

Government Leadership During the First Year of the COVID-19 Pandemic

by

Brian Alan Hempel

A dissertation submitted in partial fulfillment of the requirements for the degree of

Doctor of Philosophy

May 2022

Dissertation Committee

Chris McHorney, PhD

Monica O'Rourke, PhD

Mary Ann Pearson, EdD

California Baptist University

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The Dissertation of Brian Alan Hempel is approved:

Chris McHorney, PhD, Committee Chair

Date

Monica O'Rourke, PhD

Date

Mary Ann Pearson, EdD

Date

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California Baptist University

Abstract

This study looks to express the impact the COVID-19 pandemic has had on elected county commissioners' leadership and decision-making. The researcher conducted a qualitative study to answer two research questions. In order to answer the two research questions, the researcher used quantitative methods to identify the counties that outperformed all other counties in the United States; the researcher found there are six counties that performed better based on the variables used. From these six counties, the researcher found that there are 81 people serving those counties in the capacity of an elected county commissioner. The first research question looked to find what leadership styles the elected leaders of those counties used to minimize the deaths from COVID-19; the researcher found that elected officials in counties that outperformed all others used the principles of servant leadership, authentic leadership, or a combination of both. The second research question attempted to identify what changes county leaders made to their decision-making during the first year of the COVID-19 pandemic; the researcher found a systematic approach to decision-making that had five major themes: information, awareness, previous experience, human impact, and communication.

Keywords: leadership styles, transformational leadership, transactional leadership, servant leadership, authentic leadership, crisis leadership, COVID-19, county government, decision-making

Dedication

This dissertation is dedicated to my father, Dennis Hempel. You have always shown me the difference between right and wrong and how to compose myself and have always directed my moral compass even if you do not know it. The wealth of knowledge that you have given me has allowed me to succeed more than I could ever imagine. Thank you for being my voice of reason, the most amazing grandfather to Mackenzie and Brooke, and the best dad ever. Thank you!

Acknowledgments

This doctoral experience has been something that I thought would never happen, so to be in the position of writing dedications and acknowledgements for a dissertation is surreal. As a young adult, I never thought that I would obtain a bachelor's degree, let alone finish my PhD. When I started this program, I just finished a 2-year study at the University of Oxford and wanted to know more about leadership. I was full of myself and thought I knew everything I needed to know and just wanted to pick a dissertation topic and start writing. How wrong I was thinking I knew everything.

I would first like to acknowledge and thank Dr. John Shoup for his outstanding leadership, ability to pass wisdom, and for creating and managing this program during the first few “trying” years. Dr. Shoup, your LDR 740 Decision-Making class was one of those classes that changed me and how I approach things going forward. Your class had such an impact that I changed dissertation topics because the information in the class you passed to us was life changing. Next, I would like to thank Dr. Mary Ann Pearson for her ability to help me understand qualitative research methods. Your class and guidance were inspirational. The next person I would like to thank is Dr. Monica O'Rourke, who has been there for me academically and personally. You have taken so much time out of your busy schedule to fit me in to talk about IRB, quantitative research, and including me with leadership presentations this past year.

Finally, I would like to thank my dissertation advisor, Dr. Chris McHorney, who has guided me from being a lost and confused PhD student to one who is still lost and confused but with a better understanding of political science, social capital, and public policy—and how they interact with leadership. Thank you for setting up weekly calls, sometimes monthly calls, and

understanding my lack of consistency in my work over the past 2 years. Your guidance is something that I will never forget.

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CHAPTER 1: INTRODUCTION

In March of 2020 when lockdowns due to COVID-19 became standard and common, the world was transformed into a place of change, separation, fear, and the unknown (Barry et al., 2021; Centers for Disease Control and Prevention [CDC], 2020a). When the Novel Coronavirus (COVID-19) spread from China to Europe, Russia, and across the globe to both North and South America, the lives of everyone were changed (CDC, 2020b). Soon after March 2020, when infections started to rise and the pandemic started, cases began to rise, which was followed by thousands, to hundreds of thousands, to millions infected with COVID-19—which turned into millions of people dead due to the virus (Demir & Gologlu Demir, 2021).

Here in the United States, the numbers grew, and political leaders were put in a situation they had not been in since the 1918 influenza outbreak, which lasted from February 1918 to April 1920 and cost the lives of an estimated 17–100 million people worldwide (CDC, 2020b). With nationwide lockdowns taking place, federal, state, and county leaders were forced to make different decisions that they had never made before and possibly change their leadership style or styles in response to the pandemic (Burns et al., 2021).

