The impact of absenteeism, including unexcused or misused absences, on small businesses is similar to that for the hospice organization. The National Hospice Organization (1993) defined hospice as "a coordinated program providing palliative care to terminally ill patients" (p. iii) and supportive services to patients, their families, and significant others 24 hours a day, 7 days a week. Hospice, as a coordinated program or organization, is a collection of people working together, each with a designated responsibility to achieve a common purpose (Cascio, 1998). Hospice organizations also require that 5% of delivered services be completed by volunteers (Setla & Watson, 2006). The Code of Federal Regula-

tions (2004) stated that Medicare-certified hospice organizations must document that volunteer staff provide direct patient care or administrative support to account for at least 5% of total patient care hours. Volunteers do not receive the fringe benefits of sick leave and vacation days that paid staff do. All members of the hospice organization, paid or volunteer, must understand the mission statement and performance goals of hospice. This study focused on the perceptions of paid staff or employees on the leadership of their immediate supervisors and the relationship of these perceptions to the misuse of absenteeism.

Studies of nonprofit and for-profit businesses have reported that workplace absenteeism has reached a 5-year high and may lead to the abuse of leave use (Ford, 2005). Salaried staff may report absenteeism as a sick day or a personal leave day, but the real reason might be an excuse to avoid contact with office staff or supervisors (Ford, 2005). Employees' concept of leadership is relevant to effective organizational structure and management policy. Interaction between the immediate supervisor and the employees'

response to leadership and authority are essential to organizational success and endurance. Situations do arise when employees call in an absence to be away from their immediate supervisors or from the group interaction, thus avoiding unwanted contact with the supervisors (Ford, 2005). Avoidance of the leader is a reason for an absence from work, but it is not a reason that is expressed overtly. Ford stated that employee stress accounts for 11% of absences. Stress may be an outcome stemming from leader-employee expressed behavior. This study sought to reveal through the self-reporting of the participants that leader avoidance is a dynamic reason for unexcused absences.

The hospice environment involves a multiplicity of interactions. The service provided by hospice employees is to administer palliative care to patients while offering grief counseling, spiritual guidance, and social services to the family members. To provide corresponding services requires the efforts of several offices. The board of directors provides leadership to the entire organization and staff and, through the director, establishes the organization's mission. The mission statement must be delivered clearly to hospice staff, employees, and volunteers. Within the domain of providing client services, administrative staff, bereavement counselors, social work counselors, clergy, nursing professionals, and the medical staff work collectively to provide families and patients with care. It is not a typical customer service-customer situation.

In this study, the immediate supervisor included persons who were in either a managerial or a leadership role within a hospice setting. Both managers and leaders are important in a successful workplace (Kotterman, 2006). Leaders generally provide and establish organizational and workplace direction related to the mission and goals, whereas managers plan and budget (Kotterman, 2006). In smaller hospice settings with fewer than 60 employees, the roles of manager and leader often blend. For very large corporate hospice settings, the roles

of leader and manager may be clearly separate, according to the organization's policy, procedures, and job descriptions. Even though a managerial focus is different from that of a leader in a hospice setting, for this particular study, the immediate supervisor had the skill set of a manager and provided leadership by motivating and encouraging the employees to work toward fulfillment of the hospice mission. Thus, the immediate supervisor performed the dual role of manager and leader because of the twofold, often interchangeable, functions that they served. This study defined the immediate supervisors of the employees in the hospice setting as individuals serving a dual role, namely, as managers who functioned as leaders as well as leaders who functioned as managers. The investigation focused on the question, In what ways do employees abuse absenteeism as the result of their perception of leadership of their immediate supervisors? The null hypothesis states, Employees' perception of leadership of their immediate supervisors, as measured by analysis of the Leadership Perception and Absenteeism Survey, is not associated with unexcused absenteeism. The alternative hypothesis is Employees' perception of leadership of their immediate supervisors, as measured by analysis of the Leadership Perception and Absenteeism Survey, is associated with unexcused absenteeism.

## ASSUMPTIONS OF THE STUDY

In statewide hospices, the leadership values may not be the same in rural and urban environments. In this study, a rural hospice was defined as one located within a city with a population of fewer than 100,000 persons, and an urban hospice location was defined as one within a city with a population of more than 100,000 persons. The researcher assumed that perceptions of rural leadership practices would be different from the more urban leadership perceptions of employees. The second assumption is that rural and urban settings have no effect on how em-

ployees perceive supervision leadership. Other employee factors such as age and staff position may affect absenteeism. A third assumption is that the additional reported factors such as age, gender, staff position, geographic culture, salary, or experience affect absenteeism.

