Good research paper on a critique of research-based articles

Leadership in Schools for the Visually Impaired

A. Olu Oyinlade, Marva Gellhaus, and Kebba Darboe (2003) wrote a journal article regarding the behavioral qualities needed in order to have effective leadership in schools for the visually impaired. It was titled Essential behavioral qualities for effective leadership in schools for students who are visually impaired: A national study. It made use of both published works and questionnaire interviews for its research methodology.

The first strong point of this article is its relevance. The main purpose of the study is to identify the behavioral qualities that leaders need to have in order to best manage a school for visually impaired students (Oyinlade, Gellhaus & Darboe, 2003). This is an extremely relevant issue because it helps in improving the current education system, especially for those who are differently abled. Its research question is one that definitely needs to be asked because managing or overseeing a school for visually impaired students is, without a doubt, more challenging than overseeing a typical school.

Undeniably, hundreds of principals, superintendents, and other school leaders will be able to benefit from this journal article and apply its research findings in their own lives and professions. What makes the article even more necessary is that there has been an utter lack of researches done on the characteristics of leadership in schools for the visually impaired. This article is trying to defy this unfortunate circumstance. In doing so, the article also opens up new possibilities for research studies on other related topics such as, potentially, a study on the essential behavioral qualities of leaders in schools for the deaf or other disabilities.

Another strong point of the article is its review of related literature. First of all, the structure of the article's literature review is very logical, well thought of, and effective. It started with reviewing literature that help define what leadership is, which is essential because leadership is the core of this study (Oyinlade, Gellhaus & Darboe, 2003). Properly defining leadership serves as a guide for the direction of the rest of the journal article. It then goes on to review the historical trends concerning leadership theories, particularly those that put focus on the behaviors of leaders. Lastly, the literature review puts these theories into the context of leadership in schools. It makes use of published works that deal with effective leadership among school leaders. Overall, the article's literature review is organized and systematic in its structure, tackling points that are necessary in the purpose of the study.

The review of related literature also entailed a review of theories regarding leadership. This article substantially contributed to these theories as it was able to put most of them into a context that is rarely given much attention: schools for the visually impaired. It used theories such as the theory of naturally selected leaders, two-dimensional leadership theory, the leader traits theory, and gender difference theory (Oyinlade, Gellhaus & Darboe, 2003). These theories were previously only used in the context of regular schools. Unfortunately, as the article mentioned, there has been " a dearth of research on the characteristics of leadership in schools for students who are visually impaired" (Oyinlade, Gellhaus & Darboe, 2003, p 392). As such, it is an advantage that this article is able to apply old theories into a new context that has never been fully done before.

The research design makes use of a quantitative research methodology.

Data were collected using a random sampling that involved 25 members of the Council of Schools for the Blind (Oyinlade, Gellhaus & Darboe, 2003). Research questionnaires were handed out to 900 people, of which 294 responded. The researchers ensured that the questionnaires were appropriate for the respondents' physical conditions. They were printed in either large print or Braille to make them accessible to students who are visually impaired (Oyinlade, Gellhaus & Darboe, 2003). For the content of the questionnaires, it generally involved questions about perceived essential behavior leadership qualities. The research design was simple, clear, and definitely appropriate.

It was also effective as it led to favorable and quality results. The quantitative research design allowed the authors to arrive at a concrete result regarding the top 10 essential behavioral leadership qualities in schools for the visually impaired. However, they made sure to differentiate the results of the male respondents from those of the female respondents. This was done to address the theory that there are differences in leadership styles between men and women. The results and conclusion, however, show that within the context of schools for the visually impaired, leadership is generally gender-neutral. This conclusion closely ties up with both the research findings and is able to substantially contribute to larger scholarly literature.

Physician Leadership

Physician leadership: Influence on practice-based learning and improvemen' is an article written by Stephen E. Prather and David N. Jones (2003). The

journal article basically argues for the case of practice-based learning and improvement, specifically on how it is still a very much needed method in improving leadership in the field of medicine (Prather & Jones, 2003). It does acknowledge the fact that evidence-based practices among physicians are proving to be obstacles for the mainstream acceptance of practice-based learning. However, it still goes on to prove that despite its traditional nature, practice-based learning and improvement is still essential to medical leadership.

