

# Adaptive Leadership on the Empowering Behavior of Nurse Managers in a Level 2 Hospital

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## ABSTRACT

This quantitative descriptive–correlational study examined the level of adaptive leadership and empowering behaviors among nurse managers in a Level 2 government hospital, as well as their relationship. Data were collected using validated questionnaires covering adaptive leadership dimensions and key empowering behaviors. Findings showed that nurse managers demonstrated a high level of adaptive leadership, particularly in collaborative problem-solving, responsibility sharing, and support for learning, while conflict management ranked lowest. Empowering behavior was rated very high overall, with skill development as the strongest dimension and delegation of authority as the lowest. A strong positive relationship was found between adaptive leadership and empowering behavior, indicating that adaptive leadership significantly enhances staff empowerment. These results support Ronald Heifetz’s Adaptive Leadership Theory and Gretchen Spreitzer’s Psychological Empowerment Theory, highlighting that participative and development-oriented leadership fosters autonomy, competence, and engagement among nurses. Strengthening conflict management and delegation of authority is recommended to further improve empowerment and unit performance.

**Keywords:** adaptive leadership, empowering behavior, nurse managers, psychological empowerment, government hospital

## INTRODUCTION

Healthcare institutions today face constant change, growing complexity, and limited resources, making effective nursing leadership essential. Adaptive leadership enables nurse managers to guide teams through uncertainty, adjust to emerging challenges, and promote learning and innovation, while empowering behaviors such as sharing authority, fostering autonomy, and supporting professional growth create a work environment where nurses feel valued and capable. Together, adaptive leadership and empowerment strengthen teamwork, resilience, and the overall quality of patient care. Leadership in nursing remains central to safe, efficient, and compassionate care, with adaptive leadership gaining attention for addressing complexity and change (Heifetz et al., 2020; Dinh et al., 2020). Nurse managers play a critical role in translating these qualities into practice through emotional intelligence, collaboration, shared responsibility, and continuous learning, alongside empowering behaviors that enhance accountability, decision-making, and staff development (Cho & Park, 2022; Malik et al., 2021; Orgambidez & Almeida, 2021).

The hospital environment presents challenges such as high patient loads, limited resources, and pressure to maintain quality care, which contribute to nurse burnout and affect outcomes (Lasater et al., 2021). Nurse managers who demonstrate adaptive leadership and empowering behaviors can alleviate these pressures by fostering collaboration, encouraging critical thinking, and supporting autonomy among nurses (Shirazi et al., 2022). In contrast, ineffective leadership is associated with low morale, turnover, and compromised patient care (Demerouti et al., 2021; Orgambidez & Almeida, 2021). However, adaptive leadership is not consistently practiced, as some nurse managers still rely on hierarchical styles that limit empowerment. Existing studies have focused more on transformational and transactional leadership, revealing a theoretical gap in adaptive leadership and a methodological gap in local government hospital contexts.

In a level 2 government hospital, challenges such as high nurse-to-patient ratios, workload imbalance, limited

rest, and insufficient support contribute to low morale, absenteeism, and workplace tension. Despite these constraints, some nurse managers demonstrate adaptive leadership through flexibility, open communication, and shared decision-making, fostering trust, motivation, and resilience among nurses. Hence, this study examines the relationship between adaptive leadership and empowering behavior of nurse managers, contributing insights to improve nurse engagement, professional growth, and quality care. The study supports SDG 3 and SDG 8, emphasizing health workforce well-being and decent work conditions, and is strengthened by the researcher's clinical experience, providing practical relevance and a foundation for a Leadership Enhancement Plan to promote adaptive leadership and empowering practices in government hospitals.

## RESEARCH QUESTIONS

This study was to assess the relationship between adaptive leadership and the empowering behavior of nurse managers as perceived by nurses in a level 2 government hospital in Surigao City, Philippines for the year 2025.

The study specifically answered the following queries:

What was the level of adaptive leadership demonstrated by nurse managers in a level 2 government hospital as perceived by staff nurses in terms of:

emotional intelligence;

collaborative problem solving;

openness to change;

responsibility-sharing;

conflict management; and

support for learning and adaptation?

What was the level of empowering behaviors demonstrated by nurse managers in a level 2 government hospital as perceived by staff nurses in terms of:

delegation of authority;

accountability for outcomes;

self-directed decision-making;

information sharing;

skill development; and

coaching for innovative performance?

Was there a significant relationship between adaptive leadership and empowering behavior of nurse managers as perceived by staff nurses?

