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Master Dissertation

**The importance of supportive leadership on general self-efficacy and management crisis
in the era of covid 19 pandemic within the Omani hospitals**

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" أهمية القيادة الداعمة في تنمية القدرات و إدارة الأزمات زمن جائحة كوفيد 19 بمستشفيات السلطنة.

The importance of supportive leadership on general self-efficacy and management crisis in
the era of covid 19 pandemic within the Omani hospitals

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Declaration

I acknowledge that the scientific material contained in this thesis has its scientific source identified, that the content of the thesis is not submitted for obtaining any other scientific degree, and that this thesis reflects the researcher's own opinions. It is not necessarily the opinions adopted by the donor.

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God be with you.

Dedication

This work is dedicated to

Almighty God,

My wife...soul mate and wing partner,

My dear children, my God, prolong their lives and enlighten their paths with knowledge and
faith,

My brothers and sisters... always made me feel the value of success,

My friends, who encourage and support me,

All the people in my life.

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Abstract

Background

Applying the principles and skills of management and what is the role of supportive leadership in crisis situation, including planning, organizing and leadership skills, will greatly help to improve the quality of health care workers during crises. This is even more important during crisis management, such as the COVID-19 crisis. The objective of the present study was to analyze how supportive leadership applies the concepts and abilities of leadership during crisis management.

Methods:

A qualitative conventional content analysis approach was used to discover the role of leadership style in the COVID-19 crisis. The present study was conducted in one hospital in Ibra (North Sharqiya governorate) all health care workers in different positions such as head nurse, matron, supervisor and staff nurses. The study was carried out in 2021 and the data collected method Questionnaires are distributed through online survey tools to all staff nurses in Ibra Hospital. The total staff respondents' samples were composed of 222 staff nurses.

Result:

The result of this study, supportive leadership can assist nurses in developing personal psychological resources in a challenging setting. By offering an ear to hear and a shoulder to lean on, supportive supervisors can help employees cope with the stress and anxiety that comes with Covid-19.

Conclusion:

Management is one of the activities that the manager must be constantly aware of the activities of his subset. This requires a constant presence in the workplace and communication with all health care staff. Also, training staff and managers in crisis management is one of the most important issues in any organization. In order to successfully overcome unanticipated moments of crisis, top managers must be knowledgeable and skilled. Because if organizations are not adequately managed during a crisis, other issues will definitely arise.

Keywords: COVID-19, Oman, public health, disease surveillance, One Health, health care system, pandemic

ملخص الدراسة

خلفية:

إن تطبيق مبادئ ومهارات الإدارة وما هو دور القيادة الداعمة في حالات الأزمات ، بما في ذلك مهارات التخطيط والتنظيم والقيادة ، سيساعد بشكل كبير على تحسين جودة العاملين في مجال الرعاية الصحية أثناء الأزمات. هذا أكثر أهمية أثناء إدارة الأزمات ، مثل أزمة COVID-19. كان الهدف من هذه الدراسة هو تحليل كيفية تطبيق القيادة الداعمة لمفاهيم وقدرات القيادة أثناء إدارة الأزمات.

طرق:

تم استخدام نهج تحليل المحتوى التقليدي النوعي لاكتشاف دور أسلوب القيادة في أزمة COVID-19. أجريت الدراسة الحالية في مستشفى واحد في إبراء (محافظة شمال الشرقية) لجميع العاملين في مجال الرعاية الصحية في وظائف مختلفة مثل رئيس الممرضات والمسؤولة والمشرف والممرضات. أجريت الدراسة في عام 2021 وتم توزيع استبيانات طريقة جمع البيانات من خلال أدوات المسح عبر الإنترنت على جميع الممرضات العاملين في مستشفى إبراء. تألفت عينات المجيبين من الموظفين من 222 ممرضًا.

نتيجة:

نتيجة هذه الدراسة، يمكن للقيادة الداعمة أن تساعد الممرضات في تطوير الموارد النفسية الشخصية في بيئة مليئة بالتحديات. من خلال منح أذن تسمع وكتفًا للاعتماد عليها، يمكن للمشرفين الداعمين مساعدة الموظفين على التعامل مع التوتر والقلق الذي يصاحب Covid-19.

استنتاج:

الإدارة هي أحد الأنشطة التي يجب أن يكون المدير على دراية بها باستمرار لأنشطة مجموعته الفرعية. وهذا يتطلب وجودًا مستمرًا في مكان العمل والتواصل مع جميع موظفي الرعاية الصحية. كما يعد تدريب الموظفين والمديرين على إدارة الأزمات من أهم القضايا في أي منظمة. من أجل التغلب بنجاح على لحظات الأزمات غير المتوقعة ، يجب أن يكون كبار المديرين على دراية ومهرة. لأنه إذا لم تتم إدارة المنظمات بشكل مناسب أثناء الأزمة ، فستظهر بالتأكيد مشكلات أخرى.

1. Chapter One: Introduction

1.1- Background

Nowadays, leadership is the most exciting topic of research. Researchers are focusing on the impact of leadership on performance. Over the last two decades, studies exploring the impact of transformational leadership on follower outcomes have dominated leadership research. Transformational leadership is a leader's ability to inspire people to put their interests aside to achieve a common purpose (Bass, B. 1985).

As healthcare systems worldwide continue to experience persistent and turbulent change, there is unprecedented excitement and opportunity for healthcare professionals, especially nurses, to provide effective and visionary leadership to address the challenges and impacts of system reform. (Duncan et al., 2014.). Effective leadership practices that address these challenges must be based on current empirical evidence on the impact of nursing leadership styles on nursing outcomes. Leadership is studied in many fields, including psychology and education, the military, management, health care, and nursing. Leadership conceptualizations are generally defined by four key elements leadership (a) is a process, (b) entails influence, (c) occurs within a group setting or context, and (d) involves achieving goals that reflect a common vision (Hunt, 2004; Northouse, 2007; Shaw, 2007; Shortell & Kaluzny, 2006). Nurses can use supportive leadership as a job resource to help them improve their psychological capital, which is a personal resource. (Schaufeli & Taris, 2014).

The position of any manager is essential for any business in guiding the workers to attain the desired objectives and quality of service. However, high service quality and worker happiness need strong leadership management to meet organisational objectives. Transformational leadership styles are used because of their tremendous impact in gaining an advantage; it has become a must to increase the competitiveness of businesses' quality of life it is practical. (Northouse, 2013)

Crisis management is a series of activities carried out in a planned, systematic and rational manner to eliminate a state defined as a crisis. Its system allows initiating a step-by-step decision-making process and forming teams to apply those decisions and make new ones based on practical results. Three types of process management are commonly used to overcome crises in organisations: Pre-crisis, crisis and post-crisis management. In the pre-crisis process, management aims to sense crisis indicators and translate crises into performance. Crisis

management is a type of management in a crisis state, a stage in which a potential crisis state is predicted, and the necessary precautions are taken to achieve it. Avoid crises. After the crisis is over, the post-crisis process begins. At this point, executives should find the right solutions for change and bring a new dimension to their activities and strategies (Bayazit et al., 2003).

In the last several years, the research of leadership in health care increased and researchers have their interest in the role that leaders and leadership play in health organizations. This dissertation seeks to analyse how supportive leadership applies the concepts and abilities of leadership during crisis management. In this research, the manager's leadership style in COVID-19 crises will be examined.

1.2- Problem Statement:

During times of crisis, the health sector in Oman has several hurdles that prevent it from achieving its objectives, the most significant of which is its inability to provide the people with adequate health services. The process of training health cadres, as well as a lack of qualified cadres, to provide intensive care to patients and from this, the problem of the study can be summed up as clarifying proposals to activate the role of leadership in health institutions in how to manage crises and the participation of all health cadres in developing solutions and proposals to face any future crisis. A crisis is an unpredictable situation that disrupts the normal functioning of an organisation and requires immediate action Behavior.

This is necessary because crises are unpredictable and override normal processes for effective crisis management and solid leadership skills. Crisis Management Plans Can Minimise Losses Potential crises and make sure to prepare for them. It is wrong to see crises as human destiny organisations, so resignation, not taking precautions, and not having crisis plans are also wrong. Suppose the organisation has never faced a crisis.

And Dr. Kazem indicated that the biggest problem lies in human resources and the resignation of some cadres, especially nursing cadres, and the Ministry of Health suspended the resignations during the height of the pandemic for a certain period of time, but with this the Ministry continues to attract human resources on an ongoing basis from some countries such as India and the Philippines, and they are rehabilitated and trained under The supervision of qualified cadres, and there was cooperation between the various health sectors in the Sultanate, and the private health sector was able to accommodate 250 patients suffering from "Covid-19",

and the sector was able to build its capabilities quickly to deal with the pandemic. Dr. Kazem pointed out that the statistics until January 2022 AD show the admission of about 27 thousand and 20 patients in hospitals and in the intensive care unit, 7 thousand and 83 patients, representing 26% of the total hospitalized patients. (Jafer, k 2022). The Sultanate has taken care, from the beginning of the disease's spread, to take all the necessary steps to combat this epidemic and decrease the number of injuries and deaths.

Several serious illnesses have existed throughout history, but the most significant was infectious disease. These diseases have begun to spread from one place to another and have caused many deaths in most communities. According to the World Health Organization (WHO), several outbreaks and epidemics have occurred during the past ten years. These infectious illnesses impact the whole world, and all nations face problems from these diseases (SARS and MERS). COVID-19 is the most recent infectious illness to impact the world and begin to spread over the nations. When COVID-19 begins to spread, it initiates a global emergency and raises the worldwide alarm.

COVID-19 began in Wuhan, China, and it was the first location where this infectious illness was detected on December 31st 2019; nevertheless, the source of this infection and its temporary name, 2019-nCoV, are unknown. In 2020, on February 11th, the city received its official name (COVID-19). From the first several months, COVID-19 began to spread, and the United Nations provided \$15 million in assistance. On March 7th, the number of cases surpassed 100,000, and on March 11th, WHO proclaimed the outbreak a pandemic.

“Covid 19” is a modern and sudden disease that has confused all countries of the world and caused all countries to live in isolation from the rest of the world, causing economic and human losses, particularly among medical personnel, including doctors, nurses, technicians, and all health sector workers, as they are more susceptible to infection than others. The dread of catching the illness or transferring it to their family is one of the most harmful consequences for medical professionals.

To resolve these issues and halt the spread of illness, rigorous measures have been implemented globally. They begin with social isolation, the use of face masks, the cessation of international travel, the teaching of good handwashing practices, and the development of a COVID-19 vaccine by scientists. In April, the number of COVID-19 cases skyrocketed to one

million, prompting authorities to implement a lockdown. On December 31st, 2020, they will begin distributing the vaccine after WHO approval. We learnt from COVID-19 that we must prepare for future infectious disease epidemics and emergencies. In addition to what was reported in Al-Bukhari and Muslim on the authority of Anas bin Malik, may God be pleased with him, on the authority of the Prophet, may God's blessings and peace be upon him, who said, "The plague is a testimony for every Muslim.

