Leadership Styles in Health Crisis Management

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Received: 16/04/2023; **Revised:** 23/11/2023; **Accepted:** 26/11/2023

Summary: The main objective of this study was to investigate leadership styles in health crisis management among healthcare personnel in governmental hospitals in Gaza strip. **Methods:** The researcher utilized a cross-sectional observational analytical design. The study sample consisted of 270 individuals from three major governmental facilities in Gaza: Al Shifa Medical Complex, Nasser Medical Complex (NMC), and Europian Gaza Hospital (EGH). The researcher utilized a modified questionnaire drawn from two questionnaires prepared and used in two prior investigations to collect data. A team of specialists verified the questionnaire, and a pilot trial with 30 participants yielded a Cronbach alpha coefficient of 0.920.
Results: The study revealed that all transformational, transactional, and charismatic leadership styles are helpful during health crises in hospitals. **Conclusion**: Though no theory or publication can guarantee that one leadership style leads to effective CM and another does not, there are several key characteristics that can serve as a guide in choosing the most appropriate style, hence a diversity of leadership styles is advised.

Keywords: Health Crisis Management; leadership styles; Transformational; Transactional; Charismatic

Jel Classification Codes : H12 ; I18 ; M12

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I- Introduction :

Leadership and crisis are inextricably linked in that both concepts have a tendency to complement one another (Anwar, 2017). No one can dispute that one of the critical leader's duties and difficulties during a crisis is to restore normalcy, despite the negative effects that occur during the crisis. A successful leader's response is critical for an organization's performance to continue, especially during a crisis. Responding to crisis risks is one of the most important duties of a good leader (Anwar,2017).

On the other hand, despite the negative effects of the crisis, there are some positive effects of the crisis when managed properly, such as the opportunity for staff training, skill acquisition, and gaining different experiences, the crisis offers organizational change and growth opportunities, and it is a chance to reform structures at the organization and put long-standing policies and rules in place. (Ozdemir& Balkan, 2010).

As a result, it is strongly encouraged to manage less and lead more while dealing with or solving any "problem or crisis" (Hassan and Rjoub, 2017). It is critical to distinguish between leadership and management. Many studies have been conducted to demonstrate that in times of crisis, we require leaders rather than managers. Leadership may successfully motivate followers to perform, resulting in improved outcomes and efficiency. The manager is someone who does things correctly, but the leader is someone who does the right things. Managers achieve objectives and monitor resources, whereas leaders connect with followers in order to drive the business's operations; as a result, leaders are in charge of crisis management (CM). " (Anwar, 2015).

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The leadership styles of decision-makers and leaders in hospitals, particularly during times of health crisis, may have an important influence in the crisis response process and the quality of health care given, particularly in our scenario in Palestine in general and the Gaza Strip (GS) in particular. Where crises and tragedies are constantly close because to the Israeli siege put on the GS for more than a decade, including brutal conflicts in 2008, 2012, 2014, 2021, and 2022, and hospitals were among the most institutions that have suffered and continue to suffer. The study's overarching goal is to investigate leadership styles in health crisis management among healthcare personnel in governmental hospitals in the Gaza Strip.

II- Literature review:

It is difficult to label someone a "leader" if they lack leadership attributes such as having a clear vision, being able to unify and activate others, and making a difference in their performance. Leaders paint the vision of the future. (Tutar, 2004).

2.1 Theoretical definitions:

Crisis: Stress and crisis are frequently associated. The crisis is a complex system, both at the family and community levels, and when this system fails, we must make swift decisions, but we may not be able to pinpoint the fundamental cause of the crisis right once. (Bundy, 2016). According to Fenera and Cevikb (2015), a crisis is "a situation in which the basic structures, values, and norms are negatively affected due to an unexpected situation."

Crisis management: Crisis management refers to the activities and decisions done by an organization in response to an unforeseen incident that may cause damage to the company, the public, or its stakeholders. (Bundy, et al. ,2016)

Leadership: Leadership refers to a person's abilities to influence the rest of a group of people to achieve a goal or set of goals. (Kargas, & Varoutas, 2015).