What empowering leadership enhancement plan could be proposed based on the findings of the study?

## Statement of Null Hypothesis

**H<sub>01</sub>:** There was no significant relationship between adaptive leadership and empowering behavior of nurse managers as perceived by the staff nurses.

## REVIEW OF RELATED LITERATURE AND STUDIES

**Adaptive leadership practices of nurse managers.** Adaptive leadership, as conceptualized by Heifetz (1994), has increasingly been recognized within the nursing profession as an essential approach to navigating the complexity of modern healthcare systems, emphasizing the capacity to mobilize individuals to confront adaptive challenges that require learning, behavioral change, and collaboration. This perspective is particularly relevant in healthcare settings where nurse managers must respond to evolving patient needs, organizational demands, and resource constraints. Anderson et al. (2015) further expanded this through the Adaptive Leadership Framework for Chronic Illness Care, highlighting healthcare organizations as complex adaptive systems where leaders promote innovation, continuous learning, and collective problem-solving. Empirical studies support these concepts, with El-Dash et al. (2024) demonstrating that adaptive leadership training significantly improved nurse managers' competencies, job performance, and satisfaction, while Ibrahim (2023) found a strong positive relationship between adaptive leadership and resilience. Qualitative studies also confirm these findings, showing that nurse managers mobilize resources, coordinate teams, and adapt leadership styles under pressure, reinforcing that adaptive leadership enhances teamwork, communication, and organizational resilience (Li et al., 2022; Li & Zhang, 2024; Anderson et al., 2015; Heifetz, 1994).

In the Philippine healthcare context, although adaptive leadership is not explicitly labeled, several studies reflect its core principles such as flexibility, collaboration, and responsiveness. Baslot & Coronado (2025) found that supportive and responsive leadership was associated with lower turnover intention and higher job satisfaction, while Dominguez (2025) reported that flexible leadership improved team collaboration and work performance. Vecino & Pizarra (2022) linked emotional intelligence with adaptability and effective communication, highlighting its alignment with adaptive leadership behaviors. Similarly, Perez Ramirez (2025) identified gaps in formal leadership training among nurse managers, particularly in competencies related to collaboration and situational responsiveness, while Mindanao State University and Pangandaman (2024) demonstrated that leadership traits supporting staff development and attentiveness were associated with stronger organizational commitment. These findings indicate that adaptive leadership behaviors are present but not formally integrated, revealing a gap in applying adaptive leadership frameworks in Philippine level 2 government hospitals and emphasizing the need for further research on its influence on empowering behaviors and organizational outcomes.

**Empowering behavior of nurse managers.** Empowering behavior in nursing refers to leadership practices that enhance nurses' autonomy, professional growth, and psychological well-being, as supported by Kanter's (1993) Structural Empowerment Theory, which emphasizes access to information, resources, support, and opportunities. Studies consistently show that empowerment leads to higher job satisfaction, motivation, and improved patient outcomes (Saleh et al., 2022; Alharbi & Alqurashi, 2023). Empowering leadership enables staff to take initiative, develop competence, and participate in decision-making, which improves team performance, work engagement, collaboration, adaptability, and resilience (Kim & Beehr, 2022; Choi et al., 2023; Al-Makhaita et al., 2024). Leadership development programs further reinforce empowerment by enhancing self-efficacy, communication skills, and psychological safety, allowing nurses to express ideas without fear (Van Wyk et al., 2023; Wang & Yang, 2024; Hashemi et al., 2025). Cross-cultural and longitudinal evidence highlights that empowerment is dynamic and influenced by organizational climate, managerial support, and cultural context (Chen et al., 2022; Liang et al., 2023).

In the Philippine healthcare setting, research on empowering leadership remains limited, with most studies focusing on other leadership styles. However, existing findings indicate that empowering behaviors are associated with psychological empowerment, clinical skill development, and perceived patient outcomes (Oducado, 2019; Alfonso et al., 2021; Pilla, 2022). Emotional intelligence also supports effective empowering practices (Vecino & Pizarra, 2022), although gaps in formal leadership training remain (Perez-Ramirez, 2025). Barriers such as hierarchical systems, staffing shortages, heavy workloads, and limited managerial support hinder empowerment, while fear of losing control and lack of structured policies further limit its practice (Cicolini et al., 2023; Labrague et al., 2022; Laschinger et al., 2021; Graça et al., 2024; Hashemi et al., 2025). Theoretical and measurement frameworks, including CWEQ-II, ELQ, and ELS, emphasize that empowering leadership is a continuous relational process shaped by organizational context. Overall, empowering behaviors

such as delegation, mentoring, and participative decision-making enhance work engagement, teamwork, and job satisfaction, yet limited local research, particularly in Level 2 public hospitals, highlights the need to examine empowering behaviors within resource-constrained environments (Laschinger et al., 2021; Hashemi et al., 2025; Graça et al., 2024).