" Furthermore, among them is what Aisha, the mother of the believers, was said to have said by Al-Bukhari, may God be pleased with her: "I asked the Prophet of God, may God bless him and give him peace. It is evident due to the pandemic. This is the way of the leader Amr ibn al-Aas when the plague spread in besieging the disease and preserving people's lives; To contemplate, may God be pleased with him, about the nature of the plague; For his thousand spreads when the people gather, and he commands them at once to disperse in the countryside and in the mountains; The plague ended in three days, and this is the wisdom of the wise leader in making the decision.

This study intends to give recommendations and perspectives for activating the role of health sector leaders in the Sultanate to tackle potential future crises.

1.3- Research Questions:

There are three research questions were raised as follows:

-To what extent the supportive leadership is impacting the self-efficacy and the crisis Management.

-To what level self-efficacy among health staffs is playing an important role on managing the crisis on the Omani Hospitals?

-What is the kind of influence that have the supportive leadership on the health staff 's self-efficacy.

RQ1: What is the relationship between supportive leadership and general self-efficacy?

RQ1: What is the relationship between supportive leadership and crisis management?

RQ1: What is the relationship between general self-efficacy and crisis management?

1.4- Research Objectives:

This study aims to achieve the below objectives:

This research aim:

- To analyze the crises management statement of fact.
- To draw attention to the policy maker in health care system in Oman.
- To draw attention to the top management about important of leadership style and how the leadership style make contribute to the staff performance.
- To analyze why employees should have the self-confident and mainly the self-efficacy to deal with the situation in the crises period.
- To understand the nature of the relationship between the leadership, self-efficacy and crisis management to create frame work that can be used by policy maker while think inking about maintaining resistant about crisis management.

1.5- Significant of the Study

This research will provide new insights into the how supportive leadership help the staff during crisis management. Through this research, the top leader will further realize how the staff need support during crisis and how the leadership style will help the staff performance and to give good quality of care. Moreover, the analysis that is presented in this study will convey valuable information for future research that will explore the benefit to use the leadership style during work and especially during crisis. This study is significant because it demonstrates the function of supportive leadership in guiding healthcare care workers in hospitals and how the leadership style affects healthcare workers during crises, particularly during the COVID 19 outbreak.

The sample was gathered from several health care professionals at Ibra Hospital in Oman. The Sultanate, represented by the Ministry of Health, has provided all supplies, including (increasing cadres - medicines - hospital beds - ventilators - oxygen cylinders - ambulances - and protective equipment), to limit the spread of this epidemic and work to overcome all the challenges faced by health care workers.

Leaders who are encouraging and motivating inspire and motivate their following. Supportive leadership, as a job resource, connects with nurses' psychological capital, which is a personal resource, according to the job design resources model (Bakker, 2011).

Support from leaders can energise employees' psychological resources, i.e., psychological capital (confidence, hope, resilience, and optimism), according to the psychological resources theory (Gorgievski et al., 2011). This will assist them in improving their well-being at work. It is projected that when nurses perceive their leaders to be helpful, their psychological capital will increase, leading to nurses improving their well-being.

1.6- Operation Definitions

According to Sakiru et al. (2013), supportive leadership is essential for building a good and successful company, and the leader must be able to adapt his or her style based on the circumstances. In addition, helpful leadership involves characteristics such as offering support, caring for followers, and listening to and empathising with them. (House, 1981).

Supportive leaders inspire their subordinates to put in extra effort and go above and beyond what they (the subordinates) previously expected. Transformational leaders encourage their subordinates to enhance their potential for success and build their creative problem-solving skills, resulting in the best performance from their subordinates. Relational analysis revealed that every transformational leadership conduct has a substantial positive relationship with organisational performance, as expected (Koech & Namusonge, 2012).

As first described by Bandura in 1977, self-efficacy refers to a person's confidence in his ability to do his task in ways that result in positive results. Also, Marks et al. said that stronger self-efficacy leads to better results, and if the outcomes improve, the job pressure on health care employees will decrease.

Crisis management is obtaining and assessing crisis indicators to determine the risk of a future crisis and taking and implementing the essential procedures to minimise the loss in a crisis. In this regard, crisis management needs quick and effective decision-making and quick correction. (Akdemir, 1997).

1.7- Dissertation structures

This chart illustrates the structure of this dissertation.

✓ Chapter 1 Introduction

The background of the chosen issue is presented in this chapter, followed by the problem statement. In addition, it responds to the research's goals and objectives. The importance of the research and the operational definitions are highlighted at the end of this section.

✓ Chapter 2 Literature Review

This section displays the research-related publications. It also establishes the conceptual framework for the study and underlines the research hypotheses.

✓ Chapter 3 Methodology

In this section, the research approach in use is discussed. It also offers a brief summary of the study's data collection and samples, as well as the research methodology, strategy, and framework. This chapter also covers questionnaire design and concludes with a discussion of validity and reliability.

✓ Chapter 4 Data Analysis and Findings

The outcomes of the data collecting and analytical methodologies used are presented in this chapter. The descriptive analysis of personal demographics as well as the study's factors is given first. The study samples are then checked for normalcy and dependability. The following section puts the theories to the test and draws results. Finally, the theoretical underpinning for the investigation is presented in this chapter.

✓ Chapter 5 Conclusions and Recommendations

This section summarizes the thesis' results and draws conclusions. The report concludes with recommendations for decision-makers and execution. This chapter concludes with a discussion of the dissertation's limitations as well as recommendations for further research.

2. Chanter two: Literature Review

2.1- Introduction

A leader's leadership style is considered to be a combination of several qualities, attributes, and actions that they use for interacting with their subordinates. Leadership as a pattern that is connected to the management style that is intended to combining the business or personal motivation and outcomes for accomplishing specific objectives. Mitonga, J. & Coetzee, M., (2012). They are so many types of leadership style transformational, transactional, democratic, charismatic, bureaucratic, and autocratic and this study has provided deep insights of the impact of supportive leadership style.

2.2- Supportive leadership

Leaders are agents of change, and progress is change. Leadership is about raising followers' aspirations and inspiring people to aspire to stars. A leader needs to build trust in his followers. He should help them understand that tough times are part of life and that they will get better in the end. He must maintain their hope and energy to face tough times when leaders must create hope. He had to make up a plausible story about a brighter future for the organization. There are five leadership theories, and research styles are essential to all leaders. With these five leadership styles, managers build trust and credibility in a team. Supportive leadership is defined as leader behavior that tries to meet needs, cultivate good attitudes, and increase follower confidence. Leaders with are also concerned about and respectful of their followers. This results from a deep friendship that is entwined with constant engagement. Yu (2017). A leader's attitude encourages followers to satisfy their wants and well-being.

Furthermore, leaders with Supportive leadership strive to establish a welcoming and psychologically helpful work atmosphere for their subordinates. Shin is also supported regarding leaders' social and emotional support for their followers. Chih et al. (2018).

2.2.1- Directive:

The directive leader not a dictator, but you're pretty clear about your team's performance goals. They have a flair for building structure and clarifying individuals' ideas of their jobs. You tend to micro-manage when necessary – which is not always bad because some situations

require it. According to Yelamanchili, Stein et al. (2020), Supportive leadership leaders pay attention to their followers' problems.

2.2.2- Supportive:

The supportive leader is friendly and sympathetic. They care about their workers and treat them with dignity and respect. As a result, your staff feel valued and cared for. They look to you for guidance and support during transition times (a global pandemic or emergency). With Supportive leadership, the leader must show his concern and support for his followers while also boosting team cohesion. (Yelamanchili, 2019).

2.2.3- Participative:

If you are the type who works hard to gain staff buy-in by requesting feedback, you are a participative leader. You encourage employee participation in decision-making by assuring them that their opinions will be – and have been – taken into account. You communicate directly with employees depending on the situation; other times, you give your authority to employees who make decisions. According to Lin & Ling (2021), SL is a leadership style that fully supports followers' labour, incentives, and emotional attention.

2.2.4- Achievement-Oriented:

You are achievement-oriented if you believe you and your team can always perform better and push each other to accomplish higher goals. You enjoy achieving “stretch” goals and promoting ongoing development. Employees are also empowered and given autonomy, expecting to do their personal and team-best. You always have faith in the abilities of individual personnel and teams. A study was done by Lumbasi, K'aol & Ouma (2016). The achievement-oriented leadership style has a considerable beneficial influence on employee performance, according to 84 senior managers from 13 organisations that had won the Company of the Year Award in Kenya.

2.2.5- Transformational:

Most people want to be transformational leaders. If you are, you are a visionary leader. You have a vision for the future and model and convey your dedication to it. Employees look up to you as an inspiration and follow you because they believe in the common goals you have shared and expressed. The Supporting style was selected because the business leaders believe they support their employees, and employees believe otherwise. As a result, employees seek assistance elsewhere. Working under a supportive manager is more important to job searchers than businesses realise. A helpful manager recognises the value of eliciting employee input and is open to inquiries, comments, and suggestions. It improves workplace team spirit. According to Kirkan (2011), Transformational leadership is a leadership style in which a leader identifies those following the organisation's difficulties and uses inspiration, persuasion, and excitement to reach a high level of clear vision to recognise common goals.

Supportive leadership usually empowers workers and works as a mediator to resolve any issue between interpersonal conflict and employee commitment (Steve & Jex, 2005). (Fetter, 1990) define supportive leadership in terms of general support for the efforts of followers and behaviours on the part of the leader that indicates he/she respects his/her follower and is considerate of follower feelings and needs; supportive leadership behaviour can influence a variety of outcomes.

Teachers' feelings of competence, self-efficacy, and motivation are enhanced by (supportive leadership behaviour) that involves the leader's encouragement of their professional and personal growth. Graen & Cashmen (1975). Then, House's (1971) route goal theory was presented to describe four leadership styles for various attitudes and circumstances. These include directive, supporting, participatory, and goal-oriented characteristics. House (1971) asserts that a leader's role is to aid his followers in achieving their goals by offering guidance and encouragement and ensuring that their objectives align with those of the company.

Supportive leadership is the conduct that prioritises the well-being of workers and demonstrates profound care for their needs, preferences, and satisfaction (House, J 1971).

Supportive leaders create an atmosphere favourable to respect, trust, collaboration, and emotional support at work (Daft, 2005; Gibson et al., 2000). Supportive leadership gives followers customised attention, pays to and reacts to their unique needs, and focuses on providing them with social and emotional support (House, 1981; Rafferty & Griffin, 2004).

Furthermore, supportive leadership is shown by empathising with followers, listening to them, and caring for them (House, R 1981).

2.3- Self-efficacy

As first described by Bandura in 1977, self-efficacy refers to confidence in their ability to engage in behaviour (s) that may result in desired results. Marks et al. (2005) hypothesised that more self-efficacy is related to improved results and that improved outcomes lower the demand for health services. Self-beliefs about competence have been studied as self-confidence and self-efficacy. Even though these two phrases are occasionally used interchangeably (Feltz et al., 2008), Bandura (1997) contrasts this with his concept of self-efficacy, which addresses people's beliefs in their capacity to execute the needed abilities in a specific context. Bandura (1997) asserts that self-efficacy is crucial for self-regulation in various life circumstances.