Leadership style: Leadership style is the way and manner in which the leader impacts and leads the followers, motivates them, and affects their performance, and it includes both the leader's explicit and implicit behaviors (Newstrom & Davis, 1993).

The researcher used two questionnaires established by (Anwar, 2017) and (Kirilina, 2017) to operationally characterize the three leadership styles: transformational leadership, transactional leadership, and charismatic leadership.

2.2 Leadership styles:

Table (1): Transactional, Charismatic, and Transformational Leadership and the Conditions Conducive to their Predominance.

Leadership	The basic assumptions of leadership style	Conditions conducive to the predominance of the Leadership pattern
Transformational	Subordinates follow a leader who inspires them. To achieve good results, a leader with charisma should have a vision and passion enthusiasm and energy is the way to get things done	Situations where the basic level of anxiety is not high and attention is given to the developmental needs of the lead. In general, this leadership pattern depends more on the leader's view of him/herself as transformational and less on the organizational context than do transactional and charismatic leadership
Transactional	It's necessary to follows the rewards/punishments system. Control is needed (Employees are not motivated by themselves)	Routine situations where the basic level of anxiety is not high, there is no acute sense of impending crisis or major change
Charismatic	All that is needed to create followers are charm and grace. The fundamental need of leaders is Self-belief. Leaders with personally admire followed by others	Situations where there is a high anxiety level, conditions of crisis and change that intensify processes of projection, transference and attribution

(Changing mind.org,2018). Popper, M., & Zakkai, E. (1994)

III– Methods and Materials:

5.1 Design of the Study:

The observational analytical cross-sectional design was determined to be the best fit for this research. A modified structured questionnaire was employed in this study to reach out to the three main hospitals in GS, providing this study with a solid foundation for generalizing the results.

5.2 Population of the Study:

The population of the study consisted of all healthcare providers who are:

- Working in critical areas (ED., Operation room (OR), and Intensive care units (ICU):
  - ✓ Physicians
  - ✓ Nurses
  - ✓ Paramedics (Anesthetists, OR Technicians)
- With managerial positions:
  - ✓ Heads of departments: who are responsible for leading the health care providers directly at the critical departments and have a direct clinical role in their departments besides their managerial tasks.
  - ✓ Supervisory managerial positions (supervisors, nursing directors and medical directors) who are responsible for follow-up and supervision on the three critical departments directly.
- Meeting the qualifying requirements in the three selected hospitals (Al Shifa Medical Complex, NMC, and EGH).

According to an administration of a selected hospital that was recently interviewed by the researcher, the total population is 582.

5.3 Sample and Sampling:

The researcher utilized a proportionate stratified sample since it was the best sampling method for this group of healthcare practitioners working in crucial locations at hospitals.

The study's population is 582 people. The sample size of 232 participants was calculated using Raosoft® software (http://www.raosoft.com), but the researcher distributed questionnaires to 270 participants to obtain more accurate study results, which were distributed based on the proportion of the hospital population to the total population (Table 2).

The number of responders was 250 out of 270 (92.6% response rate), which was greater than the sample size.

5.4 Instrument of the Study:

The researcher used two questionnaires developed by Anwar (2017) who had a study entitled " The Role of Effective Leadership in CM: Study of Private Companies in Kurdistan " and Kirilina (2017) who had a study entitled " Leadership Approach in Small size Enterprises during crisis time–A case study of two enterprises operating in Russia " then the researcher has made his modifications to make it suitable to this study which will be conducted in Gaza and sent the questionnaire to two Bilingual translators to translate it to the Arabic language to make it more understandable for the participants.

5.5.1 Validity of the Instrument:

Face and content validity: The questionnaire was distributed to a panel of ten experts to evaluate its clarity and relevance to the study's aims. All feedback on the instruments was taken into account. In addition, before beginning data collecting, a pilot research was carried out.

5.5.2 Reliability:

Internal consistency: The internal consistency of an instrument was used by the researcher to assess its dependability. To assess internal consistency, the researcher evaluated the correlation between each statement and the dimension to which it belongs, then assessed the correlation between each dimension and the scale's overall score. The findings are shown in (table 3).