**Adaptive leadership practices on the empowering behavior.** Recent research highlights the positive relationship between nurse managers' empowering leadership behaviors and staff nurses' psychological empowerment and engagement. In the Philippine context, Oducado (2019) found that young hospital staff nurses perceived high levels of leader-empowering behaviors, which were associated with increased psychological empowerment. Similarly, Oducado et al. (2021) reported that empowering leadership was linked to greater assertiveness and engagement among staff nurses, suggesting that leadership behaviors that promote autonomy and professional development enhance nurses' motivation and commitment. These findings are consistent with Kanter's (1993) structural empowerment theory, which emphasizes access to resources, support, and opportunities as critical for employee empowerment.

International studies provide additional evidence supporting this relationship. Hashemi, Sadeghi, Roshanaei, and Purfarzad (2025) demonstrated in Egypt that first-line nurse managers' transformational and positive leadership behaviors significantly improved nurses' structural and psychological empowerment, as well as work engagement. Choi et al. (2023) similarly found that empowering leadership practices predict nurses' work engagement and psychological empowerment, mediating their intent to remain in the organization. These studies collectively indicate that when nurse managers delegate authority, support participative decision-making, and facilitate professional growth, staff nurses experience higher levels of empowerment, motivation, and job commitment.

Further, empirical studies suggest that nurse managers who consistently employ empowering behaviors, such as giving staff more responsibility, encouraging independent decision-making, and supporting professional development, help nurses feel more confident, motivated, and engaged at work (Kim & Beehr, 2022; Al-Makhaita et al., 2024). Both local (Oducado, 2019; Oducado et al., 2021) and international studies (Hashemi et al., 2025; Choi et al., 2023) consistently show that higher levels of empowering leadership correspond with increased psychological empowerment, assertiveness, and work engagement among nurses.

However, most existing research is cross-sectional, relies on self-reported measures, and does not directly examine adaptive leadership practices (Hashemi et al., 2025; Oducado et al., 2021). There remains a need for studies employing longitudinal designs and diverse clinical settings to better understand how adaptive leadership specifically enhances empowering behaviors and improves nurses' outcomes. Addressing these gaps is essential for developing context-specific leadership strategies that effectively foster empowerment, motivation, and commitment among nursing staff (Kanter, 1993; Kim & Beehr, 2022).

The reviewed literature consistently demonstrates that both adaptive leadership and empowering behavior are vital in enhancing nurse managers' effectiveness, staff engagement, and the overall quality of patient care. Adaptive leadership fosters resilience, flexibility, and innovation, while empowering leadership promotes autonomy, motivation, and professional growth among nurses. Together, these leadership approaches enable nurse managers to respond effectively to complex and rapidly changing healthcare demands through participative decision-making and supportive managerial practices. However, a notable gap emerges in the Philippine context, where most studies have focused on transformational or transactional leadership, emotional intelligence, or general empowerment, without explicitly examining adaptive leadership as a framework for empowering behavior among nurse managers. Local research indicates that empowering practices exist but often lack theoretical grounding and empirical exploration of how adaptive leadership facilitates empowerment in resource-constrained public hospital settings.

In view of these findings, there is a clear need to conduct this study to address the identified gap between theory and practice. Despite international evidence linking adaptive leadership to empowerment, teamwork, and quality outcomes, little is known about how these dynamics operate among nurse managers in Philippine tertiary government hospitals, institutions often characterized by heavy workloads, hierarchical structures, and limited managerial support. By investigating the relationship between adaptive leadership practices and

empowering behaviors, this study aims to generate context-specific insights that can inform leadership development, policy formulation, and capacity-building initiatives in public healthcare settings. Ultimately, this research seeks to strengthen adaptive and empowering leadership competencies among nurse managers, fostering healthier work environments and improved nursing care delivery.