One hundred and fifty-six hospice organizations operate within Oklahoma. Of those hospices, only 24, or about 15% of the total number of hospices, are nonprofit. A letter of interest and a response postcard were mailed to the directors of all of the hospices in Oklahoma. When the hospice directors responded, they self-identified as a nonprofit or a for-profit hospice organization. The purpose of the letter was to obtain permission from each director to mail the survey to a designated contact person within the organization who would then administer the survey to employees interested in participating in the study. The participants were required to have full- or part-time status within the organization and be paid an hourly or salary wage as a staff member of the hospice.

For this study, hospice volunteers, that is, the individuals who provide a significant contribution to the overall success of hospice organizations were excluded from participation because they do not receive leave policy benefits for daily work hours. A record of volunteer absence may be maintained for monitoring donated hours by the hospice organization, but the volunteer does not receive compensation or benefits for time off or away from work. The directors of the hospice organizations were not asked to participate in the study because typically, the director of a hospice organization receives leadership from and reports directly to a board of directors, a group of individuals who vote on matters related to overseeing the leadership of the director.

The hospice organization employees who chose to participate voluntarily in the study completed the survey. There was no requirement for any employees from any of the hospice organizations to participate.

The participants self-reported demographic information as well as information related to their absenteeism and perceptions of the leadership of their direct supervisors.

The reader should note that the generalization of the findings from the study may be applicable to all organizations, yet the particular emphasis in this study was on paid staff members employed by hospice organizations. The expectation was that all paid employees of all hospices in Oklahoma would complete the surveys, which would have resulted in several hundred participants. The researcher used a random selection process so that no employee was disqualified from the selection procedure. The survey was administered to participants using the protocol provided by the researcher.

## PROCEDURE

A large sample size provides a greater likelihood of having sufficient statistical power. The margin of error is the research error acceptable to the investigator. Oklahoma has 156 operational hospice organizations, each with a different number of paid staff. For example, 1 hospice routinely has more than 60 paid staff, whereas another has fewer than 10 employees. To find the average number of paid staff in the hospices within the state, the researcher contacted the Hospice Association of Oklahoma for the number of employees on record per hospice. The average number of employees per hospice was 20, meaning that 3,120 paid employees were eligible to participate in the study.

The Leadership Perception and Absenteeism Survey was designed by the researcher to solicit information about the participants' perceptions of their direct supervisors' leadership characteristics. The participants did not include volunteers or directors of the hospice organizations that volunteered to participate. The intent of the survey was to define the individual employees' perceptions of leadership and determine whether the employees' percep-

tions of the leadership of their immediate supervisors affected the use of leave policy, resulting in unexcused absenteeism from work. Items for the survey included the independent and dependent variables relevant to the study. A draft of the survey was reviewed by individuals with experience dealing with small business and hospice organizations.

The sample comprised 137 participants, 120 (88%) of whom self-identified as female. The sample comprised participants mainly between the ages of 18 and 65; 9 participants were over the age of 65. The income distribution with the largest salary was 35 participants (25%) listing an income greater than $45,000. Slightly more than one third (47, 34%) of the participants earned less than $25,000. The mean salary range was between $25,000 and $30,000. Most of the participants (74, 54%) selected married as their marital status. However, even though they were divorced, 52 participants (38%) self-reported their marital status as single or divorced. Sixty-three participants (46%) indicated that they were not married. Most of the participants (55%) commuted less than 10 miles to work. Nine (6%) participants commuted more than 30 miles to work. Most of the participants (85, 62%) reported their home location as rural (< 100,000). Fifty-two participants (38%) reported it as urban. A majority of participants (117, 86%) had been employed by a hospice organization for 5 years or less. Only 6 participants (4%) had worked in a hospice for more than 10 years. One hundred participants (73%) self-reported their ethnicity as White. Eighteen participants reported it as African American (13%), 1 as Asian (0.7%), 2 as Pacific Islander (2%), 9 as Native American (7%), 2 as Hispanic (2%), and 5 as Other (4%).

## Sick Leave Use to Avoid Immediate Supervisor

Ninety-nine (72%) participants did not miss work using sick leave to avoid the immediate supervisor. Slightly fewer than 1 (1%) reported using more than 10 days of sick leave to avoid their immediate supervisors. Slightly fewer than 27 (20%) used less than 3 days, and 5% used less than 5 days. Slightly fewer than 34 (28%) participants used between 1 and 5 days of sick leave as an unexcused absence to avoid contact with their immediate supervisors.