From Tables (3) and (4), it was evident that an excellent correlation existed between the statement and the dimensions of the scale.

Split half: The researcher computed the correlation coefficient between the total scores of odd statements and the total scores of even statements, which was (R = 0.0.967), and then applied the equal length Spearman-Brown equation, which was (R = 0.983).

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Cronbach alpha: A Cronbach alpha coefficient is used to assess the reliability of the questionnaire between each field and the mean of all fields. The normal coefficient alpha value ranges between 0.0 and + 1.0, with a higher value indicating more internal consistency. Most purposes consider dependability coefficients greater than 0.7 to be appropriate.

The Cronbach alpha coefficient was determined, as stated in Table (5) above, and the results showed that the range was between 0.934 and 0.945, with the overall dependability equaling 0.920. This range is deemed outstanding; the result assures the questionnaire's dependability.

5.6 Pilot Study:

Before beginning data collecting, a pilot study was undertaken to identify areas of ambiguity and to assess the validity and applicability of the questionnaire, identify faults in phrasing, forecast the response rate, and calculate the actual time required to finish the questionnaire. To perform the pilot study, the researcher picked 10% of the participants from the study's target group. As a result, the pilot research had 30 participants.

5.7 Ethical considerations:

The researcher agreed to follow all ethical guidelines for conducting health-related research. The Helsinki committee in Gaza granted ethical approval (No. PHRC/HC/409/18).
Every participant in the study was given a thorough description of the study's objectives and confidentiality. Everyone in the study population was told about the research's voluntary participation. All ethical considerations, respect for persons and human rights, and truth-telling were respected. Confidentiality was granted and adhered to.

5.8 Statistical Analysis:

The researcher analyzed the gathered data using the Statistical Package for Social Science (SPSS). Statistical tests for descriptive and analytical purposes were utilized. Simple statistics such as Mean, Standard Deviation, and Percentage were employed. Furthermore, the Pearson correlation test was used to determine correlation between variables, while the T test, ANOVA, and Scheffe test were employed to determine differences between variables.

IV-Results and discussion :

6.1 Descriptive statistic of Leadership styles and health crisis management domains:

This study examined three major leadership styles: transformational leadership style, transactional leadership style, and charismatic leadership style, with the researcher attempting to determine the effectiveness of these types during a health crisis. The tables below reflect research participants' perspectives on leadership styles and health crisis management.

When survey participants were asked about their perceptions of transformational leadership style, the majority (64.8%) stated that leaders convey persuasive ideals and aims. Leaders in Q4, followed by (Q3), have a high level of pride, respect, and trust, accounting for 63.8%. and (Q1) leaders create true pride in employees for being connected with them, accounting for 63.0% of the total. The statements (Q6) "Leaders see the future in an optimistic way" and "Leaders seek different perspectives during problem-solving" received the lowest proportion of votes (52.6%-54.8).

According to Table 7, health care professionals claimed that Leaders avoid making choices, which received the highest percentage (66.6%) (Q8), followed by (Q4) Leaders are available when required, which received 63.6%. The lowest percentages of opinion belonged to (Q1) "Leaders assist employees in their efforts" and (Q10) "Leaders focus on results and measure success according to the organization's system of rewards and punishments" (51.6%-54.0, respectively).

About their opinions of health care providers regarding charismatic leadership style, they informed that leaders show a sense of power and confidence which elected the highest percentage (60.8%) (Q6), followed by(Q4) Leaders consider the moral and ethical consequences of their decisions which account 58.2%. and (Q7) Leaders direct employees to look at managerial problems from many different perspectives accounting 57.6%. The lowest opinion percentage belonged to the

(Q1) “Leaders gather followers through dint of personality and charm, rather than any form of external power or authority”, (Q2) " Leaders are effective in representing employees to higher authority" and (Q9) “leaders are willing to sacrifice everything in order to show their commitment” (47.8%-50.0 respectively).