## RESEARCH METHODOLOGY

**Design.** The study employed a descriptive-correlational research design. In this study, the descriptive design was used to determine the levels of adaptive leadership and empowering behavior of nurse managers as perceived by the staff nurses in a level 2 government hospital in Surigao City, Philippines for the first quarter of 2026. The correlational design was used to assess the significant relationship between adaptive leadership and empowering behavior of nurse managers as perceived by the staff nurses. This design allowed the researcher to determine whether variations in adaptive leadership practices are associated with corresponding changes in the empowering behavior of nurse managers as perceived by the staff nurses.

**Environment.** This study was conducted in a in a level 2 government hospital located in Surigao City, Philippines.

**Respondents.** The respondents of this study were the 205 staff nurses in the hospital.

**Sampling Design.** This applied a simple random sampling technique, grouping nurses according to their unit assignments to ensure proportional representation across all departments. This approach guaranteed that responses reflected a balanced view of leadership practices throughout the hospital's varied clinical settings.

**Inclusion Criteria and Exclusion Criteria.** The study included registered nurses who were currently assigned to clinical units such as ICU, PICU, NICU, Pediatric Ward, Medical Ward, Surgical Ward, OB-GYN, Emergency, Hemodialysis, Out-Patient, Labor and Delivery, EREID, and Operating Room Department, who had been employed for at least three (3) months during the conduct of the study, and those who voluntarily agreed to participate and provide informed consent. Nurses who were previously assigned or rotated in these areas were also included as their experiences provided valuable insights into nurse managers' leadership and empowerment practices. The study excluded newly hired nurses with less than three (3) months of hospital experience, those on extended leave, training, or special assignment during data collection, and nurse managers, supervisors, and administrative personnel, as the study focused on the perceptions of staff nurses regarding the adaptive leadership and empowering behaviors of their immediate leaders.

**Instrument.** The study utilized a two-part instrument composed of standardized and previously validated tools. Part I was the Adaptive Leadership Questionnaire (ALQ) developed by Northouse (2021), based on Heifetz et al. (2009), consisting of 30 items measuring dimensions such as emotional intelligence, collaborative problem-solving, openness to change, responsibility-sharing, conflict management, and support for learning, using a 6-point Likert scale. Scores were summed and averaged, with higher means indicating stronger adaptive leadership, interpreted from very low to very high levels; the instrument demonstrated strong reliability with Cronbach's alpha values exceeding 0.85 (Northouse, 2021).

Part II was the Leader Empowering Behavior Questionnaire (LEBQ) developed by Konczak et al. (2000), consisting of 17 items across six subscales: delegation of authority, accountability, self-directed decision-making, information sharing, skill development, and coaching for innovative performance, measured using a 5-point Likert scale. Subscale and overall means were computed, with higher scores indicating stronger empowering behaviors, interpreted from very low to very high levels. The LEBQ showed high internal consistency with Cronbach's alpha values ranging from 0.80 to 0.94 (Konczak et al., 2000).

**Data Gathering Procedures.** A The research process began with the submission of three possible research titles for approval, followed by the assignment of an adviser. Transmittal letters were submitted to the Dean, Medical Center Chief, Chief Nurse, and Ethics Committee to secure permission, and the study underwent ethical review and a design hearing before obtaining official clearance to proceed. During actual data gathering, coordination with the Nursing Office, and data were collected using both face-to-face and online

methods through self-administered questionnaires, with informed consent obtained and confidentiality maintained. Questionnaires were distributed during non-disruptive times, checked for completeness, and returned if necessary for completion. After data collection, responses were encoded in Microsoft Excel and submitted to a statistician for analysis, with results presented in tabular form with interpretations and supporting literature. The manuscript was then submitted for final defense, and all completed questionnaires were securely disposed of to ensure confidentiality.

**Statistical Treatment of Data.** Mean score and standard deviation were used to determine the level of adaptive leadership and empowering behavior of nurse managers as perceived by staff nurses, with the mean describing the central tendency of the scores and the standard deviation indicating the dispersion of responses. The Pearson Product-Moment Correlation Coefficient (Pearson  $r$ ) was used to determine the degree and direction of the relationship between adaptive leadership and empowering behavior, identifying whether the relationship was positive, negative, or negligible.

**Ethical Considerations.** Ethical considerations are an essential component of any research study. The study was submitted to the ethics committee of both the university and the hospital. Ethical approval was sought prior to the start of data gathering to ensure that the welfare of the respondents was protected.