Background of the Problem

This study came about because of the researcher's interest in political leaders, how their decisions affect the people in their communities, and what styles of leadership have been effective during the COVID-19 pandemic. When COVID-19 became a reality in the United States, the styles of leadership became the focus of researchers to analyze for future studies. This led the researcher to investigate the different styles of leadership, different theories of decision-making, the COVID-19 pandemic, and different factors of social capital and how those factors affected leaders at the county level of government.

Political leaders make decisions and use leadership theories every day. These political leaders used models, case studies, and theories that they learned in college, the military, the workplace, or while in public office prior to COVID-19 and applied them at the beginning of the first year of the COVID-19 pandemic (Bridgman et al., 2020; CDC, 2021). The researcher believes that, during the pandemic, certain decision-making and leadership styles may have helped county leaders minimize the spread of COVID-19 in counties that historically have poorer health and are denser than the national average. The purpose of this qualitative study was to identify what counties in the United States performed the best in minimizing the spread of COVID-19 during March 2020 to March 2021, to then interview the leaders of those counties, and to communicate the findings from the study to better understand what decision-making theories were used and leadership styles helped them lead their county in the fight against COVID-19. The researcher researched, analyzed, and found leadership and decision-making recommendations for leaders to use and apply as the COVID-19 pandemic continues.

Statement of the Research Problem

Leadership is a highly studied topic that has not been around for long but has been addressed in several different situations. It has been studied through its approaches, its styles, how it is used in organizations, and even the relationships leaders have with their followers. Sorenson and Goethals (2007) wrote that, when we study leadership as a phenomenon, we look for features of it that span different contexts. These different contexts are the part that makes generalizing any part of leadership difficult. Leadership is complex and diverse and has many moving pieces (Yammarino & Dubinsky, 1994; Zwingmann et al., 2014). These differences are what make leadership a difficult topic to theorize. Another roadblock for generalizing leadership is the different parts of leadership. Leadership is special; it is something we see and do every

day, but it is hard to define. Sorenson and Goethals (2007) note, “Psychologists regard leadership as a cocktail of behaviors and types of relationships” (p.).

Leadership is complex and is difficult to theorize, but studies have shown that effective leadership can help organizations (Sorenson & Goethals, 2007). Effective leadership is important, but leadership must adjust to situations and crises. During a crisis, the theory of crisis leadership, which is a form of leadership studies, like educational leadership and organizational leadership, can help move leaders and followers through a crisis and past the problem. Crisis leadership is a very important theory in today’s environment, with most organizations and governments going through one or more crises on an ongoing basis (Fink, 1986). Crisis leadership is an application of leadership approaches and styles during a crisis (Fink, 1986). According to Mitroff (2004), a practical view of crises is as follows:

Crises, catastrophes, and calamities are an unfortunate but inevitable fact of life. They have been with us since the beginning of time. It can be argued that they will be with us until the end of human history itself. In short, they are an integral part of the human condition. They are the human condition. (p. 33)

There are several different theories when it comes to making decisions. In political decision-making, the major theory used is rational choice theory (McCormick, 2011). Rational choice theory is based on the idea that human beings make decisions that bring them the most benefit with the least amount of cost (McCormick, 2011). To do this, the decision-maker must be able to calculate the benefits and weigh them against possible losses in the decision-making process. Rational choice theory states that decisions are made based on costs and benefits and that the decision-maker collects information to weigh the two before a decision can be made (Paternoster, 1989). According to Feiock (2007), the context in which a rational choice is decided is almost as important as any of the other variables that are weighed in the decision being made.

The problem with these previous studies is that they address leadership, crisis leadership, and decision-making before the COVID-19 pandemic, so they are bounded to a time before the pandemic, before government shutdowns, changes to businesses, and unknown timeframes of coming out of a global pandemic. The number of studies on leadership and decision-making during and after the pandemic is missing since the COVID-19 pandemic is less than 2 years old.

The term that is often used is “the new normal,” so with that in mind, the researcher believes that the discussion needs to be started about how county government leaders use leadership styles and decision-making models to ensure their followers are healthy as the COVID-19 pandemic continues with new variants every few months. County leaders need to know that there may be a change to leadership styles and decision-making models due to the COVID-19 pandemic, and this study will help to address the problem, start the conversation, and help other researchers on government leadership during a crisis.

Presentation of Methods

The purpose of this study was to understand what leadership styles and decision-making theories worked best for county leaders to minimize the spread of COVID-19. To ensure that the findings of this study are accurate, the researcher used quantitative methods to identify the counties that outperformed during the first year of the COVID-19 pandemic. The researcher conducted a Pearson correlational coefficient between the independent and dependent variables. The researcher took secondary data from multiple sources looking to find that there is a correlation between the dependent variable and the independent variables. For this study, the researcher obtained data from the Centers for Disease Control and Prevention (CDC) regarding the COVID-19 death rate. For this study, the deaths were counted from the first death contributed to COVID-19 in the United States to the end of March 31, 2021. The researcher

collected data for the 2020 presidential election from Massachusetts Institute of Technology's Election Data and Science Lab. Massachusetts Institute of Technology's Election Data and Science Lab is a leading data-collection center for reporting on all federal elections since 1976. Their data are used by most major news outlets, including Politico, CNN, FOX, and NBC. The final sets of data are based on several social capital factors that were collected by the United States Senate in 2018.

