



The History and Practice of Leading: Servant Leadership as an Effective Approach in the Healthcare Industry

Nicole Poston

Center for Leadership and Organizations, Anderson University, Anderson, USA
Email: nicoleposton3@gmail.com

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Abstract

Various models of leadership have proven effective across organizations and industries. Leaning in on leadership effectiveness within the healthcare industry servant leadership stands out. Incorporating servant leadership skills, characteristics, and behaviors in development, training, and succession planning models increases leader effectiveness at all levels of an organization. Quantitative and qualitative studies illustrated in this essay demonstrate the effectiveness of a servant leadership approach within multiple constructs such as age, gender, experience, rank, and position. Leadership is ever evolving and in industries such as healthcare the demand for servant leadership qualities is not only being sought internally by followers but externally by consumers.

Subject Areas

Leadership Development, Healthcare Leadership, Managerial Economics

Keywords

Servant Leadership, Healthcare, Followership, Leadership Effectiveness, Models of Leadership

1. Introduction

Servant leadership in the healthcare industry is a practical approach to delivering high-quality patient care, enhancing employee satisfaction, and driving organizational success. The core characteristic of servant leadership is to serve others, and it was introduced as a leadership model by Greenleaf in an essay he wrote in 1970 [1]. The root of healthcare is serving patients. The underlying theme connecting

the leadership model and healthcare is the service to others. To deliver effective servant leadership, everyone within a healthcare organization's hierarchy must serve one another. How are leaders, both those with titles and those without, serving others in their work?

Effectiveness is realized by healthcare leaders who develop and consistently demonstrate servant-leadership. While other factors may impact this research, due to time and space constraints, the intentional focus on specific areas was included to meet the scope and limitations of this study. This study examines various constructs, including age, gender, experience, and role, in reviewing and evaluating the effectiveness of servant leadership within the healthcare industry [2]. Leaders often incorporate multiple leadership methodologies into their daily practices. Each person and situation is unique. Understanding the needs of one's followers is a key aspect of implementing servant leadership and modeling such behaviors.

Through evidence-based research studies in healthcare settings, servant leadership has been shown to be an approach that leads to increased leader effectiveness, follower satisfaction, and positive patient outcomes. Future research on the depth and impact of servant leadership within each of the above-named constructs in the healthcare industry represents an opportunity for improved modeling, mentorship, training, culture, learning, and followership in the healthcare industry. Supportive leadership styles, such as servant leadership, have led scholars to discern the impact of this leadership style on employee satisfaction [2].

Strengthening the health and well-being of those being served and the overall societal impact on the community and common good [3]. Aligning values such as trust and respect within a healthcare organization's culture leads to effective performance from both leaders and followers, as well as a stronger connection to the organization's mission, vision, and values. This article reviews historical and foundational literature. Through qualitative research, the evaluation of peer-reviewed studies, literature, and academia is illustrated, highlighting the research methods, identified findings, systemic applications, limitations, and future research directions.

2. Literature Review

Developing leaders by leveraging servant leadership to build a strategic, productive, and empowering workforce in healthcare organizations leads to effective and high-performing organizations [4]. When considering servant leadership as a vocation in healthcare, Palmer [3] offers insight into this topic in his book, *Let Your Life Speak: Listening for the Voice of Vocation*. He says:

“Leadership is a concept that is often resisted. It seems immodest, even self-aggrandizing, to think of ourselves as leaders. However, if it is true that we are made for community, then leadership is everyone's vocation, and it can be an evasion to insist that it is not so. When we live in a close-knit ecosystem called a community, everyone follows and leads” ([3]: p. 74).

2.1. Evaluation

The characteristics of servant leadership, as noted in “Servant Leadership in the Last Decade: A Systematic Review” [4], provide purpose to leaders who seek to serve their followers by understanding their needs, placing them first, developing trust, and supporting them during challenging conditions. The limitations of this study, as reported by [4], include the publisher, article title, and period in which the articles were written, which are indicative of researchers broadening the scope of servant leadership research. Evidence from this review suggests a positive relationship between leaders who embody servant leadership and follower performance, indicating effectiveness through qualitative instruments such as the Six-Factor Servant Leadership Behavior Scale and the Executive Servant Leadership Scale [4].