### PRESENTATION, ANALYSIS, AND INTERPRETATION OF DATA

Table 1 Level of Adaptive Leadership Demonstrated by Nurse Managers

Dimensions	Mean score	SD	Interpretation
Emotional Intelligence			
1. Demonstrates emotional intelligence when dealing with team stress.	5.03	0.954	Agree
2. Listens actively to input from team members.	4.96	0.961	Agree
3. Maintains composure during organizational crises.	4.98	0.777	Agree
4. Values different opinions even when they conflict with their own.	4.99	0.865	Agree
5. Builds resilience among team members during difficult times.	5.04	0.796	Agree
Factor mean	5.00	0.753	High adaptive leadership behavior
Collaborative Problem-Solving			
1. Promotes collaborative problem solving.	5.09	0.759	Agree
2. Helps group members explore competing perspectives.	5.01	0.880	Agree
3. Promotes open dialogue and inclusion of all viewpoints.	5.13	0.736	Agree
4. Promotes trust and transparency in decision-making.	5.09	0.812	Agree
Factor mean	5.08	0.696	High adaptive leadership behavior

Openness to Change			
Supports experimentation with new approaches.	4.92	0.904	Agree
2. Challenges the status quo.	4.83	0.899	Agree
3. Encourages innovation in care delivery.	5.08	0.749	Agree
4. Inspires others to adapt to change.	5.13	0.742	Agree
5. Creates a culture that supports learning and adaptation.	5.10	0.795	Agree
Factor mean	5.01	0.727	High adaptive leadership behavior
Responsibility Sharing			
1. Encourages responsibility sharing among the team.	5.10	0.754	Agree
2. Provides opportunities for others to take the lead.	5.06	0.766	Agree
3. Encourages team ownership of organizational challenges.	5.09	0.812	Agree
4. Balances authority with team empowerment.	4.94	0.750	Agree
5. Identifies core values that guide team behavior.	4.96	0.764	Agree
6. Communicates the importance of shared responsibility.	5.08	0.723	Agree
Factor mean	5.04	0.657	High adaptive leadership behavior
Conflict Management			
1. Encourages others to confront difficult issues.	4.94	0.826	Agree
2. Encourages the group to face uncomfortable realities.	5.03	0.768	Agree
3. Manages conflict constructively.	4.91	0.903	Agree
Factor mean	4.96	0.728	High adaptive leadership behavior
Support for Learning and Adaptation			
1. Facilitates learning from mistakes.	5.11	0.829	Agree
2. Communicates a clear vision during times of uncertainty.	5.08	0.861	Agree
3. Identifies technical vs. adaptive challenges effectively.	4.94	0.795	Agree
4. Encourages reflection on personal assumptions and biases.	4.99	0.777	Agree

5. Seeks feedback for continuous leadership development.	5.03	0.865	Agree
6. Uses challenges as opportunities for team growth.	5.03	0.831	Agree
7. Provides mentorship to help others grow as leaders.	5.07	0.786	Agree
Factor mean	5.03	0.711	High adaptive leadership behavior
Grand mean	5.02	0.686	High adaptive leadership behavior

Note. n=205.

Legend: 1.00– 1.83 – very low, 1.84-2.66 – low, 2.67-3.49 – moderately low, 3.59-4.32 – moderately high  
4.33-5.15 – high, 5.16-6.00 – very high

The results revealed that nurse managers demonstrated a high level of adaptive leadership (grand mean = 5.02), with collaborative problem-solving obtaining the highest mean, followed by responsibility sharing and support for learning and adaptation, while conflict management registered the lowest mean, although still interpreted as high. This pattern indicates that nurse managers are particularly effective in promoting teamwork, shared decision-making, and continuous learning, which are essential in maintaining effective unit performance and ensuring quality patient care in a Level 2 government hospital. The high rating in collaborative problem-solving signifies active staff involvement in decision-making, strengthening trust, communication, and accountability, while responsibility sharing reflects empowerment and professional growth among nurses (Boamah et al., 2022; Cummings et al., 2021; Li et al., 2023). Support for learning and adaptation highlights the promotion of continuous development, improving competence and reducing errors (Fowler et al., 2025), while openness to change supports innovation and adaptability in evolving healthcare environments (Giddens, 2024). Emotional intelligence further enables nurse managers to maintain composure, support staff, and foster a positive work environment, contributing to reduced burnout and improved teamwork (Harley, 2025; Fowler et al., 2025). These findings collectively suggest that adaptive leadership behaviors enhance staff engagement, satisfaction, and patient outcomes (Robinson et al., 2025; Lee & Seo, 2024; Wang et al., 2024).