## Leadership Perception of Immediate Supervisor

Forty-six percent (n=62) of the participants strongly disagreed with the statement "leadership perception of the immediate supervisor was low." Twenty-six (19%) participants reported no opinion regarding leadership perception. Thirty-five (26%) of the sample indicated that their perception of leadership of the immediate supervisor was low. Slightly more than half of the sample (75, 55%) disagreed or strongly disagreed with the leadership statement (Table 1).

## Sick Leave Use to Avoid Confrontation With Immediate Supervisor

Sixty-four percent (n=87) of the participants strongly disagreed with the statement that sick leave was used to avoid confrontations with the immediate supervisors. Twelve participants (9%) reported no opinion regarding the use of sick leave to avoid

**Table 1. Degree of Leadership Perception.**

| Leadership perception of immediate supervisor is low | Frequency | Percent[*] |
|---|---|---|
| Strongly disagreed | 62 | 46 |
| Disagreed | 13 | 10 |
| No opinion | 26 | 19 |
| Agreed | 23 | 17 |
| Strongly agreed | 12 | 9 |
| Missing | 1 | 1 |
| Total | 137 | 100 |

[*]Percentages were rounded to nearest whole number

confrontations. Twenty-six (19%) of the participants agreed with the statement that sick leave was used to avoid confrontations with the immediate supervisors. Slightly less than one third of the sample (38, 28%) indicated that the use of sick leave to avoid confrontations with the immediate supervisors was low. Almost three quarters of the sample (96, 71%) disagreed with the avoidance statement (see Table 2).

**Table 2.  Degree of Confrontation Avoidance.**

| Sick days used to avoid confrontation with immediate supervisor | Frequency | Percent[*] |
|---|---|---|
| Strongly disagreed | 87 | 64 |
| Disagreed | 9 | 7 |
| No opinion | 12 | 9 |
| Agreed | 16 | 12 |
| Strongly agreed | 10 | 7 |
| Missing | 3 | 2 |
| Total | 137 | 100 |

[*]Percentages were rounded to nearest whole number.

The dependent variables of non-illness sick leave use, use of sick leave to avoid immediate supervisor contact, disagreement with immediate supervisor, avoidance of immediate supervisor, use of sick leave just because, when compared to the independent variables of gender and gender perception of immediate supervisor, are discussed next as descriptive statistics. A Pearson correlation analysis showed a significant correlation, $r$ (133) =.41, $p < .01$ between perceptions of the immediate supervisors and the use of sick leave for reasons other than those established by organizational policy. The statistical analysis indicated that the Pearson correlation, $r$ (132) = .60, $p < .01$ was significant for participant use of sick leave to avoid immediate supervisors, as compared to the participants' leadership perceptions of the

immediate supervisors. The Pearson correlation, $r$ (132) = .89, $p < .01$ was significant for participant avoidance of their immediate supervisors because of disagreements with them. Statistically, there was evidence of a positive correlation between participants' avoidance of the immediate supervisors and the use of sick leave for reasons other than those established by organizational policy because of disagreement or low leadership perceptions of the immediate supervisors. Spearman's rho correlation coefficient, $r_s =$ (133) = .41, $p < .01$, indicated a significant correlation between the participants' leadership perceptions of the immediate supervisors and sick leave use other than for those reasons established by organizational policy. Spearman's rho correlation coefficient, $r_s =$ (132) = .60, $p < .01$, indicated a significant correlation between the participants' leadership perceptions of the immediate supervisors and sick leave use other than for those reasons established by organizational policy to avoid the immediate supervisors.

The results led the researcher to reject null hypothesis 1 because the results indicated a correlation between employee perceptions of leadership of their immediate supervisors an unexcused absenteeism. If the employees' perceptions of their immediate supervisors were low (disagree or strongly disagree with acceptable characteristics of a positive leadership style), they used sick leave for reasons other than allowed by organizational policy to avoid contact with the immediate supervisors.

### Abuse of Absenteeism as the Result of Leadership Perception

One hundred and thirty-four participants responded; 3 participants did not. Sixty-two participants responded to the questionnaire item ($M = 1.08$, $SD =0.38$). Of the 134 participants who responded, 75 (56%) disagreed with the statement that sick leave was used to avoid a confrontation with the immediate supervisor because of a low leadership perception.