2.2. Inclusion and Criteria

The research included in this study examines both positive and negative employee outcomes, including commitment, motivation, burnout, and turnover [4]-[7]. Each of these constructs offers an opportunity for future research to understand the impact of servant leadership not only from the follower perspective but also how each construct, such as burnout, affects patient care in the healthcare industry [8] [9]. Modeled behavior is often considered a necessary component of servant leadership. In addition to the modeled behavior, teaching servant leadership has been shown to be effective in various contexts and industries [10].

When educating, training, and encouraging servant leadership as an effective model in any industry, a thorough understanding and transparency of the adverse outcomes’ impact on the organization’s consumers is key to aligning the ‘why’ [10]-[12]. In any industry, a thorough understanding and transparency of adverse outcomes are required to ensure organizational effectiveness, culture, and alignment with its goals and external societal outcomes [10] [13] [14].

2.3. Foundational Voices

Greenleaf [1] asks the question, “Servant and leader—can these two roles be fused in one real person, in all levels of status or calling?” (p. 21). Peter G. Northouse [5] demonstrates that Greenleaf [1] developed a scholarly approach as a foundational platform for servant leadership, both in practical and theoretical terms. However, it was not based on a research design since the 1970s. A servant, which a leader or a follower can demonstrate, is a person who listens intently to voices that came before, within the present, and personal experience to a path of growth, improvement, and development [1] [15]. Greenleaf’s [1] thesis, “More servants should emerge as leaders, or should follow only servant-leaders,” highlights the importance of developing future leaders (p. 24). This theory further distances itself from the “Great Man Theory,” which views power, influence, and authority as the hallmarks of effective leadership, by advocating for a shift in authority to followers or those being led [5].

Drucker [6] presented an alternative, yet coinciding, theory of management and leadership. His research focused on management within businesses, specifically in manufacturing and retail, during the Industrial Revolution era, from the early to the mid-1920s [6]. Drucker [6] illustrated a context similar to Kellerman [7] regarding leader-follower relationships, also referred to as manager-subordinate relationships. Drucker's [6] approach portrays a picture of economic forces directly influencing decision-making, performance, and management behavior. Drucker [6] emphasized that managers' behaviors and responses to problems significantly impact performance and relationships, ultimately leading to dysfunction within the team. Supporting the thesis of this study, he suggested that the vision of leaders and followers must align with a common goal to achieve effective management [6].

Andrew Pearson [16] demonstrates an approach to identifying the servant leadership traits that an effective leader must model within the healthcare industry. He stated that while there is no required amount of compassion necessary to be considered a servant leader, compassion must be a visible quality in a leader to be identified as such [16]. Beginning with an acknowledgment of the leader's behavior and its impact on their followers [16] [17]. Servant leadership is based on empowering and growing one's followers. His research supports this leadership behavior as a recommended action to empower leadership potential within a group or team through proper practices [15] [16].

J. A. Irving's [10] "Servant Leadership and the Effectiveness of Teams" examines the variables of servant leadership at the organizational level, individual participant satisfaction, and team-level effectiveness. Irving's [10] research builds upon the historical literature on servant leadership, which has paved the way for ongoing and valuable research on the effectiveness of servant leadership behaviors within teams. This study presents an alternative view, encompassing not only leaders' behaviors but also the outcomes of the identified servant leadership variables within the context of team effectiveness [10] [12]. With an intended audience of organizations, leaders, and followers at any level of experience and role, the servant leadership variables illustrated are love, empowerment, humility, and trust as essential characteristics of servant leadership [5] [10].

3. Methodology

Servant leadership, as a practical leadership model, is applied differently depending on the organizational context and structural demands [4] [17]. In industries such as healthcare, where care delivery, empathy, and service are central to operations, servant leadership emerges as a relevant and effective approach [1] [8]-[10]. Unlike corporate or profit-driven sectors, healthcare organizations operate within a framework that requires leaders to be ethically grounded and service-oriented to ensure patient outcomes and team cohesion [8] [9] [12] [18].