As presented in table 9 about the opinions of health care providers regarding health crisis management, they informed that leaders take the required actions to coordinate and communicate with the various departments which elected the highest percentage (62.2%)(Q2), followed by (Q10) the Leaders remain steadfast in the field of work during the crisis which accounts 61.0%. and (Q8) Leaders can build and maintain good relations with employees at the time of crisis accounting 60.6%. The lowest opinion percentage belonged to the (Q7) “Leaders share information from managers to personnel and vice versa” and (Q6) “Leaders are gathering data from quality and quantity view for safety equipment in crisis” (56.4%-57.6 respectively).

The researcher attempted to find the association among variables, therefore the correlation analysis was implemented (Table 10). It was found that the value of Pearson correlation for charismatic leadership = 0.849*, $p < 0.01$ therefore there is a positive and significant association between charismatic leadership with health crisis management, the value of Pearson correlation for transformational leadership = 0.784*, $p < 0.01$ therefore there is a positive and significant association between transformational leadership with health crisis management, and the value of Pearson correlation for transactional leadership = .0.815*, $p < 0.01$ therefore there is a positive and significant association between transactional leadership with health crisis management.

The researcher utilized multiple linear regression analysis to find the most effective and suitable leadership style during health crisis management in order to manage the crisis (Table 11). It was found that the value of B for transformational leadership 0.183, $p < 0.001$ this indicated that transformational leaders are suitable and effective leader during health crisis management at hospitals, accordingly the first research objective was supported which stated that ‘Transformational leaders are effective during health crisis in hospitals’’.
The value of B for charismatic leadership 0.480, $p < 0.001$ this indicated that charismatic leaders are suitable and effective leader during health crisis management at hospitals, accordingly the second objective was supported which stated that ‘’Charismatic leaders are effective during health crisis in hospitals’’.
Finally, the value of B for transactional leadership 0.357, $p < 0.001$ this indicated that transactional leaders are suitable and effective leader during health crisis management at hospitals, accordingly the third objective was supported which stated that ‘transactional leaders are effective during health crisis in hospitals’’.

V- Conclusion:

It is necessary for hospitals to have effective leaders, who can manage and lead the hospital’s response appropriately to any crisis surrounding them, the response of an effective leader is vital for the continuity of the performance during the crisis period and the leader's leadership style in the hospitals may play an essential role in the crisis response process and quality of health care provided. Few studies have been performed worldwide to understand leadership styles in health crisis management. This study was carried out to explore the leadership styles in health crisis management, and to describe the effectiveness of transformational, transactional, and charismatic leadership in health crisis management among healthcare providers who are working at the critical departments at governmental hospitals in GS (Al Shifa, NMC and EGH). The design of the study is the observational analytical cross-sectional design and the number of respondents was 250 out of 270 (response rate was 92.6%) .
The study found that all of the transformational, transactional, and charismatic leadership styles are effective during health crises in hospitals. There is no theory or author that can guarantee that there is a particular leadership style itself leads to effective CM and another style don’t, but there are key factors that can be a guide in determining the most suitable style so, a variety of leadership styles is recommended.

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- Appendices:

Table (2): Sampling and Response rate

The hospital	*Population*	*The proportion of hospital pop. to the total Pop. (582)*	*No. questionnaires to be collected (distributed)*	*Returned questionnaire*	*Response rate*
Alshifa medical complex	267	45.8%	124	105	84.6%
NMC	165	28.3%	76	75	98.6%
EGH	150	25.8%	70	70	100%
Total	582	100%	270	250	92.6%

Table (3): Correlation between each statement and the dimension it belongs to.