Self-efficacy is described by Chemers, Watson & May (2000) as the individual's perception of his or her ability to execute the duties required to fulfil various leadership responsibilities successfully. Task-specific or state-like self-efficacy is a motivating state.

They are four major psychological processes that affect human functioning through self-beliefs:

2.3.1- Cognitive Processes:

Self-efficacy beliefs about cognitive processes come in many forms. Many goal-oriented human behaviours are mediated by expectations that embody worthy goals. Personal goal setting is influenced by skills self-assessment. The greater the perceived self-efficacy, the greater the goals people set and the greater their commitment to those goals. People's beliefs about their effectiveness shape the types of expected scenarios they construct and rehearse. Those with high levels of effectiveness can imagine successful scenarios that provide positive guidance and support for performance. Anyone who doubts its effectiveness will visualise failure scenarios and think about the many things that could go wrong. When battling self-doubt, it is hard to achieve much. A significant function of the mind is to enable people to predict events and devise ways to control the events that affect their lives. These skills require effective cognitive processing of information containing many ambiguities and uncertainties (Bandura, 1991).

2.3.2- Motivational Processes:

Efficacy beliefs play a crucial role in motivational self-regulation. Most people are motivated by cognition. People motivate themselves and proactively guide their actions by applying vision. They form beliefs about what they can do. They anticipate possible outcomes of future actions. They set goals and plan action options for a rewarding future. Three types of self-influence drive goal or personal criteria-based motivation. These include self-satisfaction and self-dissatisfaction with personal performance, self-efficacy in achieving goals, and realigning personal goals in response to personal progress. Self-efficacy beliefs contribute to motivation in several ways: they determine the goals people set, how much effort they put in, how long they can persevere in adversity, and their resilience. People who have self-doubt about their abilities weaken their efforts or give up quickly when they encounter obstacles and failures. Those who believe in their abilities will work harder if they do not master the challenge. Strong stamina contributes to achievement. (Bandura, 1991)

2.3.3- Emotional process:

People's beliefs about their ability to cope can affect the stress and depression they experience in threatening or difficult situations and their motivation. Self-efficacy in controlling stressors plays a central role in anxiety arousal. People who believe they can control the threat do not develop destructive thought patterns. However, those who felt they could not cope with the threat experienced high levels of anxiety arousal. They address coping deficiencies. They see many aspects of the environment as fraught with danger. They increase the severity of potential threats and worry about things that rarely happen. Because of this inefficient thinking, they burden themselves and impair their level of functioning. Perceived coping of self-efficacy modulates avoidance behaviour and anxiety arousal. The higher the self-efficacy, the more willing people are to undertake stressful and threatening activities. Human conduct is guided by foresight encapsulating cognised objectives, and personal goal setting is impacted by self-appraisal of capabilities, according to Bandura (1989).

2.3.4- Selection Processes:

So far, the focus has been on efficacy-activated mechanisms that allow people to create healthy surroundings and exert some control on others they come into contact with daily. People are partially products of their surroundings. As a result, personal efficacy beliefs can influence the types of activities and surroundings people choose in their life. People avoid activities and situations that they believe are beyond their ability to handle. However, they gladly accept challenging activities and situations they believe they can handle. People build various talents, interests, and social networks due to their decisions, which shape their life paths. Any factor that influences decision-making can have a significant impact on personal growth.

Perceived self-efficacy refers to people's belief in their capacities to control their functioning and life events. Personal efficacy beliefs influence life choices, motivation, functioning quality, adversity resilience, and stress and depression vulnerability. Four major influences shape people's perceptions of their efficacy. They include mastery experiences, witnessing people who are similar to oneself effectively handle task demands, social persuasion that one has the skills to succeed in specific tasks, and inferences from bodily and emotional states that indicate personal strengths and vulnerabilities. Impediments, difficulties, setbacks, frustrations, and inequalities abound in everyday life. People must have a strong sense of efficacy to maintain the perseverant effort required to succeed. In one study, parents' opinions were linked to overall self-efficacy and, as a result, higher physical activity in teenagers with minor, moderate, or significant congenital heart abnormalities (Bar-Mor et al. 2000),

2.4- Crises management

Kahn and colleagues (2013) state that “conventional methods of crisis management are anchored in a basic engineering mandate: identify and correct the inputs and processes that result in poor outputs.” James and colleagues (2011) emphasised the significance of “crisis handlers” by highlighting not only the “tactical elements of management” during a crisis but also the “responsibilities of leading an organisation in the pre- and post-crisis phases.” Lee and Makhija (2009) stressed the significance of strategic flexibility in crisis management, which, similar to arranging for dependability, may improve leadership efforts. Crisis management refers to the acts of managers who came to power during crisis circumstances, such as those

caused by defective manufacturing, a shortage of raw materials, a deficiency in quality, or inadequate marketing (Gultekin, 2002). Crisis management requires methodical decision-making, the formation of a team to implement these choices, and the capacity to make new decisions to reach practical outcomes as quickly as possible. (Tuz,1996). Mitroff, on the other hand, describes crisis management as “a sequence of internal links or oversight about crises that may endanger the organisation’s primary operations, employees, and managers, as well as its external environment.” (Bozgeyik, 2008). Crisis management may be described as identifying and assessing the risk of a future crisis and taking and implementing the critical actions to sustain minimal loss during a state of crisis. In this regard, crisis management necessitates swift and effective decision-making and promptly rectifying any aberrations. In crisis management, the organisation must respond swiftly and effectively against any state that threatens its survival or impedes its operations. (Akdemir, 1997)

A crisis is an unexpected and unplanned incident that causes an organisation instability and can be caused by internal or external reasons. It is critical to address the reasons that caused the crisis and prevent further escalation from protecting the organisation.

Organisational crises have three main characteristics:

- Typically, the issue poses a threat to the organisation’s survival.
- The problem caught the company off guard, and managers were unprepared to deal with the situation.
- The crisis causes the company to make quick and difficult decisions to save itself.

Regardless of how every organisation tries to prevent crises, crises are unavoidable. Any organisation must work hard and try to handle the situation by creating a crisis management team and strategy to help the organisation reduce future crises. There are several types of crises that can occur in the workplace:

2.5- Types of crisis management strategies

2.5.1- Proactive crisis management

This strategy requires planning for future crises to prevent or reduce their effects on the organisation. To identify threats, monitor them and create plans to reduce the impact on the organisation. For example, keeping an emergency fund or having spare other places if the organisation suddenly stops working constitutes proactive crisis management.

2.5.2- Responsive crisis management

This is a method for dealing with crises that have a minor influence on the organisation. To prevent losing logistics providers, we must keep others ready or enter a partnership, an example of responsive crisis management.

2.5.3- Recovery crisis management

Recovery crisis management assists a corporation in resuming operations following an unexpected setback. For example, after a week of strikes that halted operations, a corporation can negotiate new rises with an employee union to recover from the crisis.

Crisis management is crucial to avoid reputational damage, restore calm and stability, get the organisation back to normal operations as quickly as possible, and keep people safe. It is essential to have a plan because even in a crisis, there is not always an immediate solution. While it may seem easier to ignore a problem or hope it goes away, this strategy rarely works. The issue may get more attention, or the news media will still cover it. When this happens, you want a plan of action and unified information ready. Most organisations develop crisis communication plans that deal with several possible crises. In each case, they outline what steps should be taken, who should do them and how they will be implemented. A crisis plan also includes guidelines on how employees should respond at different stages of a crisis.

2.6- Relationship between supportive leadership and Self-efficacy:

One research done by (Maurer, 2001) based on self-efficacy theory finds that personal efficacy impacts the goals people choose, their aspirations, how much effort they will put in given tasks, and how they encounter difficulties, obstacles and Disappointment. Results also have a self-efficacy associated with Does a person experiences self-inhibited or self-help

thought patterns, how How a person responds to stressful and threatening environments and how well they adapt

The research was done on leadership self-efficacy, and its role in the leadership process is still in its infancy. This study confirms that confidence in one's leadership skills is related to critical leadership behaviour and attempts. Furthermore, it proposes and tests a model of the factors and processes involved in developing leader self-efficacy, thereby extending Bandura's theory of self-efficacy to leadership research. In this study, Bandura's (1986) concept of self-efficacy was extended to the field of leadership research. The literature review supports the contention that high leadership self-efficacy is necessary but insufficient for promoting leadership performance. In addition, based on self-efficacy theory, precursors to leadership self-efficacy were identified. Leadership self-efficacy has been found to predict leadership behaviour and differentiate leaders from non-leaders.

Research over the past two decades shows a consensus on the relationship between self-efficacy and job performance. Current level A meta-analysis by Stajkovic and Luthans (1998) found that 28% of The performance improvement can be attributed to the specific task of the employee's Beliefs. From what they know about high-impact individuals, these leadership findings suggest that leadership researchers have described a person with high self-efficacy in a leadership role for years. Indirect support for this can be found in the leadership literature, which examines the role of confidence in leadership success. One of the most frequently reported findings in the leadership literature is the link between leader confidence and successful leadership.

The association between a leader's self-confidence and successful leadership is one of the most widely documented findings in the leadership literature. Self-confidence is a key trait for effective leadership in every major evaluation. It is undeniable that self-assurance is a key quality for effective leadership. Furthermore, research in the self-efficacy literature (although few) implies that leader self-efficacy views play a role in leadership success. Bandura and his colleagues conducted a series of studies on managerial decision-making that highlighted the significant role that self-efficacy belief plays in the management process by influencing task strategy development, a crucial leadership activity. (See Bass, 1990; House & Aditya, 1997; Northouse, 2001, Yukl & Van Fleet, 1992).

2.6.1- Relationship between supportive leadership and crises management:

True leaders express themselves in crises. On the other hand, true leaders have their solutions, which is why they are optimistic. This energy affects those around them because a crisis state is where people desire to change the environment and make a difference. Standard solutions do not work in a crisis of the following state. True leaders change the status quo and make a difference. Management is not a “duty” in this sense. It is an unavoidable responsibility. Another focus of crisis management is the success factor. It is not just getting the task done but putting all the hallmarks of leadership in the context

A crisis is an unexpected state that affects an organization’s routine operations and necessitates a rapid response. Because situations of crisis cannot be forecast in advance and disrupt normal operations, effective crisis management and solid management skills are essential. A crisis management strategy can help mitigate the effects of a possible disaster and assure crisis preparation.

2.6.2- Relationship between Self-efficacy and crises management

In Ajzen’s theory of planned behaviour and Bandura’s social learning theory, self-efficacy has strong relationships in health-related fields (Ajzen. I 1985). Self-efficacy induces changes in health-related habits, nutrition, and behaviours, according to

Reuter et al.(2010) and Perkins et al.(2012).

Regarding crisis management communications, Mileti and Sorensen(1990) and Mileti and Fitzpatrick (1991) examined self-efficacy, suggesting that self-efficacy should be acknowledged as an outcome variable when crafting messages in response to threats or crises. Through the perception of signals, it is critical to develop behaviours that give protection against a threat or crisis. In such a case, enhancing self-efficacy aims to quickly and effectively notify and instruct persons at risk to take the appropriate protective action.