This study prioritizes the healthcare sector as the primary site for applying and evaluating servant-leadership [19] [20]. The findings are informed by a qualitative

synthesis of scholarly literature, including case studies, systematic reviews, and theoretical works that highlight the impact of servant leadership on organizational culture, team performance, and ethical practice [2] [11]. These peer-reviewed sources provide high-level evidence that servant leadership enhances trust, psychological safety, and morale within healthcare teams [1] [2] [10] [15] [16].

Academic sources also provide historical and conceptual grounding for this analysis [1] [10] [21]. Foundational leadership theories, when viewed through the lens of servant leadership, help to illustrate its adaptability and relevance in modern, complex systems [1] [3] [5] [6] [13]. **Table 1** summarizes the integrative criteria used to identify evidence-based contributions across the scholarly literature.

Table 1. Source categorization of research design and methodology.

Categorization of Sources		
Primary and Secondary Sources	Number of Sources	Key Terms
Academic Journals	9	behavior, characteristics, empowerment, encouragement, follower, gender, healthcare, influence, job satisfaction, leadership style, leadership theory, organizational, performance, performance, policy, power, service, servant leadership, servant leadership traits, supportive, trust
Books	7	behavior, community, context, culture, decision-making, dysfunction, effectiveness, empathy, empowerment, followership, gender, group, healthcare, leadership, management, power, productivity, relationships, respect, servant, serving, support, trust, vision, vocation

4. Conceptual Framework: Organizational Culture

When considering leader behaviors from a managerial perspective, Drucker [6] and Schein [14] share similar views regarding their impact on organizations. Edgar H. Schein's [14] third edition of *Organizational Culture and Leadership* identifies the impact of conceptualizing organizational culture in a global context [20]. His personal experience in consulting throughout the 2000s provides real-world applications for organizational leaders to understand and define their culture [14]. Effective culture management by leaders begins at the top of the organizational hierarchy [21]-[24], as illustrated by Drucker [6] and Schein [14]. Modeled behaviors [14] and attitudes [6] influence performance, culture, and relationships [7] [14] [25] [18].

The significant emphasis on the scope of organizational culture as an underlying barrier to group conflict in all industries relates to the effectiveness of servant leadership, not only in healthcare but across all sectors [9] [12] [19] [20] [24]. Schein [14] emphasized that leaders must understand their organization's culture to lead the organization effectively to success. Leaders must communicate transparently when changes occur [10] [15] [22]. This approach holds power within an

organizational culture based on variables that are crucial to effective leadership [14] [18]. Schein [14] provides leaders with a conceptual model that expands his theory [5] [13] on how culture functions within an organization and shifts into why and how leaders directly influence culture [15] [23]-[25].

5. Findings

Within healthcare and other industries, culture is influenced by groupthink, shaping both small and large groups of employees [14]. Negative behaviors are not only experienced by those who work in a healthcare organization; patients also witness and feel the consequences of such behaviors [2] [7] [16]. Leaders who exhibit a servant leadership model demonstrate strong moral and ethical standards [1] [8] [9] [22], thereby strengthening the organizational culture by setting a positive example.

One study employed a qualitative analysis approach to evaluate ten healthcare managers across the healthcare field, including physicians, senior/executive leaders, and nursing leaders [24]. Quantitative data were also analyzed within groups of leaders who identified themselves as servant leaders [20]. Limitations were noted based on individual experiences, biases, and perceptions of servant leadership, which may skew the data collected [20].

5.1. Followership and Servant Leadership

Kellerman [7] outlines the power shift from the leader to the follower in her book *Followership*, removing the leader-centric mindset when considering the leader-follower relationship. Followership [7] is an ongoing research topic within the field that closely connects to the characteristics of servant leadership. Researchers have reported a shift in power from leaders to followers in the context of servant leadership. Kellerman [7], like Northouse [5], acknowledges the impact that context, situations, and culture have on the relationship between leaders and followers. For authority to transition from leader to follower, the environment and culture must align [7]. The size of an organization is also a factor in the leader-follower relationship, with barriers including groupthink, distance, accessibility, and engagement [7] [13].