Null hypothesis 1 stated that the employees' perceptions of the leadership of their immediate supervisors were not associated with an unexcused absence. A one-way ANOVA was performed on the means regarding the participants' responses related to the use of unexcused absences and leadership perceptions of the immediate supervisors. The $F$ value was $F(4, 129) = 18.71$, $p < .05$. The critical value for $F$ at $p = .05$ was 2.46 ($df = 100$). The determined $F$ value was greater than the critical value, indicating that the means were significantly different so null hypothesis 1 is rejected, and alternative hypothesis 1 is accepted. The employees' perceptions of the immediate supervisors' leadership were associated with use of sick leave as an unexcused absence.

## INTERPRETATION OF THE FINDINGS

One hundred and thirty-seven hospice employees volunteered to participate in a study investigating the relationship between use of sick leave as an unexcused absence and employees' perceptions of the leadership of their immediate supervisors in a hospice setting. The data showed that 72% of the sample did not miss work by using sick leave to avoid their immediate supervisors. However, slightly less than 20% used less than 3 days, 5% used less than 5 days, and slightly less than 1% of the study group reported using more than 10 days of sick leave to avoid their immediate supervisor. The findings indicated that employee absenteeism is increasing on a global level and should be investigated further. Absenteeism is increasing (Ford, 2005), and this study considered self-reported biographical and demographic variables in the employees' use of sick leave as an unexcused absence in relation to leadership perception.

The data also indicated that 46% of the sample showed that their perception of leadership provided by the immediate supervisor was high. Some participants did not respond to the questionnaire item, and even though slightly less than 50% of the participants reported a favorable leadership perception, 26% of them agreed that their leadership perceptions of the immediate supervisors were low. Although the data showed that 65% of the participants strongly disagreed with the statement that sick leave was used to avoid a confrontation with the immediate supervisor and that some participants reported no opinion regarding use of sick leave to avoid a confrontation, the data also indicated that 29% of the participants agreed with the sick leave statement.

The researcher found a correlation between employees' perceptions of the leadership of their immediate supervisors and the employees' unexcused absenteeism. Misumi (1985) described a Japanese model that reflected American ideals but which also displayed two functions inherent in a global leadership concept: performance and maintenance. The employees did indicate that if their perceptions of their immediate supervisors were low (disagree or strongly disagree with acceptable characteristics of a positive leadership style), they used sick leave for reasons other than what were allowed by organizational policy to avoid contact with their immediate supervisors. Null hypothesis 1 states that employee dissatisfaction is not associated with an unexcused absence used as an avoidance contact with the immediate supervisor. The immediate supervisor is the employees' leader and is responsible for the development of satisfactory relationships and must attend to task orientation (Sinha, 1995). Alternative hypothesis 1 is accepted, showing that employee dissatisfaction of the immediate supervisors' leadership was associated with use of sick leave as a reason to avoid contact with the immediate supervisor. Leadership attributes, even if forced on the individual, must convey effectiveness (Sinha, 1995). Effective leaders are culturally cognizant, that is, they are aware of employee relations and satisfaction.

# IMPLICATIONS FOR SOCIAL CHANGE

Absenteeism is an important issue for employers and employees (De Boer et al., 2002). For the hospice organizations in this study, it is important that they develop greater insight into the probable causes of their employees' unexcused absenteeism. The ability of an organization policy or program to reduce absenteeism may mean large financial savings and important quality implications (Guadine & Saks, 2001).

This study of hospice employees examined the role of the employees' perceptions of the leadership of their immediate supervisors in an effort to deal with future issues regarding absenteeism. The absenteeism examined in this study was the use of sick leave as an unexcused absence from the workplace. Many reasons contribute to employee absence (De Boer et al., 2002). Different components of perception are important when trying to predict an absence behavior. The researcher generally found that the employees' perceptions, particularly of the leadership of their immediate supervisors, affected their use of unexcused absenteeism. If the hospice employees perceived the leadership of the immediate supervisors as low to the point where the employees wanted to avoid contact with them, the hospice employees abused the sick leave policy and used sick leave as an unexcused absence. The hospice employees indicated that they became physically or emotionally tense if they perceive that their immediate supervisors were not providing proper leadership as defined by leader characteristics (Hendrix & Spencer, 1989).