Effective crisis management depends on the skills of managers, decision-makers, relevant organisations and interested parties involved in specific phases and activities of crisis management. Self-efficacy shows strong correlations in health-related domains, which is evident in Ajzen’s theory of planned behaviour. Discusses self-efficacy concerning crisis management communication and asserts that self-efficacy should be considered an outcome

variable when designing messages to respond to threats or crises. Improving self-efficacy in this situation is to quickly and effectively alert people in potential danger and guide them to take the right actions to protect themselves. We can conclude that the success factors for successful crisis management arise from the state organisation's effectiveness and citizens' voluntary participation, supported by high individual self-efficacy.

2.7- Research Hypotheses

The following hypotheses support this study, which is based on the above-mentioned conceptual framework:

H 1: There is a significant positive relationship between supportive leadership and general self-efficacy.

H 2: There is a significant positive relationship between supportive leadership and crisis management.

H 3: There is a significant positive relationship between general self-efficacy and crisis management.

2.8- Conceptual Framework

Authors	Important notes	Hypothesis/sample	Independent variables/items	Dependent variables/items
1-Bajaba A, etl(2021)	<p>-This study integrates social cognitive theory and conservation of resources theory to argue for the importance of adaptive personality in the emergence of effective leaders during Crisis times, utilizing the crisis of COVID-19 as the context for the study.</p> <p>-they collected data from 116 full-time managers in Saudi Arabia during the COVID-19 crisis and used hierarchical linear regression as the method of analysis.</p> <p>-findings support all of the hypotheses.</p>	<p>H1. Adaptive personality will be positively related to Crisis leader self-efficacy.</p> <p>H2. Crisis leader self-efficacy will be positively related to Motivation to lead during the COVID-19 crisis.</p> <p>H3. Crisis leader self-efficacy will mediate the relationship between adaptive personality and motivation to lead during the COVID-19 crisis.</p> <p>H4. Motivation to lead the during the COVID-19 crisis will be positively related to adaptive performance during the COVID-19 crisis.</p>	<ol style="list-style-type: none"> 1. I can anticipate the political and interpersonal ramifications of my decisions and actions. 2. I can summarize the key issues involved in a situation to others regardless of how much data I have. 3. I can make decisions and recommendations even when I don't have as much information as I would like. 4. I can assess how the members of the general public are being impacted by my unit's actions or inactions during times of adversity. 5. I can determine which information is critical to relay to other units in advance of them requesting it. 6. I can keep others abreast of my work activities without over-informing or under-informing them. 7. I can make decisions and recommendations even under extreme time pressure. 	

	<p>A discussion of the results, contributions, limitations, and future directions is included.</p> <p>-The findings indicate that managers with an adaptive personality are more likely to have increased levels of self-efficacy to lead during the times of a crisis, which supports previous research that has emphasized the importance of personality in the development of one's confidence to perform</p>	<p>H5. Motivation to lead during the COVID-19 crisis will mediate the relationship between crisis leader self-efficacy and adaptive performance during the COVID-19 crisis.</p> <p>H6. Crisis leader self-efficacy and motivation to lead during the COVID-19 crisis will sequentially mediate the relationship between adaptive personality and adaptive performance during the COVID-19 crisis.</p>	<p>8. I can estimate the potential deaths and injuries that may occur as the result of my decisions or recommendations at work.</p> <p>9. I can modify my regular work activities instantly to respond to an urgent need.</p>	
2-Samuel,H,etal (2018)	-aims to provide more insight on the ideas of whether the supportive leadership is able to influence	-The data collection tools will be used for this project are Supervisory Support Scale (SSS) and	-supportive leadership - Supervisor Support Scale. 1 My supervisor recognizes my ability to deliver quality care.	-clinical decision making

	<p>employees' decision making and how leaders enhance their work group effectiveness as well as encourage work group member retention that will strengthen bottom-line performance.</p> <p>-positive linear correlation between Supervisory Support Scale and Nurses decisions at clinical area and the $p=.155$.</p> <p>-The research findings therefore found significant relationships between supportive leadership and decision-making</p>	<p>demographic variables developed by Mc Gilton in 2010.</p>	<p>2 My supervisor tries to meet my needs.</p> <p>3 My supervisor knows me well enough to know when I have concerns about patient care.</p> <p>4 My supervisor tries to understand my point of view when I speak to them.</p> <p>5 My supervisor tries to meet my needs in such ways as informing me of what is expected of me when working with my patients.</p> <p>6 I can rely on my supervisor when I ask for help, for example, if things are not going well between myself and my co-workers or between myself and patients and/or their families.</p> <p>7 My supervisor keeps me informed of any major changes in the work environment or organization.</p> <p>8 I can rely on my supervisor to be open to any remarks I may make to him/her.</p> <p>9 My supervisor keeps me informed of any decisions that were made in regards to my patients.</p> <p>10 My supervisor strikes a balance between clients/families' concerns and mine.</p> <p>11 My supervisor encourages me even in difficult situations.</p>	
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			<p>12 My supervisor makes a point of expressing appreciation when I do a good job.</p> <p>13 My supervisor respects me as a person.</p> <p>14 My supervisor makes time to listen to me.</p> <p>15 My supervisor recognizes my strengths and areas for development.</p>	
<p>3- LiLin, Z. O. (2017).</p>	<p>-The findings showed that leadership style enhances self-efficacy in Malaysian higher education institutions.</p> <p>-It was also revealed that self-efficacy partially mediates the relationship between leadership style and job performance.</p> <p>-The findings imply that the relationship between leadership style and job performance relationship may mediating effected by self-efficacy, and that self-efficacy plays a crucial function within the Malaysia</p>	<p>H1: There is a positive relationship between leadership style and self-efficacy. H2: There is a positive relationship between leadership style and job performance. H3: There is a positive relationship between self-efficacy and job performance. H4: There is a positive indirect relationship between leadership style, self efficacy and job performance.</p>	<p>-leadership style and self-efficacy **According to Albert Bandura (1995),</p>	<p>-job performance</p>

	higher education institutions.			
4- Bajaba, A.etal, S. (2021).	-that managers with an adaptive personality tend to have increased self-efficacy levels to lead during a crisis, resulting in increased motivation to lead during the COVID-19 crisis. -	1. Adaptive personality will be positively related to crisis leader self-efficacy. Hypothesis 2. Crisis leader self-efficacy will be positively related to motivation to lead during the COVID-19 crisis. Hypothesis 3. Crisis leader self-efficacy will mediate the relationship between adaptive personality and motivation to lead during the COVID-19 crisis		
5- Manohar Kulkarni, S. (2018).	-looking at the relationship between supportive leader behavior and employee satisfaction. - supportive behavior of managers was positively correlated to	1-Managers who Exhibit Supportive Leadership Behavior Towards their Employees are More Frequently Will Experience a Higher Employee Satisfaction and Effectiveness in Work.	-Supportive Leadership Behavior.	-Employee Satisfaction

	<p>their satisfaction.</p> <p>-Managers Who Exhibit Supportive Leadership Behavior Towards Their Employees Are More Frequently Will Experience a Higher Employee Satisfaction and Effectiveness in Work.</p>	<p>H2 : The proportion of satisfied/effective employees is same for supporting and non-supporting managers.</p> <p>H3: The proportion of satisfied/effective employees is more for both supporting managers.</p>		
<p>6-Maurya, M. K., & Agarwal, M. (2015).</p>	<p>- Findings of the present study indicate that there was no significant difference between the male and female participants with regard to perceived levels of supportive leadership.</p> <p>- supportive leadership was perceived to be marginally higher by female police employees in comparison to male police personnel.</p>	<p>H- There would be significant differences in the perceived levels of supportive leadership by the male and female civil police personnel. Female police employees are likely to report higher levels of supportive leadership as compared to their male counterparts.</p>	<p>-Supportive leadership. the scale measuring supportive leadership reported by McGilton (2003).</p>	<p>-Mental Health Status and Job Satisfaction.</p>

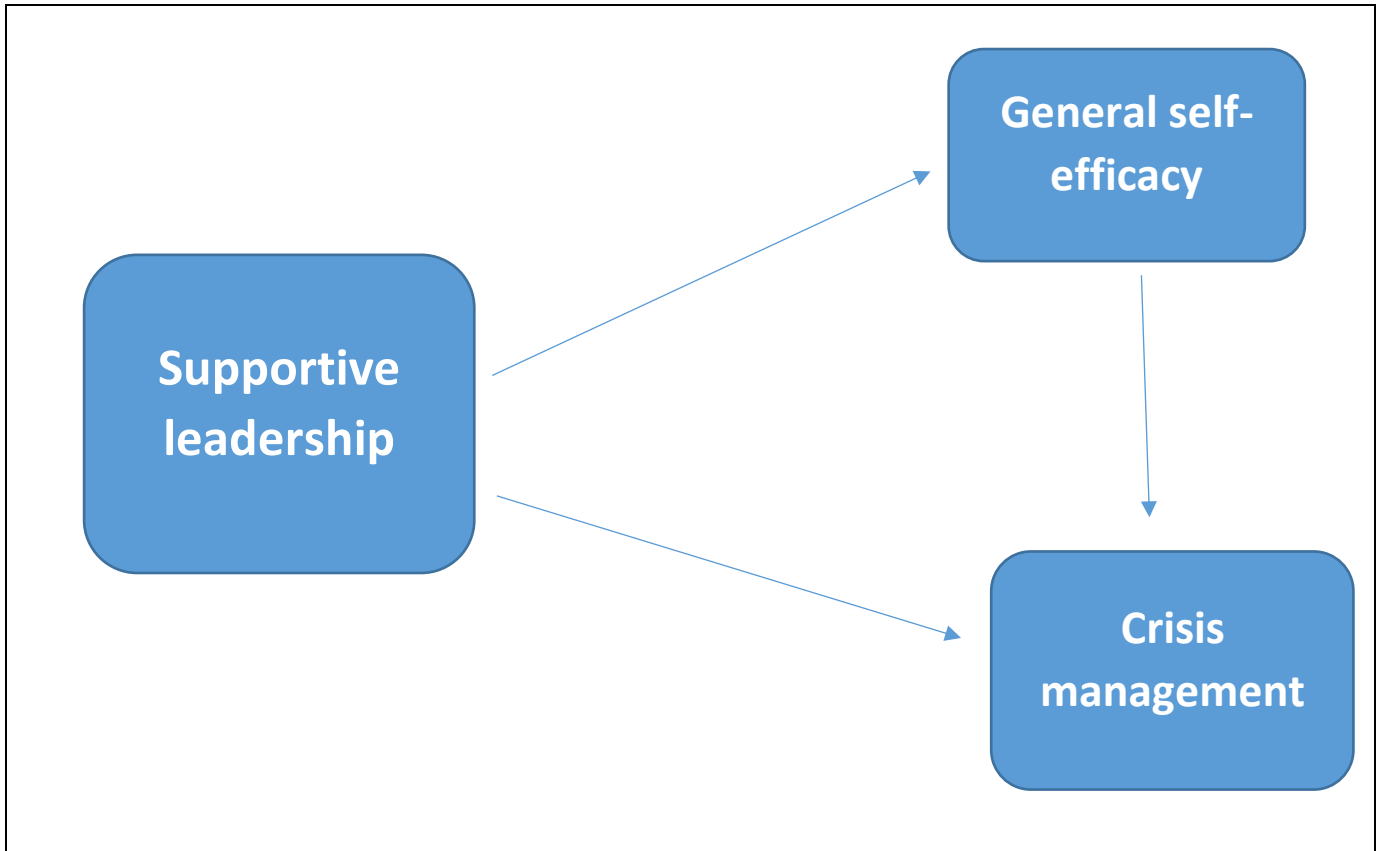
	- supportive leadership for both the male and female police constables.			
7-Ibrahim, S. N. H., Suan, C. L., & Karatepe, O. M. (2019).	-As hypothesized, self-efficacy mediates the relationship between supervisor support and work engagement, while work engagement mediates the impacts of supervisor support and self-efficacy on quitting intentions.	H1. Supervisor support relates positively to self-efficacy. H3. Self-efficacy mediates the relationship between supervisor support and WENG.	-Job resource Supervisor support Four items came from Susskind et al. (2003)	-Personal resource Self-efficacy Eight items borrowed from Chen et al. (2001)
Kanaka, I. W. G. W. (2019).	-Supportive leadership has a positive and significant effect on the performance of user goods managers. This means that the more supportive the leadership of a leader, the better the performance of the goods managers. -supportive leadership can reduce the negative influence of work stress on	H4 : Supportive leadership have a positive effect on the performance of user goods management H5 : Supportive leadership moderates the effect of work stress on the performance of user goods managers.	<ul style="list-style-type: none"> • Supportive Leadership 	<ul style="list-style-type: none"> • Job Stress • Self Leadership • Performance