Can the CEO of a global organization successfully build a relationship with a VP across the sea at another location [17] [20]? Although possible, the difficulties in this context highlight the practical considerations of followership [7] [13] [21] and the effectiveness of servant leadership [1] [9] [10]. This is evident in healthcare organizations. The distance between executive and front-line leaders in a hospital system may facilitate a more challenging approach to followership and servant leadership, but it can be overcome [6] [8] [11] [24]. Greenleaf [1] notes that servant leadership extends beyond the leader, empowering those they serve, giving followers institutional power and authority [7], and fostering positive outcomes within the community, such as interdependence and individual growth [3] [5] [7] [17] [25].

When considering each of these variables, the connection to healthcare becomes evident [11] [12] [16] [25]. Irving [10] illustrated a positive correlation between job satisfaction and team effectiveness, particularly in relation to servant leadership behaviors. This quantitative research demonstrates that servant leadership has a positive impact on a team, regardless of the industry, resulting in higher employee engagement, satisfaction, and performance [6] [11] [16] [17]. Leaders who prioritize their followers' needs, emotions, pressures, and empowerment [7] ahead of their own demonstrate the values of servant leadership, which, as shown in current studies, is effective and has a positive impact on follower satisfaction [1] [2] [16].

Such development within a team sets the stage for leader development, future casting, and a growth mindset as core values and behaviors within the team unit [2] [10] [17]. Each of these is modeled using a servant leadership approach to achieve team effectiveness [10]. Many authors have employed research instruments such as the Organizational Leadership Assessment, Team Effectiveness Questionnaire, and Servant Leadership Assessment Instrument, in addition to evaluating servant leadership themes supported by a historical literature review [1] [4] [5] [10] [11]. These methods support ongoing leader and follower development across various industries [5] [7] [14].

5.2. Servant Leadership Characteristics

In the healthcare industry, patient care is at the heart of an organization's mission, vision, and values. Without patients, there is no healthcare system. Striving to deliver positive outcomes, satisfaction, and experience for each patient is essential for successful operations and, above all, for the common good [1] [9] [16] [19].

Pearson [16] argued that in healthcare, how a leader treats an employee directly impacts the patient receiving care from that employee. In this study, seven servant leadership traits [16] [17] were identified as having a positive impact on the effectiveness of caregivers in providing care to patients:

- 1) Emotional healing
- 2) Creating value for the community
- 3) Conceptual skills
- 4) Empowering
- 5) Helping subordinates grow and succeed
- 6) Putting subordinates first
- 7) Behave ethically [16].

The concept of compassion is not universally agreed upon in the literature [11] [13] [16] [19] [20]. Although compassion in leadership [11] is not a new concept, it is a vital trait in servant leadership and for healthcare workers [1] [11]-[13] [16] [20] [21]. Six overlapping behaviors and characteristics have been consistently identified as essential among action themes in various literature reviews [13] [16] [19] [20] [22]. Pearson [16] describes these behaviors and characteristics in the follower excerpt from his dissertation findings as follows:

The findings isolated six behavior and action themes that best exemplify the purpose of servant leading: support employee growth—supportive, concerned for employee well-being—compassion and empathy, responsive to employee behavior—listening, resolving employee problems—integrity and trust, accountable to cultural expectations—integrity, and prioritize the employee first—humble ([16]: p. 2).

5.3. Servant Leadership in Practice

Furthering these indications of effectiveness, the article “Servant Leadership in Healthcare: A Pilot Study” [8] presents a qualitative and quantitative analysis, which examined the experiences of healthcare workers with servant leadership. Numerous studies have interpreted data that support the significance of training and knowledge in the study of servant leadership in the healthcare industry for healthcare leaders and educators [7] [18] [19] [21]. He [8] and other authors [2] [11] [23] determined that gender, work experience, and years of experience are significant factors that impact the effectiveness of servant leadership in healthcare.

In one study [8], men scored similarly to women in terms of followers’ experience and how leaders view themselves as servant leaders. Alternatively, when evaluating data from respondents with greater experience, the scores showed a reduction in reported servant leadership characteristics [8]. Respondents who indicated having been in healthcare leadership for a longer time reported higher servant leadership scores [8] [17] [23] [25]. Data provide an alternate view of leaders with servant leadership characteristics based on their years of experience, gender, and leader-follower relationships [2] [4] [7] [8] [11] [22]. While the healthcare industry has a higher proportion of women [8] [9] [16] [21], as demonstrated by the respondent results in this study, with a female-to-male ratio of 75.8% to 24.2% [8], all emerging leaders bring valuable servant leadership characteristics to the field of leadership [1] [2] [4] [9].