Unfair treatment by an organization may be one reason employees report sick (De Boer et al., 2002). The hospice employees in this study perceived the leadership of their immediate supervisor as low, resulting in difficult leader-worker relationships and the decision by some employees to use sick leave as an absence to avoid the supervisors. It would be relevant to hospice organizations to develop procedures to address positive leader-worker relationships. In hospice organizations in particular, there may be a need for conflict resolution professional development to help individuals increase and expand their own human potential in serving the mission of providing palliative care to individuals who are terminally ill.

The social implications of this study can be the foundation of future investigations into ways to expand human potential to better serve individuals in all stages of living. The growth of human potential can include qualities that encompass health and well-being, education and human development, science and technology in the human environment, and community. These quality implications can reflect across a broad spectrum of disciplines and converging values of many organizations. Reducing absenteeism based upon employees' low perception of the leadership of their immediate supervisors can expand the potential for developing a world of healthy citizens and increase the effectiveness of educating management for better employee relations, thus increasing productivity and organization fulfillment of the mission and developing a highly responsive and uniquely collaborative workforce.

## LIMITATIONS OF THE STUDY

This study had some limitations: (a) The analyses were more correlational than causal; (b) the study investigated whether the employees' perceptions of the leadership abilities of their immediate supervisors was or was not the cause of an unexcused absence from the workplace; and (c) perceptions of leadership and absenteeism were measured simultaneously, so the results of this study remain tentative until a more longitudinal investigation can be performed. For example, the same hospice organizations could be studied a year from now to determine any significant changes in the results, assuming that many of the same employees who participated in this study are still employed with the hospices.

## RECOMMENDATIONS FOR ACTION

Employees' unexcused absenteeism will certainly remain a costly situation for organizations and will continue to be a challenge for the managers, the immediate supervisors, as they endeavor to understand the reasons for it (van der Westhuizen, 2006). Management and human resources personnel need to understand what motivates the employees to use unexcused absenteeism as an avoidance tactic. Future research into employees' perceptions of the leadership abilities of their immediate supervisors, as well as other work-related attitudes, could provide insight into the dynamics of employee use of absenteeism. Research into attendance motivation will contribute to determining employees' absence behavior.

Organizations are encouraged to keep accurate records of absences and the reasons for such absences. Immediate supervisors need to understand how demographic and biological factors affect employees' attitudes. The immediate supervisors must assume the responsibility to understand their employees and the factors that affect employees' responses.

## RECOMMENDATIONS FOR FURTHER STUDY

The effects of other people's views and actions on self-concept may indicate that self-moral development is determined by personal choices and the result of the influences that affect those choices. Every aspect of moral decision has the capacity to impair, damage, sustain, or alter behavior. Because the affects of moral decisions on the individual occur internally, it is difficult to assess the effect of the decision interactions causing absenteeism as the result of the low perceptions of the leadership of immediate supervisors. Thus, the process of the interaction is invisible yet vital to the health and well-being of the hospice work-place environment, where individuals must attend work to make important and critical decisions that ultimately affect the existing and remaining quality of life of patients who are terminally ill.

The present study may have future research implications and organizational practice. Interventions may be designed to improve relationships between immediate supervisors and hospice employees. An organizational practice that might develop into a policy is to have professional development for supervisors that describe employee characteristics. The researcher also noted that different policies regarding paid time off may affect absenteeism, so future researchers might consider testing the moral development model by comparing the absence policies of different hospice organizations. The use of sick leave as an unexcused absence to avoid contact with the immediate supervisors may be less prevalent in hospices with less tolerant policies regarding paid time off.

Further study involving leadership perception and its effect on absenteeism within hospice organizations could create a host of collective improvement possibilities for a more dynamic service and learning environment, where understanding the interaction between negative perception and absence as an avoidance mechanism may facilitate a higher quality of services delivered by collaboratively enhanced work teams. This is vital in hospice organizations because the mission of hospice is provide care beyond a cure to individuals whose quality of life depends largely on the hospice personnel being present to provide such care, even when they may have a negative perception of their immediate supervisors that may lead them to avoid coming to work.

Knowledge about the ways in which the reasons for unexcused absenteeism can be dealt with and reduced is important for individuals, communities, and organizations. Advanced research could facilitate programs that focus on the expansion of human potential and improvements in

people's lives, especially those of people who are terminally ill. Scientific research regarding the perception of leadership and its effect on absenteeism as an avoidance mechanism could link the needs of hospice organizations with the solutions of comprehensive conflict resolution procedures to ensure more positive employee-supervisor relationships.

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