	employee performance			
Mohsen Mollahadi, etal (2021).	<p>Training staff and managers in crisis management is one of the most important issues in nursing management. responsibility of nursing managers can help solve problems.</p> <p>The nursing manager is a person who responds to the requests and Problems of his organisation. This task includes flexibility, trying to improve staff science, direct supervision of staff, helping to come up with innovative ideas and improving communication skills</p>			
Yang,C, (2009)	improving safety performance by providing a well-managed system that includes: consideration of	1) Consideration leadership is positively related to organization system, safety communication, and manager's	Leadership Style. Leadership Behavior Description Questionnaire (LBDQ). Used 11 items	Safety performance

	<p>leadership, hospital worker training courses, and a solid safety reporting system.</p> <p>leadership behavior and safety culture is related to safety performance.</p>	<p>commitment to safety culture.</p> <p>2) Initiating structure leadership is positively related to organization system, safety communication, and manager's commitment to safety culture.</p> <p>3) Organization system is positively related to safety audit assessment, accident investigation management, and safety system of safety performance.</p> <p>4) Safety communication is positively related to safety audit assessment, accident investigation management, and system of safety performance.</p> <p>5) Manager's commitment is positively related to safety audit</p>		
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		assessment, accident investigation management, and system of safety performance. 6) Consideration leadership is positively related to safety audit assessment, accident investigation management, and system of safety performance. 7) Initiating structure leadership is positively related to safety audit assessment, accident investigation management, and system of safety performance		
Um-e-Rubbab, (2021)	-the findings of this study will enrich relative research on the role of supportive leadership and nurses' well-being and how these factors can improve the health sector. -managers and their subordinates both are	*H1: Supportive leadership during Covid-19 is positively associated with nurses' physical well-being. H2: Supportive leadership during Covid-19 is positively associated with nurses' social well-being.	Supportive Leadership a 15-item scale developed by McGilton (2010)	Psychological capital 24-item scale developed by Luthans et al. (2007)

	influenced by surroundings, supervisors have greater potential to restructure it and managers by interacting with environment and can influence the health of subordinates	H3: Supportive leadership during Covid-19 is positively associated with nurses' psychological well-being		
Salanova, M., (2011).	-A direct relationship between transformational leadership and work engagement was also found. -Data analysis revealed a full mediation model in which transformational leadership explained extra-role performance through self-efficacy and work engagement.	H 1: There is a positive relationship between self-efficacy and work engagement. H 2: 2: There is a positive relationship between transformational leadership and self-efficacy.	Transformational leadership Multifactor Leadership Questionnaire (Bass & Avolio 1990).with a four-item scale	Self-efficacy measured self-efficacy using a self-constructed scale composed of four items (Bandura 2006)



3. Chapter Three: Methodology

The methods used in this study will be explained in the third chapter. The research design, research strategy, research framework, data collection, study population and sample, and questionnaire design will all be covered in this chapter. Finally the topics of validity and reliability will be discussed.

This study addresses the lack of research conducted in Oman about the significance of supporting leadership in the age of covid-19 in Oman's hospitals.

3.1- Research Design:

Research design is the strategy for answering your research question. It defines your overall approach and determines how collect and analyse data. A well-planned study design helps ensure that your methods meet your research goals, collect high-quality data, and use the correct type of analysis to answer your questions using reliable sources. This allows you to draw valid and trustworthy conclusions. The main types of research designs are Quantitative research designs can be divided into two broad categories:

- Correlation and descriptive designs study the relationship between characteristics, means, trends and variables.
- Experimental and quasi-experimental designs are used to test cause and effect. Qualitative research designs tend to be more flexible. Standard qualitative designs include case studies, ethnographic, and grounded theory designs.

This dissertation aims to define the relationship between supportive leadership, self-efficacy, and hospital crisis management. The following parts include the research approach, study population and sample, data collecting, study variable measures, and other research operations.

3.2- Research Strategy:

The following sections discuss research strategies, populations and samples, data collection, measurement of research variables, and other research activities. This research strategy can be used for exploratory, descriptive, and explanatory research. Therefore, it may be deductive or inductive. Descriptive research attempts to characterise a population or phenomenon. Using a descriptive approach, this study aimed to characterise the study population of nurses employed at Ibra Hospital and examine their satisfaction and institutional

loyalty regarding leadership and job quality. Depending on the research needs, researchers can use quantitative, qualitative, or both. This research will use a quantitative method through the distribution of questionnaires to all staff nurses working in Ibra hospital (North Sharqiya).

3.3- Study Population and Sample

The difference between sample and population is that the sample is the population participating in your study. These are the people you end up interviewing (such as in qualitative research) or those who fill out your survey (such as in quantitative research). Individuals who could have participated in your study but did not participate are not considered part of your sample. On the other hand, your population is the wider population to which you want to generalise your findings. Your sample will always be a subset of your population. Your exact population depends on the size of your study. This study has collected 222 responses from staff nurses in Ibra Hospital.

3.4- Data Collection

The broad methods of collecting informative data for research are divided into primary and secondary data. Secondary data are collected from secondary sources such as research-related books, papers, statistics, and archives. (Uma Sekaran, 2016) .Additionally, raw data can be collected through interviews, observations, questionnaire administration, or experiments. Therefore, this paper adopts two data collection methods; secondary data obtained using books and literature and primary data obtained by distributing questionnaires. Using the raw data method, questionnaires are distributed through online survey tools to all staff nurses in Ibra Hospital. The total staff respondents' samples were composed of 222 staff nurses.

3.5- Questionnaire Procedures and Design

The questionnaire for this study went through the following steps:

First, the questionnaire was distributed to academic and non-academic staff for arbitration to ensure the validity of this questionnaire and based on the comments received from reviewers, the questionnaire was adjusted.

Second, the adjusted questionnaire was distributed to approximately 20 serving nurses as a pilot study to test the validity and reliability of the questionnaire.

Third, after reviewing the comments received and verifying the reliability of the distributed sample, agree to generalise the questionnaire and distribute it to the overall sample.

Finally, the questionnaire was distributed to the nursing staff of Ibra Hospital.

3.6- Variables Measurement

A measurement variable is an unknown attribute that can accept one or more values and measure a specific thing. It is frequently employed in scientific study. In contrast to mathematics, measurement variables can take both quantitative and qualitative values.

The theoretical framework of this research consists of two independent variables: general self-efficacy and crisis management.

This research's variables and constructs were measured using statements and measurements from earlier literature, with the researcher's adjustments based on the current situation. A five-point Likert Scale starting with (1) strongly disagree and ending with (5) strongly agree is applied to measure the study variables. A total of 222 responses have been collected from staff nurses in Ibra hospital.

3.6.1- supportive leadership

The effectiveness and production of the organization are significantly influenced by the leadership style. When management uses the right leadership style, the organization will operate efficiently. As a result, harmony between the task environment, management, and employees should be established. (Ukaidi, 2016). One study done in Pakistan in 2015 regarding the leadership styles of Nurse Managers and how they influence nursing staff outcomes, Supportive leadership style of Nurse Managers was positively correlated with staff levels of job satisfaction $p < 0.001$. (Asamani, 2015). And in this study was measured by using 15 items Mc Gilton (2010). Other studies have also used a similar scale for testing supportive leadership style (Samuel et al., 2018; Rodríguez-Monforte et al., 2021)

3.6.2- self-efficacy

Self-efficacy is described as a person's assessment of their capacity to plan and carry out the actions necessary to achieve specified performances. Instead of talents, it is more concerned with one's assessments of what they can do with their skills.(Bandura, 1997).the study done by (Salanova, M., et al, 2011).self-efficacy using a self-constructed scale composed of four items

(Bandura 2006) but in this study used Self-Efficacy Scale was also assessed by ten items created by (GSE) (Schwarzer, R., & Jerusalem, M,1995).

3.6.3- crisis management

The process of gathering crisis indicators, determining the likelihood of a possible crisis, and applying the required controls to a situation in order to suffer the least amount of loss is known as crisis management. (Akdemir, 1997). In surveys, academics have asked respondents how bad they believe the crisis situation to be on a 10- or 11-point scale, for example, in order to gauge the severity of the crisis (Claeys et al., 2010; Laufer et al., 2005; Vassilikopoulou et al., 2009). Other researchers have utilized multiple-item scales, such as Arpan & Pompper (2003), Arpan & Roskos-Ewoldsen (2005), Hong & Len-Riós (2015), to assess participants' perceptions of the seriousness, badness, and extremeness of a crisis. And in this study is measured by seven items and produced by (Kofand Anwar, 2017).

3.7- Questionnaire Design:

Researchers must design a questionnaire appropriately to minimise bias in the study. The principles of questionnaire design must focus on three main stages. The first stage involves the formulation of the problem. The second stage involves measuring and planning the principles of the research question and how variables are classified, scaled and coded. Finally, the third part is the general introduction of the questionnaire.

The questionnaire for this paper was developed with the principles of formulation in mind, providing appropriate question content and emphasising the questions' words, type, shape, and order. In addition, the questionnaire designed for this study also considers the measurement principles that must be followed to ensure that the data collected is suitable for testing research hypotheses, as well as validating the validity and reliability of the methods used. Finally, the questionnaire is designed to reflect the organisation of the questionnaire to general appearance and organising questions. Developed by Mc Gilton (2010), supportive leadership was measured using 15 items. General Self-Efficacy Scale was also assessed by ten items created by (GSE) (Schwarzer, R., & Jerusalem, M,1995). The last component is Crisis Management, which is measured by seven items and produced by (Kofand Anwar, 2017).