6. Effective Leadership Development

Furthermore, Gaskell [22] defines how those who use servant leadership experience different expectations of their leadership style, prioritization of follower success, and empowerment, as well as a preference among followers to work under the leadership of a servant leader, as found in additional research studies [2] [10] [22] [23]. This study incorporates feedback from 100 leaders and over 400 employees, reporting findings of higher effectiveness in female leaders compared to their male counterparts through the application of servant leadership theory [22]. The quantitative analysis in this study indicates that follower performance was higher and servant leadership behaviors were encouraged among the team [22]. Encouragement through public recognition of the achievements of high-performing women in the workplace has been identified as a strategy for advancing women in leadership roles [11] [22]. Implementing such strategies for all emerging leaders, regardless of gender, empowers them to develop confidence and increases the

likelihood that aspiring leaders will apply for higher-level roles [2] [11] [20] [21].

The research presented in this article reveals that in male-dominated leadership teams, women are less likely to apply for leadership roles [11] [19] [21]. This highlights the importance of male leaders demonstrating servant leadership behaviors in partnering with female counterparts to encourage and support their advancement in senior leadership roles [2] [11] [19] [20]. The effectiveness of senior leaders who leverage servant leadership with a return on investment in higher-performing teams [1] [10] [18] [20]. Prioritizing the training and development of emerging leaders enables them to embody the modeled behaviors of servant leadership in their own leadership [1] [5] [11] [17].

The effectiveness of servant leadership in the healthcare industry aligns with Greenleaf's [1] research, among others [4] [8]-[10], on social responsibility and consideration for marginalization and less privileged populations, such as those in underserved communities without access to basic healthcare [12] [18]-[20] [24]. In the healthcare field, challenges arise from several factors. Healthcare leaders face external forces, including patient demand, laws, and high healthcare costs [17] [18] [20] [23] [24]. The COVID-19 pandemic compelled healthcare leaders and providers to adapt the way patients receive care, and they must serve as role models for their subordinates to achieve complete buy-in [20] [21]. Healthcare leaders are challenged to effectively lead and develop teams in environments that require empathy, compassion, and patient-centered care [13] [15] [16] [21] [24]. Pearson [16] notes that this transition requires healthcare organizations to reassess how leaders are qualified based on the skills, character, and behaviors associated with servant leadership, as also determined by other studies included in this article [10] [12] [18] [21] [25].

7. Limitations of This Review

The limitations of this study include the higher proportion of female respondents compared to male respondents in our sample [8] [11] [22]. Consideration of the potential biases of skill and character expectations of each gender in leadership roles and servant leadership characteristics [4] [11] [22]. Felix [8] suggested that years of experience, effectiveness, characteristics, and behaviors are key constructs that influence servant leadership in the healthcare industry. Future research on the efficacy of male versus female servant leadership at each level of management in the healthcare industry will further examine the characteristics that demonstrate servant leadership [2] [11] [21] [22].

Limitations and weaknesses to note throughout the research on the effectiveness of servant leadership in healthcare include significant disparities in gender, age, experience, and roles, as identified in the following articles [2] [10] [11] [18] [22]. These findings illuminate an essential aspect of healthcare leadership and the growing popularity of servant leadership in the industry. Gaskell's article [22], "Women are Natural Servant Leaders, but Need Encouragement to Take on the Role," highlights research identifying women as more likely to deliver servant

leadership styles positively in board and senior-level positions, which leads to greater success for organizations in all industries.

The intended audience of this historical review of servant leadership in health care is first females, offering encouragement in career advancement into senior roles, and males, with encouragement to acknowledge and support the strengths women leaders hold in servant leadership and the positive effects this leadership style has on an organization's performance [4] [11] [22]. Although this article leans heavily on the construct of gender, the outlined opportunities for encouragement, support, and diversity in leadership support the argument that servant leadership is a practical approach to the growth and development of emerging leaders in various constructs, such as stage of experience, industry, age, gender, and skill set [11]-[13] [23].