Dimensions							
Transformational Leadership		Transactional Leadership		Charismatic Leadership		Crisis Management	
No.	Correlation	No.	Correlation	No.	Correlation	No.	Correlation
1	0.807**	11	0.672**	21	0.554**	31	0.890**
2	0.801**	12	0.749**	22	0.788**	32	0.871**
3	0.736**	13	0.652**	23	0.843**	33	0.860**
4	0.844**	14	0.752**	24	0.632**	34	0.882**
5	0.780*	15	0.826**	25	0.781**	35	0.851**
6	0.788**	16	0.293//	26	0.748**	36	0.776**
7	0.622**	17	0.187//	27	0.614**	37	0.743**
8	0.642**	18	0.083//	28	0.807**	38	0.828**
9	0.737**	19	0.721**	29	0.619**	39	0.836**
10	0.731**	20	0.655**	30	0.749**	40	0.859**

** = significance at 0.01 *= significance at 0.05 // = not significant

Table (4): Correlation between each dimension and total score of the scale

Dimension	Correlation	P value
Transformational Leadership	0.862	**
Transactional Leadership	0.871	**
Charismatic Leadership	0.932	**
Crisis Management	0.935	**

** = significance at 0.01

Table (5): Cronbache alpha coefficient

Dimension	Alpha coefficient
Transformational Leadership	0.953
Transactional Leadership	0.950
Charismatic Leadership	0.934
Crisis Management	0.945
Total Scores	0.920

Table (6): Opinion of the study participants about the transformational leadership style

Statement / Transformational leadership	Always	Often	Sometimes	Rare	Never	Mean	S.D.	Weighted %
Q1- Leaders instill genuine pride in employees for being associated with them.	11.6	27.2	38.4	10.8	12.0	3.15	1.14	63.0
Q2- Leaders act in a way that builds and improves employees' respect.	9.6	30.4	36.0	14.4	9.6	3.16	1.09	63.2
Q3- Leaders enjoy a high level of pride, respect, and trust.	11.2	30.8	35.6	10.8	11.6	3.19	1.13	63.8
Q4- Leaders communicate convincing values and goals.	13.6	31.2	30.0	16.0	9.2	3.24	1.15	64.8
Q5- Leaders encourage people to think from a wider and broader perspective.	6.0	22.4	35.6	20.4	15.6	2.82	1.12	56.4
Q6- Leaders see the future in an optimistic way.	5.2	16.8	34.4	23.6	20.0	2.63	1.13	52.6
Q7- Leaders seek different perspectives during problem-solving.	5.2	23.2	30.0	24.4	17.2	2.74	1.14	54.8
Q8- Leaders make innovative and positive suggestions.	6.4	18.8	37.2	22.4	15.2	2.78	1.11	55.6
Q9- Leaders are trying to maximize their teams' capability and capacity.	9.2	22.0	30.0	24.0	14.8	2.86	1.18	57.2
Q10- Leaders are working to change the system for performance development.	10.8	22.4	34.8	17.6	14.4	2.97	1.18	59.4

Table (7): Opinion of the study participants about transactional leadership style

Statement / Transactional leadership	Always	Often	Sometimes	Rare	Never	Mean	S.D.	Weighted %
Q1- Leaders provide employees with assistance for their efforts.	6.0	18.0	27.2	25.6	23.2	2.58	1.19	51.6
Q2- Leaders express satisfaction when employees meet expectation.	5.2	22.4	36.8	22.8	12.8	2.84	1.07	56.8
Q3- Leaders recognize people for their initiative-taking.	4.8	21.2	32.8	26.8	14.4	2.75	1.09	55.0
Q4- Leaders are available when they are needed.	12.4	32.0	28.8	15.6	11.2	3.18	1.17	63.6
Q5- Leaders lead their group in an effective way.	8.8	26.0	42.0	15.2	8.0	3.12	1.03	62.4
Q6- Leaders do not forgive mistakes easily (r).	11.2	22.4	33.3	24.4	8.8	2.97	1.12	59.4
Q7- Leaders delay responding to urgent questions (r).	5.6	20.8	43.6	21.2	8.8	3.06	0.99	61.2
Q8- Leaders avoid making decisions (r).	4.4	16.0	36.0	29.2	14.4	3.33	1.04	66.6
Q9- Leaders prefer to work within the system and to minimize variation in the health organization.	9.2	32.4	32.8	18.0	7.6	3.17	1.07	63.4
Q10- Leaders focus on results and they measure success according to the organization's system of rewards and Punishments.	5.6	18.8	35.2	21.2	19.2	2.70	1.14	54.0

r = reverse statements

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Table (8): Opinion of the study participants about the charismatic leadership style