✓ **The questionnaire in this research is designed into three sections:**

- 1- The first section starts with an introduction by thanking the participant for agreeing to fill out the survey and also showing the purpose of this research. Also, include the motivation for the participant to answer the questions, and all the study information will be confidential.
- 2- The second section asks the participant about demographic data, for example, gender, nationality, education level, Actual position and Years of experience.
- 3- This section measured attributes of supportive leadership, general self-efficacy and crises management. The end of the questionnaire end with the contact number of the researcher and thanks to word and the sample of the questionnaire attached in the appendix.

3.8- Questionnaire Procedure:

This study's questionnaire goes through the following steps:

1. The questions are collected from various reliable sources, such as published literature.
2. The researcher modified and adjusted the questionnaire questions according to the existing situation and sample population.
3. The supervisor reviews the designed questionnaire and makes comments.
4. The revised questionnaire was sent to academic and non-academic staff from different places to ensure the validity of this questionnaire.
5. Distribute the revised questionnaire to a pilot sample to test its validity and reliability.
6. The pilot sample makes it clear that all questions are straightforward and can be distributed after the questionnaire is verified and tested for reliability; it is distributed to the population sample.
7. The questionnaire was distributed to the population sample after checking validity and reliability.
8. The questionnaire was generalised to the population sample in a short period to verify that all respondents had access to the exact circumstances and that there were no changes due to time constraints.

9. 222 replies were collected for the study's analysis.

The study data's validity and reliability must be considered to reduce the likelihood of uncorrected responses. (Saunders, Lewis, Thornhill, 2009).

3.8.1- Pilot Study

The questionnaire was tested in pilot research using a random sample of twenty-one respondents from the study population to ensure its reliability and validity. Before distributing the questionnaire to the entire research population, the pilot study gives vital feedback from respondents to edit and improve the questionnaire by testing the wordings of questions and detecting ambiguous and unclear questions.

3.8.2- Validity

Validity refers to whether the outcomes are genuinely about what they appear to be, according to Saunders et al. (2009). Validity is also defined as the degree to which the researcher's actions are accurately documented by observations (Uma Sekaran, 2016).

Several precautions were made in this study to ensure the study's validity, as evidenced by the questionnaire design and methodology. For example, questionnaire items were altered based on current conditions from earlier literature. In addition, the validity of the questionnaire was reviewed by the supervisor and other experts for arbitration reasons, and the questionnaire was amended based on 29 received opinions. A pilot study was conducted to ensure the questionnaire's validity. Finally, verify that the questionnaire is generalised and distributed within a short time to ensure that all respondents respond under the same conditions.

4. Chapter Four: Data Analysis and Findings

The data analysis results acquired through the questionnaire using the Statistical Package for Social Sciences are presented in this chapter (SPSS). The following section tests your knowledge with descriptive analysis, including personal demographic and study variables like supportive leadership, General Self-Efficacy and crises management. The following section tests the Normality, Reliability, and Hypotheses and summarises the findings of the hypotheses test. This chapter's final section expands on the previous section, the theoretical framework based on the hypotheses test outcomes.

4.1- The Sample Size Profile

Table 1: Table 1: Distribution of the sample size by gender, nationality, educational level, actual position, and years of experience.

Sample size	segment	Frequency	Percentage (%)
Gender	Male	87	39.2
	Female	135	60.8
	Total	222	100.0
Nationality	Omani	183	82.4
	Non- Omani	39	17.6
	Total	222	100.0
Educational level	PhD	25	11.3
	Master	22	9.9
	BSC	107	48.2
	General Diploma	68	30.6
	Total	222	100.0
Actual position	Manager	14	6.3
	HOD	29	13.1

	Administrative	14	6.3
	Technician	40	18.0
	other	125	56.3
	Total	222	100.0
Years of experience	0-1	39	17.6
	1-5	32	14.4
	5-10	26	11.7
	10-15	38	17.1
	up to 15	87	39.2
	Total	222	100.0

Table (1) provides information on sample size proportions by gender, country, degree of education, actual position, and years of experience. The sample size is around 222, with men accounting for roughly (39.2 cents) and females for approximately (60 per cent) (60.8 percent). Moreover, most respondents are Omani, accounting for around 82.4% compared to non-Omanis (17.6). In addition, the preceding table reveals that almost three-quarters (78.8 per cent) of the sample has a bachelor's degree or general diploma. A minor percentage (9.9 per cent) has a master's degree. In addition, the sample size reveals that technicians are more likely to hold administrative roles than technicians, with 18% of technicians holding administrative posts compared to 6.3% of technicians; nonetheless, more than half of respondents have other occupations. Lastly, while responders with up to 15 years of experience had the most significant rate (39.9%), there are little proportional variations amongst other categories.

4.2- The Level of Supportive leadership

✓ Supportive leadership Descriptive

Table 2: Frequency, standard divisions, and percentage weight for Supportive leadership

Items	Number of responses	Mean	Standard division	Percentage Weight	Rank
My supervisor recognises my ability to deliver quality care	222	4.2883	.68451	85.77%	1
My supervisor tries to meet my needs	222	4.0045	.81556	80.09%	3
My supervisor knows me well enough to know when I have concerns about resident care	222	3.8964	.84183	77.93%	4
My supervisor tries to understand my point of view when I speak to them	222	3.7027	1.08544	74.05%	14
My supervisor tries to meet my needs in such ways as informing me of what is expected of me when working with my residents	222	3.7658	.91201	75.32%	11
I can rely on my supervisor when I ask for help, for example, if things are not going well between myself and my co-workers or between myself and residents and/or their families	221	3.8009	1.00281	76.02%	7
My supervisor keeps me informed of any significant changes in the work environment or organisation	222	3.8153	1.00997	76.31%	5
I can rely on my supervisor to be open to any remarks I may make to him/her	222	3.7387	1.00417	74.77%	12
My supervisor keeps me informed of any decisions that are made regarding my residents	221	3.7738	.95510	75.48%	10
My supervisor strikes a balance between clients/ families' concerns and mine	221	3.6606	.96188	73.21%	15
My supervisor encourages me even in difficult situations	220	3.7364	1.03965	74.73%	13
My supervisor makes a point of expressing appreciation when I do a good job	221	3.8009	1.01632	76.02%	7
My supervisor respects me as a person	222	4.0360	.95062	80.72%	2
My supervisor makes time to listen to me	222	3.8153	1.00097	76.31%	5
My supervisor recognises my strengths and areas for development	222	3.7928	1.00782	75.86%	9
Supportive leadership	222	3.8425	.74764	85.77%	

The table (2) outlines the frequency, standard divisions, and weight % of supportive leadership data elements. The total percentage weight of supportive leadership is around (85.77 per cent) with a mean of (3.84), which is considered to be Consensus (table). The item with the highest percentage weight (85.77 per cent) and mean (4.29) is “My supervisor recognises my ability to provide quality care,” followed by “My supervisor respects me as a person,” and “My supervisor tries to meet my needs,” “My supervisor knows me well enough to know when I have concerns about resident care,” and “My supervisor keeps me informed of any major changes in the work environment or organisation.” In contrast, the item “My supervisor strikes a balance between clients/families’ concerns and mine” has the lowest mean (3.66) and percentage weight (73.21 per cent), followed by “My supervisor tries to understand my point of view when I speak to them “, “My supervisor encourages me even in difficult situations “, “I can rely on my supervisor to be open to any comments I may make to him/her “, and “My supervisor tries to meet my needs in suicidal situations “.

4.3- The Level of General Self-Efficacy Scale (GSE)

✓ General Self-Efficacy Scale (GSE) Descriptive

Table 3: Frequency, standard divisions, and percentage weight for General Self-Efficacy Scale (GSE)

Statement	Number of responses	Mean	Standard division	Percentage Weight	Rank
I can always manage to solve complex problems if I try hard enough	220	3.90	.95516	78.00%	7
If someone opposes me, I can find the means and ways to get what I want	220	3.65	.89582	73.09%	10
It is easy for me to stick to my aims and accomplish my goals	220	4.03	.81307	80.64%	2

I am confident that I could deal efficiently with unexpected events	219	3.90	.88976	77.90%	8
Thanks to my resourcefulness, I know how to handle unforeseen situations.	218	3.86	.82191	77.16%	9
I can solve most problems if I invest the necessary effort.	219	4.11	.75835	82.19%	1
I can remain calm when facing difficulties because I can rely on my coping abilities	217	3.96	.76287	79.26%	5
When I am confronted with a problem, I can usually find several solutions	219	3.95	.75887	79.09%	6
If I am in trouble, I can usually think of a solution	220	4.03	.72728	80.55%	3
I can usually handle whatever comes my way	219	3.97	.79209	79.36%	4
<i>GSE</i>	220	3.94	.67579	78.22	

Source: (SPSS, 2021).

The table (3) displays data regarding the number of responses, average, standard divisions, and percentage weight of the overall self-Efficacy scale. The overall percentage weight of the general self-efficacy scale (78.22) with a mean of (3.94) is considered to be in accordance (table). The item with the highest item rate of the GSE variable is “I can solve most problems if I invest the necessary effort”, with a percentage weight of 82.19 per cent and a mean of 4.11, followed by the item “It is easy for me to stick to my aims and achieve my goals “, " If I am in trouble, I can usually come up with a solution ", " I can generally handle whatever comes my way ", and " I can remain calm when facing difficulties because I can rely on my coping abilities " with percentage weight (80.64%), (80.55%), (79.36%) and (79.26%) respectively.

In contrast, the item "If someone opposes me, I can find the means and ways to get what I want" scores the lowest rate with a mean (3.65) and percentage weight (73.09 percent), followed by the item " Thanks to my resourcefulness, I know how to handle unexpected situations ", " I am confident that I could deal effectively with unexpected events ", " I can always solve difficult problems if I try hard enough ", and " When I am confronted with a problem, I can find several solutions " with percentage weight (77.16%), (77.90%), (78.00%), (79.09%) respectively.

4.4- The level of management of crisis

✓ Management of crisis *descriptive*

Table 4: Frequency, standard divisions, and percentage weight for management of crisis

Statement	Number of responses	Mean	Standard division	Percentage Weight	Rank
Leaders take action to coordinate and communicate with the various department	219	3.79	.75344	75.89%	3
Leaders take proper actions to set up a health and safety system and evaluate the risk management	219	3.81	.74176	76.16%	2
Leaders use qualified and experienced workforces in crises	218	3.73	.74540	74.68%	5
Leaders share information occurs	220	3.75	.76673	75.09%	4
Leaders are gathering data from a quality and quantity view of safety equipment in crises	220	3.73	.74997	74.64%	6
Leaders share information from managers to personnel and vice versa	219	3.68	.80497	73.70%	7
The planning facilities and obtaining them affect the response to the crisis	219	3.84	.77838	76.71%	1
<i>Management of crisis</i>	220	3.77	.63600	75.31%	

The table (4) provides information on the number of answers, average, standard divisions, and % weight of crisis management. The total percentage weight of crisis management is around (75.31 per cent) with a mean of (3.77), indicating a degree of agreement (table). "The planning facilities and acquiring them affect response to the crisis" has the highest item rate of the management of crisis variable, with a percentage weight of 76.71 percent and a mean of 3.84, followed by "Leaders take proper actions to set up a health and safety system and to evaluate the risk management," "Leaders take actions to coordinate and communicate with the various department" Alternatively, the item "Leaders share information from managers to personnel and vice versa" has the lowest rate with a mean of 3.68 and a weight of 73.70 percent, followed by "Leaders are gathering data from quality and quantity view of safety equipment in crises" and "Leaders use qualified and experienced workforces in crises" with means of 3.73 and 3.73 respectively.