8. Future Research

A systematic study on the effectiveness of the relationship between leaders and followers when servant leadership is utilized, although currently studied, still leaves a gap in understanding how leaders may employ servant leadership in a healthcare setting to support this work [10] [14] [17] [21] [25]. The studies evaluated in this article highlight the growing body of literature on servant leadership within the healthcare industry, which supports future research on its effectiveness, methodology, framework, and conceptualization in the sector [8]-[12] [25]. Healthcare requires a servant character among all workers and lends itself to a higher interest in the leadership sector [6] [10] [18] [25]. Studies have demonstrated the positive outcomes of servant leadership in the healthcare industry, including improvements in organizational culture, leader-follower dynamics, patient satisfaction scores, quality of care, and safety [1] [7] [18] [25].

The groundwork for servant leadership characteristics and behaviors embedded in a business management approach demonstrates the ongoing development of leadership theory, revealing new insights and perspectives on its effectiveness [1] [2] [4] [7] [14]. Servant leadership fosters leader-follower relationships, empowers followers to contribute to organizational success, and has a positive impact on societal and common good within the healthcare industry, ultimately leading to improved population health and patient outcomes [3] [7] [14] [20] [24] [25].

Further research is recommended to compare healthcare leader-follower relationships in the context of the COVID-19 pandemic [21] [24]. Continuing this specific research topic offers consideration for evaluating modeled servant leadership behaviors, such as emotional intelligence [15] [25], mentorship [7], open communication, and growth and development [5] [10] [23], which impact the effectiveness of frontline healthcare workers during and after the pandemic [21] [22]. In recommending a comparative analysis that examines the impact of societal challenges and norms [11] [22] on leadership in the healthcare industry, there is a need for more depth and understanding available to equip healthcare leaders with models and frameworks [1] [5]-[7], like servant leadership [8] [9] [17], to be

successful.

Delivering Positive Outcomes

In healthcare, servant leadership leads to a reduction in burnout, increased creativity and innovation, and a focus on equity and diversity, while also fostering relationships between hospitals, associates, and physicians [10] [21] [24]. The themes within these studies align with servant leadership conceptualizations, including cultivating relationships, promoting equality, giving recognition, fostering collaboration, and developing employees [1] [6] [11] [14] [20] [21] [25]. The antecedents of servant leadership encompass the personal attributes of servant leaders, including age, gender, and rank [10] [12] [13] [15] [22]. Further research considering these variables and their effectiveness may reveal additional weaknesses and strengths of servant leadership as a practical approach in the field of leadership, particularly in the healthcare sector [1] [5] [19] [22] [24].

9. Significance in the Field of Leadership

The evaluation of the transitional change in corporate leadership over 40 years demonstrates a shift from traditional power and authority to empowerment, trust, value, and follower development [1] [4] [15] [19] [20]. Continued research in this area enables healthcare leaders at all levels, front-line workers, and emerging healthcare leaders to understand the behaviors, values, and impact of servant leadership in achieving positive patient outcomes and fostering leader-follower relationships that lead to team effectiveness [10] [16] [18].

The literature reveals a connection between historical leadership methods in healthcare, such as the top-down approach fostered by military models, and the current expectations followers and leaders have for culture, relationships, and growth opportunities [5] [13] [24] [25]. A recent period of significant stress in leadership transitions within healthcare was the COVID-19 pandemic [23] [24]. This is a prevalent challenge in the healthcare industry. Through servant leadership approaches, such as empowerment, trust, respect, and equity, the healthcare industry relies on leaders who embody a servant's heart [11] [14] [18].

This article highlights the generational differences in acceptable leadership models [2]. Baby boomers' acceptance and comfort with top-down or command-and-control leadership methods differ from those of millennial and Gen Z followers and leaders [1] [4]-[6]. Based on this indication, the argument is that younger generational leaders and followers see military and hierarchical styles as unacceptable [5] [13] [21] [25]. Further indicating the need for a new leadership era in the healthcare industry [21], this evolution emphasizes the importance of servant leadership skills, behaviors, and characteristics, including social awareness, fostering respect, empowering teams, and evaluating organizational gender biases [12] [14] [20] [22] [25].