Charismatic leadership / Statement	Always	Often	Sometimes	Rare	Never	Mean	S.D.	Weighted %
Q1- Leaders gather followers through dint of personality and charm, rather than any form of external power or authority.	3.2	12.0	27.6	35.6	21.6	2.39	1.05	47.8
Q2- Leaders are effective in representing employees to a higher authority.	4.8	15.6	27.2	29.6	22.8	2.50	1.14	50.0
Q3- Leaders support employees who take calculated risks.	1.6	18.4	39.2	26.4	14.4	2.66	0.98	53.2
Q4- Leaders consider the moral and ethical consequences of their decisions.	3.6	24.0	41.6	21.6	9.2	2.91	0.98	58.2
Q5- The Leaders help employees to develop their strength points.	6.0	18.8	34.8	26.0	14.4	2.76	1.10	55.2
Q6- Leaders show a sense of power and confidence.	8.8	30.8	30.0	17.2	13.2	3.04	1.16	60.8
Q7- Leaders direct employees to look at managerial problems from many different perspectives.	4.8	23.6	38.0	22.8	10.8	2.88	1.03	57.6
Q8- leaders have a vision of a successful future for their followers.	2.8	20.4	30.8	26.8	19.2	2.60	1.09	52.0
Q9- leaders are willing to sacrifice everything in order to show their commitment.	5.6	12.8	31.2	26.8	23.6	2.50	1.14	50.0
Q10- Leaders have a verbal eloquence that qualifies them to communicate with their subordinates on a deep, and emotional level.	6.4	26.4	31.2	19.2	16.8	2.86	1.17	57.2

Table (9): Opinion of the study participants about health crisis management

Health crisis management / Statement	Always	Often	Sometimes	Rare	Never	Mean	S.D.	Weighted %
Q1- Leaders have ability in identifying and predicting probable difficulties in crises.	4.4	25.6	36.8	22.0	11.2	2.90	1.04	58.0
Q2- Leaders take the required actions to coordinate and communicate with the various departments.	9.6	31.2	32.0	15.6	11.6	3.11	1.14	62.2
Q3- Leaders take proper actions to set up health and safety system and evaluate the risk management.	7.2	24.4	41.6	17.6	9.2	3.02	1.03	60.4
Q4- Leaders depend on qualified and experienced workforces in crisis.	5.6	28.8	33.2	20.8	11.6	2.96	1.08	59.2
Q5- Leaders share information occurs.	4.4	29.6	37.6	17.6	10.8	2.99	1.04	59.8
Q6- Leaders are gathering data from quality and quantity view for safety equipment in crisis.	4.4	22.4	42.4	18.8	12.0	2.88	1.02	57.6
Q7- Leaders share information from managers to personnel and vice versa.	4.0	22.8	36.8	24.0	12.4	2.82	1.04	56.4
Q8- Leaders can build and maintain good relations with employees at the time of crisis.	6.8	26.4	39.6	17.6	9.6	3.03	1.04	60.6
Q9- The Leaders have the ability to take responsibility and act wisely.	9.6	23.6	35.6	21.2	10.0	3.01	1.11	60.2
Q10- The Leaders remain steadfast in the field of work during the crisis .	10.0	24.0	38.4	16.8	10.8	3.05	1.11	61.0

6.2 The effectiveness of the three leadership styles in health crisis management.

Table (10): Correlation between health crisis management and the predictor variables (leadership styles)

Variables	Mean	SD	Crisis management	Transformational leadership	Transactional leadership	Charismatic leadership
Crisis management	2.98	0.87	1			
Transformational leadership	2.95	0.94	0.784*	1		
Transactional leadership	2.97	0.68	0.815*	0.786*	1	
Charismatic leadership	2.71	0.84	0.849*	0.795*	0.826*	1

* P <0.01.

Table (11): Linear regression to find the most effective and suitable leadership style during health crisis management.