Despite these strengths, conflict management obtained the lowest mean, indicating that while present, it is less strongly demonstrated compared to other competencies. This suggests that workplace culture may favor harmony over direct confrontation, leading to informal resolution of issues, which may result in unresolved concerns affecting team dynamics and communication. Strengthening conflict management is important to ensure that nurses feel heard and supported, and to prevent potential tensions that may impact teamwork and patient care (González-García et al., 2025; Welch, 2024). Overall, the findings indicate that nurse managers exhibit strong adaptive leadership behaviors that promote collaboration, empowerment, and continuous learning, contributing to a supportive and engaging work environment. However, enhancing conflict management through leadership development programs will further strengthen team dynamics, improve staff well-being, and sustain high-quality patient care outcomes in the hospital setting.

Table 2 Level of Empowering Behavior Demonstrated by Nurse Manager

Dimensions	Mean score	SD	Interpretation
A. Delegation of Authority			
1. Gives me the authority to make decisions that improve	4.26	0.619	Strongly agree

work processes.			
2. Gives me the freedom to make decisions important to my job.	4.28	0.634	Strongly agree
3. Trusts me to make decisions on my own in my area of work.	4.24	0.680	Strongly agree
Factor mean	4.26	0.605	Very High Empowering Behavior
<b>B. Accountability for Outcomes</b>			
4. Holds me accountable for the outcomes of my work.	4.26	0.508	Strongly agree
5. Encourages me to take responsibility for my decisions.	4.33	0.508	Strongly agree
6. Holds me responsible for my task performance.	4.28	0.549	Strongly agree
Factor mean	4.29	0.466	Very High Empowering Behavior
<b>C. Self-Directed Decision-Making</b>			
7. Encourages me to identify problems and take initiative to solve them.	4.32	0.542	Strongly agree
8. Gives me the opportunity to determine the best way to accomplish my work.	4.35	0.516	Strongly agree
9. Allows me to use my judgment when carrying out tasks.	4.28	0.585	Strongly agree
Factor mean	4.32	0.491	Very High Empowering Behavior
<b>D. Information Sharing</b>			
10. Informs me about the goals and objectives of our unit.	4.28	0.624	Strongly agree
11. Provides the information necessary to do my job well.	4.28	0.653	Strongly agree
12. Shares important organizational information with me in a timely manner.	4.32	0.554	Strongly agree
Factor mean	4.29	0.554	Very High Empowering Behavior
<b>E. Skill Development</b>			
13. Encourages me to expand my knowledge and skills.	4.41	0.703	Strongly agree
14. Provides opportunities to improve my work-related competencies.	4.38	0.652	Strongly agree
15. Supports me in developing skills that help me grow in	4.38	0.632	Strongly agree

my career.			
Factor mean	4.39	0.623	Very High Empowering Behavior
F. Coaching for Innovative Performance			
16. Encourages me to think of new ways to improve my work.	4.39	0.561	Strongly agree
17. Coaches me on how to be innovative and creative in solving work problems.	4.38	0.569	Strongly agree
Factor mean	4.38	0.536	Very High Empowering Behavior
Grand mean	4.32	0.453	Very High Empowering Behavior

Note: n=205.

Legend: 4.21 – 5.00 Very High Empowering Behavior (strongly agree); 3.41 – 4.20 High Empowering Behavior (agree); 2.61 – 3.40 Moderate Empowering Behavior (neutral); 1.81 – 2.60 Low Empowering Behavior (disagree); 1.00 – 1.80 Very Low Empowering Behavior (strongly disagree).

The results in Table 2 shows that nurse managers demonstrated a very high level of empowering behavior (grand mean = 4.32), with skill development obtaining the highest mean, followed by coaching for innovative performance and self-directed decision-making, while delegation of authority registered the lowest mean, although still interpreted as very high. This pattern indicates that nurse managers are particularly effective in fostering professional growth, creativity, and autonomous decision-making, which are essential in a Level 2 government hospital where nurses must respond to complex and rapidly changing clinical situations. The high emphasis on skill development reflects consistent investment in trainings, mentorship, and exposure programs that enhance competence and adaptability, while coaching for innovative performance promotes creative problem-solving and continuous improvement at the unit level (Cummings et al., 2021; Wang et al., 2024; Li et al., 2023). Self-directed decision-making further supports autonomy, enabling nurses to make timely clinical judgments, which strengthens accountability, confidence, and patient outcomes (Kim & Beehr, 2022; Choi et al., 2023). Additionally, high levels of accountability for outcomes and information sharing indicate that nurse managers maintain clear expectations and transparent communication, contributing to coordinated care, teamwork, and operational efficiency (Boamah et al., 2022; Wang et al., 2024; Graça et al., 2024).