4.5- Relational Study Hypotheses

4.5.1- Matrix Correlation of study variables

Table 5: correlations between study variables

Variable	Supportive leadership	General Self-Efficacy Scale	Management of crisis
Supportive leadership	1	.317**	.498**
General Self-Efficacy Scale	.317**	1	.442**
Management of crisis	.498**	.442**	1

Source: (SPSS, 2021)

** Correlation is significant at the 0.01 level (2-tailed).

Table (5) displays the correlation (R) between the studied variables (supportive leadership, general self-efficacy scale, and management of crisis). The link between Supportive leadership and the overall self-efficacy measure is marginally positive and statistically insignificant ($R=.317$, $p=0.0000.01$). Moreover, the association between supportive leadership and crisis management is somewhat favourable and statistically significant ($R=.498$, $p=0.0000.01$). Lastly, the link between the overall self-efficacy measure and crisis management is somewhat favourable and statistically significant ($R=.442$, $p=0.0000.01$). The correlation between the independent variable (supportive leadership) and the dependent variable (General Self-Efficacy Scale).

H 1: There is a significant positive relationship between supportive leadership and general self-efficacy.

4.5.2- The relationship between the independent variable (supportive leadership) and the dependent variable (General self-efficacy scale).

Hypothesis	Null hypothesis (H ^o)	Alternative Hypothesis (H1)
1	The general self-efficacy scale is affected by supportive leadership.	The general self-efficacy scale is not affected by supportive leadership.

Table 6: Regression results between supportive leadership and general self-efficacy scale.

R	R-square	F	Significant (p-value)	constant	Beta of supportive leadership	T-value	Significant (p-value)
0.32	0.10	24.41	0.00	2.84	0.29	12.52	0.00

Source: (SPSS, 2021)

Details of the simple linear regression between the dependent variable (general self-efficacy scale) and the independent variable are provided in the table (supportive leadership). The value of (R = 0.32) indicates that the variables have a weak association, and the value of (F = 24.41, p = 0.000 0.05) indicates that supportive leadership influences the overall self-efficacy scale. Furthermore, the coefficient of determination (R²) indicates that the variable supportive leadership explains 10% of the variance in the overall self-efficacy scale. Also, the values (B=0.29) and (t=12.52, p=0.000.05) indicate that the general self-efficacy scale improves by one unit whenever the degree of supportive leadership increases by one unit (0.32). The equation for regression is as follows:

$$\text{General Self-Efficacy Scale} = 2.84 + 0.29 \text{ Supportive leadership} + \text{error}$$

H 2: There is a significant positive relationship between supportive leadership and crisis management.

4.5.3- The relationship between the independent variable (supportive leadership) and the dependent variable (management of crisis).

Hypothesis	Null hypothesis (H ^o)	Alternative Hypothesis (H1)
2	Management of crisis is affected by supportive leadership.	Management of crisis is not affected by supportive leadership.

Table 7: Regression results between supportive leadership and management of the crisis.

R	R-square	F	Significant (p-value)	constant	Beta of supportive leadership	T-value	Significant (p-value)
0.50	0.25	71.80	0.00	2.14	0.42	11.00	0.00

Source: (SPSS, 2021).

The specifics of the simple linear regression between the dependent variable (management of crisis) and the independent variable are shown in table (). (supportive leadership). The result of (R = 0.5) indicates that the variables have a moderated connection, and the value of (F = 71.80, p = 0.000 0.05) indicates that supportive leadership influences crisis management. In addition, the coefficient of determination (R²) indicates that the variable supportive leadership explains 25.0% of the variance in crisis management. Additionally, the values (B=0.42) and (t=11.00, p=0.000.05) indicate that if the degree of supportive leadership rises by one unit, crisis management improves by one unit (0.32). The equation for regression is as follows:

$$\text{Management of Crisis} = 2.14 + 0.42 \text{ Supportive Leadership} + \text{error}$$

H 3: There is a significant positive relationship between general self-efficacy and crisis management.

4.5.4- The relationship between the independent variable (Self-Efficacy Scale.) and the dependent variable (Management of crisis).

Hypothesis	Null hypothesis (H ^o)	Alternative Hypothesis (H1)
3	Management of crisis is affected by Self-Efficacy Scale.	Management of crisis is not affected by Self-Efficacy Scale.

Table 8: Regression results between self-efficacy scale and Management of crisis.

R	R-square	F	Significant (p-value)	constant	Beta of a self-efficacy scale	T-value	Significant (p-value)
0.44	0.20	52.91	0.00	2.13	0.42	9.32	0.00

Source: (SPSS, 2021).

The specifics of the simple linear regression between the dependent variable (management of crisis) and the independent variable are shown in table (). (self-efficacy scale). The result of (R = 0.44) indicates that the variables have a moderated association, and the value of (F = 52.91, p = 0.000 0.05) indicates that supportive leadership influences crisis management. In addition, the coefficient of determination (R²) indicates that the variable self-efficacy scale explains 20% of the variance in crisis management. Also, (B=0.42) and (t=9.32, p=0.000.05) indicate that every time the level of self-efficacy scale improves by one unit, crisis management increases by one unit (0.32). The equation for regression is as follows:

$$\text{Management of Crisis} = 2.13 + 0.42 \text{ self-efficacy scale} + \text{error}$$

4.6- Questionnaire Reliability

Table 9: The degree of reliability of Cronbach's alpha coefficient

Cronbach's alpha coefficient	Reliability
$\alpha \geq 0.9$	Strong
$0.7 \leq \alpha < 0.9$	Good
$0.6 \leq \alpha < 0.7$	Acceptable
$0.5 \leq \alpha < 0.6$	Poor
$\alpha < 0.5$	Unacceptable

Source: (Schaefer et al,2011).

Table 10: the reliability of questionnaire factors

Study factors	Cronbach's Alpha Coefficient
leadership Descriptive factor	0.95
General Self-Efficacy Scale factor	0.91
Management of crisis factor	0.81
All statements	0.95

To determine if the questionnaire's questions were adequate, the findings of the questionnaire's reliability were confirmed using a sample of thirty (30) questionnaires examined using the (SPSS) software. As shown in table (), the Cronbach's Alpha Coefficient of the questionnaire is 0.95, which is an extremely high value.

4.7- Findings of the Study's Tested Hypotheses

Table 11: Findings of the Study's Tested Hypotheses

Hypothesis No.	The tested hypothesis	Findings	Remark
H1	Supportive leadership during Covid-19 is positively associated with health care workers' general self-efficacy.	The variables have a weak association, and the value indicates that supportive leadership influences the overall self-efficacy scale. Furthermore, the general self-efficacy scale improves by one unit whenever the degree of supportive leadership increases by one unit.	
H2	Supportive leadership lead to adaptive performance and reflect the levels of motivation and performance during the COVID-19 crisis, respectively.	The variables have a moderated connection and indicate that supportive leadership influences crisis management.	
H3	There is a significant positive relationship between general self-efficacy and crisis management.	The variables have a moderated association and indicate that supportive leadership influences crisis management. In addition and indicates that the variable self-efficacy scale explains 20% of the variance in crisis management. Also, indicates that every time the self-efficacy scale improves by one unit, crisis management increases by one unit.	

5. Chapter Five

5.1- Conclusions and Recommendations:

This section summarises the main findings of the study. The second is advice and implementation. The chapter concludes with an introduction to the study's limitations and directions for future research.

A positive association between transformational leadership and occupational self-efficacy has been demonstrated, according to Schyns' (2001) research. Gong et al. (2009) investigated the link between a supervisor's leadership style, specifically TL, and employee self-efficacy. The findings show that TL has a substantial and favourable impact on employee self-efficacy.

Felfe and Schyns (2006) focused on occupational self-efficacy and valued transformational supervisors' leadership. Several academics have investigated the relationship between self-efficacy and servant leadership in several industries, finding that self-efficacy has a favourable impact on performance (Haider and Mushtaq 2017; Kwon and Kang 2017; Song and Kwon 2017; Walumbwa et al. 2010). The following hypothesis is offered based on the findings mentioned above.

Covid-19 is disrupting the healthcare industry and severely impacting the well-being of caregivers. The World Health Organization (WHO) recently issued a warning about the second wave of Covid-19, warning the world that the dangers associated with the pandemic are not over and that health sector personnel must face new challenges associated with this deadly wave infection. Certain management styles, i. H. Supportive leadership, can help health workers build their psychological resources and psychological capital (hope, resilience, self-efficacy, and optimism) to cope with the chaos of the pandemic. It is essential to build and maintain the psychological resources of nurses to restore their emotional, social and physical health to better care for patients and their loved ones. To better understand and empathise with their employees, supervisors at all levels must be briefed and schooled on the issues, challenges, and difficulties they face. As a result, supportive leadership can assist nurses in developing personal psychological resources in a challenging setting. By offering an ear to hear and a shoulder to lean on, supportive supervisors can help employees cope with the stress and anxiety that comes with Covid-19.

From a literature review, this study has developed a conceptual framework which seeks to examine the relationship between attributes of supportive leadership, general self-efficacy and crises management. The study has used an online survey tool to reach the maximum number of staff nurses in Ibra Hospital through shared the URL link of the questionnaire via what's up and staff nurses' emails and collected 222 respondents. This study used the SPSS program to analyse the collected data as well as to examine the study hypotheses to draw several results presented below:

- Personal efficacy, according to research based on self-efficacy theory, determines people's objectives, aspirations, how much effort they will put into a task, and how long they will persevere in the face of problems, obstacles, and disappointments. In light of what is known about highly efficacious persons, these leadership findings show that what leading scholars have been describing for years is a person with high self-efficacy for the role of leader. The leadership literature that has looked into the role of self-confidence in leader success indirectly

supports this. The association between a leader's self-confidence and successful leadership is one of the most widely documented findings in the leadership literature. (Maurer, 2001).

- A crisis is an unpredictable situation that disrupts the normal functioning of an organisation and requires immediate action Behavior. This is necessary because crises are unpredictable and override normal processes. Plan for effective crisis management and solid leadership skills. Crisis Management Plans Can Minimise Losses Potential crises and make sure to prepare for them. It is wrong to see crises as human destiny organisations, so resignation, not taking precautions, and not having crisis plans are also wrong Assume that the organisation has never faced a crisis. If organisations are to achieve their goals, they must Identify potential crises and establish the necessary underlying systems, operational processes and strategies.

According to Peker and Ayturk (2000), A Crisis Call Plan and Crisis Immediate Action Plan will be developed and used for crisis management. Establish a crisis management team and a crisis management team. Crisis communication A sound system ensures the trust and support of the people. Authoritarian management must not be used during this process. On the other hand, disciplinary action to be taken and applied, successful Employees should be rewarded and society should be motivated. Finally, Assessing the Crisis Process and Crisis Management. To sum up, to respond to crises successfully, managers must be knowledgeable and capable leaders. Because if an organisation is not well managed in a crisis, new problems arise unavoidably.