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	0.075	0.120		0.630	0.530
	Transformational style	0.183	0.050	0.197	3.649	0.000*
	Charismatic style	0.480	0.061	0.462	7.807	0.000*
	Transactional style	0.357	0.074	0.279	4.800	0.000*

a. Dependent Variable: Health crisis management
* = significant at 0.001

Referrals and references:

[1] Anwar, K., (2017) The Role of Effective Leadership Styles in Crisis Management: Study of private companies in Kurdistan. Qalaai Zanist Scientific Journal, 2(4)326-338.

[2] Anwar, K. (2015). Impact of Transformational and Transactional Leadership Styles on Job Satisfaction: A Study of Agricultural Businesses in Erbil. Journal of Global Academic Institute Business & Economics,1(1),1-8.

[3] Bundy, J.; Pfarrer, M. D.; Short, C. E.; Coombs, W. T. (2016). "Crises and crisis management: Integration, interpretation, and research development". Journal of Management. 43 (6):1661.

[4] Changing Mind.Org. (Transformational Leadership). On Line. Retrieved From Http://Changingminds.Org/Disciplines/Leadership/Styles/Transformational_Leadership .Htm (Retrieved In August 5, 2018 At 2 PM.).

[5] Changing Mind.Org. (Transactional Leadership). On Line. Retrieved From Http://Changingminds.Org/Disciplines/Leadership/Styles/Transactional_Leadership.Htm (Retrieved In August 5, 2018 At 2 PM.).

[6] Changing Mind.Org. (Charismatic Leadership). On Line. Retrieved From) Http://Changingminds.Org/Disciplines/Leadership/Styles/Charismatic_Leadership.Htm (Retrieved In August 5, 2018 At 3 PM.).

[7] EGH, (2009). The EGH is a great success story. MOH Retrieved from http://www.moh.gov.ps/portal/ [Retrieved in sep. 2, 2018 . 3:00 pm].

[8] Fenera, T., & Cevik, T. (2015). Leadership In Crisis Management: Separation Of Leadership And Executive Concepts. Procedia Economics and Finance, 26, 695-701.

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[9] Hassan, A., Rjoub, H., (2017) The Role of Effective Leadership Styles in Crisis Management: A Study of Erbil, Iraq. International Journal of Economics, Commerce and Management,4(4),107-121.

[10] ISDR. 2006. Lessons for a Safer Future: Drawing on the Experience of the Indian Ocean Tsunami Disaster – Eleven Key Actions for Building nation's and communities' Resilience to Disasters, Geneva, ISDR.

[11] Kargas, A. D., &Varoutas, D. (2015). On The Relation Between Organizational Culture and Leadership: An Empirical Analysis. Cogent Business & Management, 2(1), 1-18.

[12] Kirilina, Y. (2017). Leadership Approach In Small Size Enterprises During Crisis Time–A Case Study Of Two Enterprises Operating In Russia. Turku University of Applied Sciences Thesis,1-66

[13] Newstrom, J.W., Davis, K. (1993). Organizational Behavior: Human Behavior at Work. New York: McGraw-Hill.

[14] OZDEMİR, L., & BALKAN, M. O.(2010) The Positive and Negative Effects of Crisis on Organizations: An Application. Conference Paper. Retrieved from https://www.researchgate.net.[Retrieved in September 1, 2018 . 7:00 Am].

[15] Popper, M., & Zakkai, E. (1994). Transactional, Charismatic And Transformational Leadership: Conditions Conducive To Their Predominance. Leadership & Organization Development Journal, 15(6), 3-7.

[16] Surbhi, S.(2015). Difference Between Transactional and Transformational Leadership. (Key Differences.Com) .Retrieved From Https://Keydifferences.Com/Difference-Between-Transactional-And-Transformational-Leadership.Html

[17] Tutar, H., (2004). Crisis and Stress Management. Ankara: Seckin Publishing.p.105-148.

[18] Yukl, G. (1999). An Evaluation of Conceptual Weaknesses in Transformational and Charismatic Leadership Theories. The Leadership Quarterly, 10(2), 285-305