Despite these strengths, delegation of authority obtained the lowest mean, suggesting that nurse managers may retain control in critical situations due to high accountability and risk in hospital settings. While delegation is practiced, limited opportunities for full autonomy may affect decision-making speed and leadership development among staff. Strengthening delegation practices can further enhance empowerment, improve workflow efficiency, and support proactive behaviors among nurses (Li et al., 2023; Kim & Beehr, 2022; Choi et al., 2023). Overall, the findings indicate that nurse managers demonstrate strong empowering behaviors that support staff development, innovation, and autonomy, resulting in increased competence, engagement, and teamwork. These leadership practices are essential in sustaining high-quality patient care in dynamic and resource-limited healthcare environments, while further enhancement of delegation can maximize nurses' leadership potential and overall unit performance.

Table 3 Relationship between Adaptive Leadership and Empowering Behavior of Nurse Managers

Variables	r value	p value	Decision	Interpretation
Adaptive Leadership vs.	.737	.000	Reject Ho	Significant

Empowering Behavior				
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Legend: Significant if p value is  $\leq .05$ . Dependent Variable: Empowering Behavior of Nurse Managers. Pearson r interpretation: A value greater than .5 is strong (positive), between .3 and .5 is moderate (positive), between 0 and .3 is weak (positive), 0 is none, between 0 and  $-.3$  is weak (negative), between  $-.3$  and  $-.5$  is moderate (negative), and less than  $-.5$  is strong (negative).

The analysis of Table 3 reveals a strong positive correlation between adaptive leadership and the empowering behavior of nurse managers ( $r = 0.737, p = 0.000$ ), indicating that as nurse managers demonstrate higher levels of adaptive leadership, they are more likely to engage in behaviors that empower their staff. The null hypothesis was rejected, confirming that the relationship is statistically significant. This suggests that adaptive leadership is not merely a personal competency but a key driver of staff empowerment, where nurse managers who apply adaptive strategies foster an environment that enhances confidence, motivation, participation in decision-making, and meaningful contribution to patient outcomes. The findings highlight that adaptive leadership directly influences nursing performance, team cohesion, and overall patient care delivery.

In real hospital settings, this relationship is evident when nurse managers implement adaptive strategies such as guiding staff during the introduction of new clinical protocols, mentoring nurses through practice sessions, and encouraging feedback in workflow adjustments. In patient care planning, adaptive leaders involve nurses in collaborative decision-making, allowing them to voice clinical judgments and propose solutions. During high-pressure situations, such as sudden patient influx, nurse managers who reallocate tasks, encourage problem-solving, and maintain composure empower staff to take initiative and share responsibility. These behaviors ensure efficient care delivery while fostering confidence and ownership among nurses.

The practical implications of this finding are significant. Strengthening adaptive leadership competencies among nurse managers can promote staff empowerment, resulting in improved teamwork, higher job satisfaction, and better patient outcomes. In Level 2 government hospitals, where challenges such as high patient loads, limited staffing, and frequent protocol changes are common, adaptive leadership is essential in maintaining operational efficiency and sustaining a resilient workforce. Hospitals should invest in leadership development programs that integrate emotional intelligence, conflict resolution, and collaborative problem-solving to support empowered and responsive nursing teams.

Adaptive leadership also has broader organizational implications. Empowered nurses are more likely to engage in proactive problem-solving, apply evidence-based practices, and contribute to quality improvement initiatives, which enhance patient safety and care quality. Sustained empowering leadership fosters a positive organizational culture where nurses feel valued and motivated, reducing burnout and turnover. Additionally, adaptive leaders mentor future leaders, ensuring continuity of effective leadership practices and strengthening institutional performance over time.

Supporting literature confirms these findings. Boamah et al. (2022) emphasized that adaptive and participative leadership enhances nurses' engagement and professional growth, while Li et al. (2023) noted that adaptability and collaborative decision-making create environments where staff feel confident and competent. Robinson et al. (2025) further explained that adaptive leadership fosters workforce empowerment, improves team cohesion, and sustains high-quality patient outcomes. In daily hospital operations, nurse managers who demonstrate emotional intelligence, flexibility, and mentorship reinforce this relationship, as staff report feeling valued, capable, and actively involved in patient care decisions, reflecting the practical impact of adaptive leadership on empowerment and team performance.