Upon analyzing the purpose of the study and the context it is situated in, it is evidently very relevant and necessary. The medical and healthcare industry is always in need of ways—may it be old or new—to ensure the highest quality of leadership among their teams. These teams, which can also be called clinical groups, and how they function determine the overall standard of the industry. Dysfunctional clinical groups with incompetent leaders will not allow for high quality health care delivery systems. Not only will the income of the industry be put to risk, a more pressing consequence will be the possibility of endangering the lives of millions of people.

This journal article aims to prevent that from happening by putting forward the method of practice-based learning and improvement. Furthermore, it can be used by other journal articles that also aim to improve the leadership skills of those in the field of medicine. One particular kind of research study that can utilize this journal article is that which argues for the case of evidence-based practices. This article is full of substantial and critical ideas that are opposed to evidence-based practices, which other articles can counter-argue.

While its purpose is exceptionally relevant and necessary, its literature review is exceptionally organized and comprehensive. The journal article focuses on mapping out the history and development of theories, methods, and practices found in the medical and healthcare field (Prather & Jones, 2003). In this aspect, it provides an extensive exposition of the industry's many differing ways to improve leadership. One important element of the literature review that makes it both thorough and reader-friendly is the use of subheadings. The subheadings show clear division among the different stages of the industry's history and the different ideologies involved in it. The journal article's biggest—and probably the only substantial one—contribution to the theories it used in the literature review is the curriculum design it puts forward. This curriculum design is intended to help clinical groups and other healthcare delivery systems in various activities concerning leadership. These activities involve guiding adaptation of new practices, countering conformity, and influencing new learning (Prather & Jones, 2003). The article's suggested curriculum design successfully reconciles various theories such as Blake and Mouton's leadership theory, Holland's complex adaptive systems theory, practice-based learning, and even evidenced-based medicine (Prather & Jones, 2003).

The research design used was that of a quantitative research methodology. The authors made use of six behavioral leadership styles in order to analyze the role of leadership in healthcare performance. The six styles are then made quantifiable by assessing how much they measure up to two 9-point scales. The scales represent the two basic principles of Blake and Mouton's leadership theory: concern for results and concern for people (Prather &

Jones, 2003). This research design is not only informative, it also provides readers with data that can easily be understood and compared with one another. This is all thanks to the article's use of graphs that demonstrate the various trends of both effective and ineffective leadership styles.

The results of the journal article are clearly connected to the reviewed literature and the research design. The results were able to specifically show where different leadership styles succeed and where they fail using theories from previously published literature. For example, according to the results of the quantitative research design, cooperation is the best style of leadership when it comes to the medical and healthcare industry. It is the only leadership style that ranked both 9s in the 9-point scales. In other words, a cooperative leadership shows high concern for both people and results, encouraging leaders to contribute and to commit (Prather & Jones, 2003). However, the conclusion does not really promote this result heavily. Rather, the conclusion implies that the cooperative leadership style won't always be the best because new leadership styles will always emerge in the field of medicine and healthcare. While the conclusion and results are not as in sync as they could have been, they are still both heavily supported by facts and logic.

Leadership Styles in Nurse Managers

Written by Lindholm, Sivberg and Uden (2002), the article Leadership style among nurse managers in changing organizations puts focus on the different leadership styles of nurse managers. Its purpose is to look into the definition, interpretation, and application of how nurse managers adapt their leadership

styles in accordance to the constantly changing healthcare system. This is a particularly difficult undertaking because nurse managers tend to be put under so much pressure from both the lower level of the organization, i. e. the patients, and the upper level of the organization, i. e. the board members.