“The evolution of modern health leadership must be implemented with plans to mitigate the related risks. The behaviors that are tolerated during times of stress

become the value system of any organization” ([23]: p. 332). Higher levels of emotional intelligence support environments with less fear and anxiety, as well as greater effectiveness of servant leadership behavior through coaching, adaptability, respect, transparency, and civility [15] [18] [23] [25].

Research indicates that International studies have been conducted using a mixed-methods approach on women in leadership roles within healthcare [10] [17] [18] [20]. In the article “Advancing Women in Healthcare Leadership: A Systematic Review and Meta-synthesis of Multi-sector Evidence on Organizational Interventions,” [17] the authors argue the necessity of organizational leaders creating diversity in their workforce. Recommendations encourage and promote interventional methods for organizational change to diversify the leadership workforce within healthcare, particularly in terms of gender [17]. The studies included in this article provide practical information and actionable steps for women, based on evidence-based research, to advance in healthcare leadership and other career goals, shifting the focus from barriers to solutions [11] [17] [22].

10. Conclusions

Developing a growth mindset shifts the viewpoint from a fixed perspective on barriers that prevent advancement to a focus on personal behavior and actions that facilitate the achievement of goals [3] [13] [16]. Ultimately, it stands to reason that organizations, which often lack female leaders in senior-level roles, have an opportunity for development to improve leader effectiveness and productivity within the organization [2] [10] [11] [14] [15] [19] [20]. In researching the specific barriers to advancing women into senior roles, [12] argue that prioritizing gender equality provides organizations with clear, compelling, and ongoing methods for diversifying their leadership. This leads to improvements in the effectiveness and success of the organization, aligning with its mission, vision, and values [12]. While healthcare employs a greater number of females than males, this study illustrates that the trajectory of advancing women into senior leadership roles is slow [12].

Considerations such as policies that support a family life-work balance through parental leave, hybrid work schedules, flexibility, and enhancing allyship for men to advocate for their female peers in role advancement are suggested to recruit and appeal to high-performing individuals for leadership roles [12]. Additional findings indicate that “policymakers must devise policies and initiatives that are feasible to execute within the current administrative frameworks” ([22]: p. 76). Whether in government or industry, policy decisions affect not only employees and leaders but also consumers, who are patients in healthcare. Sustainability is key to the effectiveness of servant leadership, and the administration bears this responsibility. As administrative leaders, goals, capabilities, infrastructure, and risk of defiance must be evaluated [7] [16] [22] [25]. The historical evaluation of servant leadership in healthcare within this review focused on leadership behaviors, qualities, and effectiveness [8] [10] [16] [18] [20]. However, there is considerable literature to focus on women in healthcare leadership who utilize servant

leadership in a more effective manner than men [8] [10] [11] [20]. However, the aim is to identify the underlying characteristics of servant leadership within the healthcare sector, as noted throughout this study.

The available literature suggests that further research is warranted to investigate the relationship between leadership effectiveness and servant leadership characteristics in healthcare settings, such as behavior, culture, empathy, teamwork, empowerment, EQ, and serving others, which are essential characteristics in the service industry [2] [7] [13]-[15] [17] [25]. As this study also indicates, the continuation of this research will improve perceptions of servant leadership biases based on various constructs, such as gender and age, and provide evidence-based strategies to improve organizational performance through effective leadership methods [11] [12] [14] [16] [23].

Drucker [6] considered the field of leadership and its effectiveness in combination with management practices:

“Leadership is the lifting of a man’s vision to higher sights, the raising of a man’s performance to a higher standard, the building of a man’s personality beyond its normal limitations. Nothing better prepares the ground for such leadership than a spirit of management that confirms in the day-to-day practices of the organization strict principles of conduct and responsibility, high standards of performance, and respect for the individual and his work” (p. 159-160).

Additional questions related to the effectiveness of servant leadership were developed during the research and analysis of the sources for this study. Challenging historical theories, current experiences, and perspectives set the stage for scholars to expand and refine servant leadership and other leadership theories across diverse industries. Construction versus healthcare, tech versus automotive: How is servant leadership, if at all, modeled in these industries? Is there a demand for servant leadership in male-dominated industries? The limitations of the historical literature review pose potential weaknesses in the above-recommended research opportunities.

Conflicts of Interest

The author declares no conflicts of interest.

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