To summarise, to successfully overcome unexpected moments of crisis, top managers must be knowledgeable and skilled. Because if organisations are not adequately managed during a crisis, other issues will arise.

5.2- Limitation of the study:

The fact that we only employed this scale with a group of staff nurses at one hospital is a limitation of our study. However, we feel that this scale is simple to use and adaptable to a wide range of healthcare settings.

5.3- recommendation:

- ✓ The top managers need to organize continuous training programs to make sure that each supervisor is supportive and can act as mentors during the work.

- ✓ To enable employees to understand the importance of social support, they can be allowed to act as supervisors and make direct observations about how their colleagues try to handle challenging service encounters.
- ✓ Supportive supervisors should always share positive feedback received from customers with employees. Such motivational inputs at work would increase staff satisfaction because they would perceive that what they do at work is considered by administration.

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استبيان/SURVEY

..... أخي المشارك / أختي المشاركة تحية طيبة وبعد

يعتبر هذا الاستبيان ضمن متطلبات إكمال المواد المطروحة لإنهاء درجة الماجستير في إدارة الأعمال اختصاص "ادارة اعمال" من جامعة الشرقية، حيث نجري بحث بعنوان: " أهمية القيادة الداعمة في تنمية القدرات وإدارة الأزمات زمن جائحة كوفيد 19 بمستشفيات السلطنة. كما نريد التأكيد على أنه سيتم التعامل مع إجاباتك على هذه الاستبانة بمنتهى السريّة. كما انه سيتم تحليل نتيجة الاستطلاع للأغراض الأكاديمية والعلمية فقط. ستساهم ردودك بشكل فعال جداً في هذا البحث الأكاديمي. لا تستغرق مشاركتك في هذه الاستبانة إلا بعض الدقائق فقط، هذا ونقدم لك بالشكر الجزيل على تعاونك في إجراء هذه الدراسة.

You are kindly invited to participate and contribute to a study entitled:” **The importance of supportive leadership on general self-efficacy and management crisis, in the era of covid 19 pandemic within the Omani hospitals.** This research is for obtaining my Degree in Master of Business Administration at A ‘Sharqiyah University (ASU). There is no wrong or wright answers. Your responses will be treated confidentially and used only for research and academic' purposes. Thanks for taking a few minutes to fill the following survey items.

If you have any inquiries, please do not hesitate to contact the E-mail listed below:

Abufalah11@hotmail.com

The researcher: Saif Mubarak Saif Al falahi

Personal informations		معطيات شخصية	
Gender		الجنس	
Male <input type="checkbox"/>	Female <input type="checkbox"/>	<input type="checkbox"/> أنثى	<input type="checkbox"/> ذكر
Nationality		الجنسية	
Omani <input type="checkbox"/>	Non Omani <input type="checkbox"/>	<input type="checkbox"/> جنسية أخرى	<input type="checkbox"/> عماني
Level of Instruction		المستوى الدراسي	
PhD <input type="checkbox"/>	MBA <input type="checkbox"/>	<input type="checkbox"/> الماجستير	<input type="checkbox"/> الدكتوراه
BSC <input type="checkbox"/>	General Diploma <input type="checkbox"/>	<input type="checkbox"/> دبلوم عام	<input type="checkbox"/> البكالوريوس
Actual Administrative Position		المهام الادارية التي أضطعت بها/الخطط الوظيفية	
General manager/ assistant general manager <input type="checkbox"/>	Director/ assistant director <input type="checkbox"/>	<input type="checkbox"/> مدير/مساعد مدير	<input type="checkbox"/> مدير عام /مدير عام <input type="checkbox"/> مساعد
Department / Section Head <input type="checkbox"/>	Unit head <input type="checkbox"/>	<input type="checkbox"/> مسؤول وحده	<input type="checkbox"/> رئيس قسم
Administrative staff <input type="checkbox"/>		<input type="checkbox"/> اداري	
Technical Position		المهام التقنية / الخطط التي تحتاج التقنية و العلوم	
Very high skilled (Professor, Doctor) <input type="checkbox"/>		<input type="checkbox"/> اطار عالي (طبيب ، دكتور ، ...)	
High Skilled (nurse- lap technicien- pharmacist physiotherapy) <input type="checkbox"/>		<input type="checkbox"/> اطار (ممرض- فني مختبر، علاج طبيعي، صيدلي، ..)	
Number of years of experience.		سنوات الخبرة	
0-1 <input type="checkbox"/>		<input type="checkbox"/> 1-0	
1-5 <input type="checkbox"/>		<input type="checkbox"/> 5-1	
5-10 <input type="checkbox"/>		<input type="checkbox"/> 10-5	
10-15 <input type="checkbox"/>		<input type="checkbox"/> 15 -10	
Up to 15 <input type="checkbox"/>		<input type="checkbox"/> أكثر من 15	

In the following sections you are kindly invited to read well the alternative and then to check () the box that best represents your choice : (1) Totally Agree, (2) Agree, (3) Neutral, (4) disagree and (5) totally disagree.

(في فيما يلي ، يرجى قراءة الخيارات المقدمة اليكم جيدا ثم وضع علامة)
الخانة المناسبة و الاختيار الأنسب لكم علما و ان : (1) موافق بشدة، (2) موافق ، (3) محايد ، (4) غير موافق و (5) غير موافق بشدة ،

Section 01- Supportive leadership: Mc Gilton,2010

الجزء الاول: القيادة الداعمة

Alternatives	1	2	3	4	5	الخيارات
1. My supervisor recognises my ability to deliver quality care.						يدرك مشرفي قدرتي على تقديم رعاية جيدة 1.
2. My supervisor tries to meet my needs.						يحاول مشرفي تلبية احتياجاتي 2.
3. My supervisor knows me well enough to know when I have concerns about resident care.						3.يعرفني مشرفي جيدا بما يكفي لمعرفة متى تساورني مخاوف بشأن رعاية المقيمين.
4. My supervisor tries to understand my point of view when I speak to them.						يحاول مشرفي فهم وجهة نظري عندما أتحدث إليهم 4.
5. My supervisor tries to meet my needs in such ways as informing me of what is expected of me when working with my residents.						يحاول مشرفي تلبية احتياجاتي بطرق مثل إخباري بما 5. هو متوقع مني عند العمل مع المقيمين.
6. I can rely on my supervisor when I ask for help, for example, if things are not going well						يمكنني الاعتماد على مشرفي عندما أطلب المساعدة 6. ، على سبيل المثال ، إذا لم تكن الأمور تسير على ما يرام

between myself and my co-workers or between myself and residents and/or their families						بيني وبين زملائي في العمل أو بيني وبين المقيمين و / أو أسرهم
7. My supervisor keeps me informed of any major changes in the work environment or organisation.						يطلعني مشرفي على أي تغييرات كبيرة في بيئة العمل 7. أو المنظمة.
8. I can rely on my supervisor to be open to any remarks I may make to him/her.						يمكنني الاعتماد على مشرفي في الانفتاح على أي 8. ملاحظات قد أديها له / لها.
9. My supervisor keeps me informed of any decisions that were made in regards to my residents.						يطلعني مشرفي على أي قرارات تم اتخاذها فيما يتعلق 9. بالمقيمين لدي.
10. My supervisor strikes a balance between clients/ families' concerns and mine.						يحقق مشرفي توازناً بين اهتمامات العملاء / 10. العائلات والاهتمامات الخاصة بي.
11. My supervisor encourages me even in difficult situations.						11. مشرفي يشجعني حتى في المواقف الصعبة
12. My supervisor makes a point of expressing appreciation when I do a good job.						يحرص مشرفي على التعبير عن التقدير عندما أقوم 12. بعمل جيد.
13. My supervisor respects me as a person.						يحترمني مشرفي كشخص 13.

14. My supervisor makes time to listen to me.						يخصص مشرفي الوقت للاستماع إلي 14.
15. My supervisor recognises my strengths and areas for development.						يدرك مشرفي نقاط قوتي ومجالات التطوير الخاصة بي 15.

Section 02- - General Self-Efficacy Scale (GSE) (schwarzer, R., & Jerusalem, M. (1995).			الجزء الاول: التمكن و القدرات الذاتية العامة			
Alternatives	1	2	3	4	5	الخيارات
1. I can always manage to solve difficult problems if I try hard enough						يمكنني دائمًا حل المشكلات الصعبة إذا حاولت بجدية كافية 1.
2. If someone opposes me, I can find the means and ways to get what I want.						إذا كان هناك من يعارضني ، يمكنني أن أجد الوسائل والطرق للحصول على ما أريد 2.
3. It is easy for me to stick to my aims and accomplish my goals.						من السهل بالنسبة لي التمسك بأهدافي والسعي لتحقيقها 3.
4. I am confident that I could deal efficiently with unexpected events.						أنا واثق من أنني أستطيع التعامل بكفاءة مع الأحداث غير المتوقعة 4.

5. Thanks to my resourcefulness, I know how to handle unforeseen situations.						بفضل دهاءتي ، أعرف كيفية التعامل مع المواقف غير المتوقعة.
6. I can solve most problems if I invest the necessary effort.						يمكنني حل معظم المشاكل إذا بذلت الجهد اللازم .6.
7. I can remain calm when facing difficulties because I can rely on my coping abilities.						يمكنني أن أبقى هادئاً عند مواجهة الصعوبات لأنني .7. أستطيع الاعتماد على قدراتي في التأقلم.
8. When I am confronted with a problem, I can usually find several solutions.						.8. عندما أواجه مشكلة ، عادة ما أجد عدة حلول.
9. If I am in trouble, I can usually think of a solution						إذا كنت في مشكلة ، فيمكنني عادة التفكير في حل .9.
10. I can usually handle whatever comes my way.						يمكنني عادة التعامل مع كل ما يأتي في طريقي .10.

Section 03- Management of crisis (Kofand Anwar, 2017)			ادارة الأزمات الجزء الثالث :			
Alternatives	1	2	3	4	5	الخيارات
1. Leaders take actions to coordinate and communicate with the various department						يتخذ القادة إجراءات للتنسيق والتواصل مع الأقسام المختلفة
2. Leaders take proper actions to set up a health and safety system and to evaluate the risk management						يتخذ القادة الإجراءات المناسبة لإنشاء نظام للصحة والسلامة ولتقييم إدارة المخاطر
3. Leaders use qualified and experienced workforces in crises						يستخدم القادة القوى العاملة المؤهلة وذات الخبرة في الأزمات
4. Leaders share information occurs						القاده يتبادلون المعلومات فيما بينهم
5. Leaders are gathering data from quality and quantity view of safety equipment in crises						يقوم القادة بجمع البيانات من وجهة نظر الجودة والكمية لمعدات السلامة في الأزمات
6. Leaders share information from managers to personnel and vice versa						يتبادل القادة المعلومات من المديرين إلى الموظفين والعكس صحيح
7. The planning facilities and obtaining them affect response to crisis						تسهيلات التخطيط والحصول عليها تؤثر على الاستجابة للأزمات