## CONCLUSION AND RECOMMENDATIONS

**Conclusion.** The findings of the study confirm that nurse managers demonstrate a high level of adaptive leadership and a very high level of empowering behavior, with strengths in collaborative problem-solving, responsibility sharing, and skill development, while conflict management and delegation of authority remain areas for further enhancement. More importantly, the study establishes that adaptive leadership increases empowering behavior, indicating that nurse managers with higher adaptive leadership capacity are more likely to foster empowerment among staff nurses. This suggests that when nurse managers effectively demonstrate

flexibility, emotional intelligence, and participative decision-making, they create a work environment that promotes staff autonomy, engagement, and professional growth, ultimately contributing to improved team performance and patient care outcome.

**Recommendations.** Based on the findings, the recommendations emphasize the implementation of a leadership development programs focusing on conflict management, delegation of authority, and shared governance to enhance adaptive leadership and sustain empowering behaviors, with the Empowering Leadership Enhancement Plan serving as a guide through structured trainings, mentorship, reflective practice, collaborative problem-solving, and monitoring of leadership initiatives. Hospital management should institutionalize leadership coaching, conflict resolution workshops, and participative decision-making practices to strengthen staff engagement, accountability, and team performance. Nursing education should integrate adaptive leadership and empowerment concepts into leadership and management courses, emphasizing experiential learning in conflict resolution, delegation, and participative leadership. Hospital administrators should implement policies that support leadership development, shared governance, and staff participation in decision-making to promote autonomy, accountability, and professional growth. Future research may explore adaptive leadership and empowerment in relation to nurse and patient outcomes and evaluate the effectiveness of leadership development programs.

## Empowering Leadership Enhancement Plan

### Rationale

The study revealed that nurse managers demonstrate strong adaptive leadership and very high empowering behaviors. Among the adaptive leadership dimensions, collaborative problem-solving, responsibility sharing, and support for learning were observed as the most pronounced strengths, while conflict management was relatively less emphasized. In terms of empowering behaviors, skill development emerged as a key strength, whereas delegation of authority was less evident. In the high-pressure environment of a Level 2 government hospital, where patient acuity is high, resources are limited, and protocols frequently change, these competencies are critical for effective teamwork, staff engagement, and quality patient care. Therefore, a structured leadership enhancement plan is necessary to reinforce high-performing areas, address weaker competencies, and further empower nurses.

### General Objective

To sustain and enhance the leadership competencies of nurse managers and empower staff nurses by reinforcing strengths, addressing weaker areas, and promoting a culture of professional growth and collaborative practice in a Level 2 government hospital.

### Specific Objectives

1. To enhance the adaptive leadership capacity of nurse managers from high to very high level across all dimensions.
2. To sustain and further strengthen the very high level of empowering behavior among nurse managers.

Areas of Concern	Specific Objectives	Hospital-Initiated Activities	Personal-Initiated Activities	Persons Involved	Budget	Time Frame	Success Indicators
Adaptive Leadership Capacity of Nurse Managers	To enhance the adaptive leadership capacity of nurse managers	Conduct leadership training on conflict management, emotional	Participate in mentoring and coaching; apply adaptive	Nurse Managers, HR Department, Unit Supervisors	Php 40,000	6–12 months	Improved conflict management practices; enhanced emotional

	from high to very high level across all dimensions.	intelligence, and adaptive leadership; organize simulation exercises and case-based discussions; provide mentoring and coaching sessions; implement reflective leadership workshops	leadership strategies in unit management; seek feedback from staff and supervisors				intelligence; stronger team collaboration ; increased staff satisfaction; adaptive leadership ratings approaching very high level
Empowering Behavior of Nurse Managers	To sustain and further strengthen the very high level of empowering behavior among nurse managers.	Provide structured training on delegation and decision-making; sustain mentorship and skill development programs; conduct regular case conferences and participative decision-making sessions; strengthen communication systems	Actively delegate responsibilities; mentor and coach staff nurses; encourage participation in decision-making; support innovation and professional growth; practice accountability	Nurse Managers, Staff Nurses, HR Department	Php 45,000	6–12 months	Sustained very high empowering behavior ratings; increased staff autonomy and engagement; improved task ownership; enhanced teamwork and efficiency; improved patient care outcomes

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