Looking at the current situation of nurse managers and the healthcare systems, it can be concluded that this journal article is in fact extremely relevant. Although its highly specific target demographic, which is nurse managers, limits its relevance to only a particular group of people; it is relevant nevertheless. This is because its target demographic affects the lives of millions of people all around the world. Nurse managers have the crucial job of making sure that people, operations, money, and information are all being handled properly. Nurse managers play a crucial role in keeping hospitals up and running. And for them to be able to do so, they need to be able to adapt their leadership styles to whatever is the current healthcare system. This is exactly the issue that the journal article wants to tackle, making it an article that is undeniably needed by numerous nurse managers everywhere.

The journal article's review of related literature is divided into two parts: a section concerning leadership models and a section concerning organizational culture. These two sections seem to be appropriate because they are, indeed, crucial aspects of the article's main thesis. However, the literature review could have had one more section added to it, that is, a section concerning healthcare systems. While the literature review does a great job in providing historical background and relevant theories regarding

leadership styles and organizational culture, it still needs to further expound on the role of the healthcare systems. This is because the healthcare systems act as the determinant of the situation. The nurse managers' leadership styles are the main object being influenced; the organizational culture is the environment where the main object finds itself in; and healthcare systems are the constantly changing variables that force the main object to change along with it. Its significance is just as substantial as that of the leadership styles and the organizational culture; hence, the literature review should have given it more focus.

Having said that, the rest of the literature review is indeed very informative. It mentions various theories such as Davidhizar & Lafferty's transformational leadership theory and Dunham

& Klafehn's transactional leadership (Lindholm, Sivberg & Uden, 2002). Transformational leadership gives priority to people and problem-solving in a constantly changing environment (Lindholm, Sivberg & Uden, 2002). On the other hand, transactional leadership deals with day-to-day operations in a consistent environment (Lindholm, Sivberg & Uden, 2002). The journal article is able to contribute to this theory by providing different applications of both leadership styles. Using a specific quantitative research design, the authors were able to reveal four types of leadership styles that nurse managers usually use. These types are categorized between being predominantly transformational and being predominantly transactional. Afterwards, the article makes a connection between the number of problems that arise in the work place for nurse managers and the category where their leadership styles fall under.

This research design involved interviews with 15 nurse managers from three different hospitals (Lindholm, Sivberg & Uden, 2002). The questions in the interview touched on topics such as visions, possibilities, barriers, and nursing management. The design has both advantages and disadvantages. Its advantage lies in its diversity. The respondents for the interviews varied in gender, age (with the mean being 46), educational background, and leadership experience (with the mean being 15 years of experience) (Lindholm, Sivberg & Uden, 2002). This diversity makes for a more interesting and expansive research study. However, its disadvantage lies in the vagueness of the interviews. The quantitative aspect of the research design is only limited to the procurement of the samples. The rest of the interview, especially regarding the leadership style itself, should have had more quantifiable elements.

However, the design still seems to have produced quality results and, consequentially, conclusions. As mentioned above, the results include four leadership styles that nurse managers usually implement in their own experiences: hierarchical authority, hierarchical adjustment, career approach, and devotional approach (Lindholm, Sivberg & Uden, 2002). The results were then connected to the theories discussed in the literature review. Hierarchical authority is transactional; career approach is transformational; and both hierarchical adjustment and devotional approach are a combination of transformational and transactional (Lindholm, Sivberg & Uden, 2002).

The conclusion then makes significant use of the results of the research, further noting that the nurse managers who use either the hierarchical

authority or the career approach experience fewer problems compared to those who use the other styles of leadership. The journal article's conclusion is that leadership styles that are clear instead of ambiguous prove to be a better option for nurse managers if they want to rise above the ever-changing healthcare systems.

References

Lindholm, M., Sivberg, B. & Uden, G. (2002). Leadership styles among nurse managers in changing organizations. Journal of Nursing Management, 8, 327 – 335.

Oyinlade, A. O., Gellhaus, M. & Darboe, K. (2003, July). Essential behavioral qualities for effective leadership in schools for students who are visually impaired: A national study. Journal of Visual Impairment and Blindness, 389 – 402.

Prather, S. E., and Jones & D. N. (2003). Physician leadership: Influence on practice-based learning and improvement. The Journal of Continuing Education in the Health Professions, 23, S73 – S72.