The research looked at several variables that helped the researcher to identify the counties in the United States that best performed in mitigating death during the first year of COVID-19. The independent variables the researcher used in this study were density, percentage of population in fair or poor health, 2020 presidential voting percentage, and the county's social capital index. The dependent variable in this study was the county's COVID-19 deaths-per-100,000 rates.

After using quantitative methods to identify the counties that mitigated the COVID-19 pandemic the best, the researcher conducted a qualitative case study in the attempt to identify leadership styles and decision-making processes that helped the county leaders of the identified counties. Qualitative research is a fantastic way to understand a thing through the words of a sample of the population (Creswell, 2013). Creswell (2013) writes that there are five main approaches to qualitative research that help researchers carry on the words of those that they are researching. These five approaches are instrumental to the researcher and what kind of "story" they are trying to tell in their research. The five approaches are narrative, which tells the story of the individual experience; phenomenological, which looks for the essence of a lived phenomenon; a grounded theory, which is a theory grounded in the views of the participants; an

ethnographic study, which interprets the shared patterns of a culture or group; and lastly a case study, which provides an in-depth understanding of a case or cases (Creswell, 2013).

The researcher used the case study approach to qualitative research. Case studies are broken into two different categories: Creswell (2013) states that the first is an intrinsic case and the second is an instrumental case. An instrumental case is when the researcher aims to understand a specific issue, problem, or concern (Creswell, 2013). A case study is important in qualitative research because the reader gets to experience the situation or situations through those that lived through it (Bloomberg & Volpe, 2016).

The researcher chose an instrumental case study design to focus on the leadership styles and decision-making models of leaders from counties that were shown to outperform others based on the statistical data collection. Case studies are widely used in social science research to understand a social phenomenon (Yazan, 2015). The case study format allowed the researcher to gain an in-depth understanding of the leadership styles and decision-making process of county leaders.

Analysis

In this study, the researcher conducted a statistical multiple regression analysis of every state's county COVID-19 deaths per 100,000, nearly all the counties in the United States and how they voted in the 2020 presidential election, their social capital index, density, and their percentage in fair or poor health to identify county leaders who made decisions that prevented the spread of COVID-19.

The researcher also conducted a descriptive statistical analysis on all the variables to find the mean for each variable. Once the mean was determined, this number was used to separate the counties above or below the mean. The researcher was looking for the counties where COVID-

19 deaths per 100,000 were below the mean, their social capital index was above the mean, their percentage of fair or poor health was above the mean, and their density was above the mean. A review of the remaining counties' 2020 presidential election voting percentage for President Joe Biden showed the political voting during the first year of the COVID-19 pandemic.

The researcher then conducted an instrumental multiple case study to better understand what decision-making and leadership theories worked best during the first year of the COVID-19 pandemic. This was conducted by contacting county officials and conducting a minimum of 12 semi-structured interviews to gain qualitative data that explained the decision-making processes that the county leaders used during the first year of the COVID-19 pandemic and how these decisions minimized the spread of COVID-19.

All data were collected by digitally recording all semi-structured interviews that were conducted by the researcher and the participants. The recordings were transcribed to written form twice to ensure correctness. These transcripts allowed the researcher to code all main ideas and themes that were provided by the participants. The researcher used NVivo software to accurately code and theme all major ideas that were presented to the researcher. The researcher understood the limitations of qualitative research regarding generalization (Creswell, 2013). Tracy (2013) writes that, even though the limitations to qualitative researcher are noted, it does not decrease the benefits and the advantages to learning from the lived experiences that comes from qualitative researcher. Through this analysis, the research was able to identify which leadership style or styles worked best during March 2020 to March 2021.

Research Questions

The researcher hoped to identify these best practices by first identifying which counties in the United States performed the best during the first year of the COVID-19 pandemic based on

the dependent (COVID-19 deaths per 100,000) and independent (2020 presidential voting, county density, social capital index, and percentage of people in fair or poor health) variables.

Once these counties were identified, the researcher sought to answer the following research questions:

1. Which leadership theories offer the strongest explanations of the decision-making of leaders in counties that performed the best (minimized COVID-19 deaths) during the first year of the pandemic?
2. What changes did county leaders make to their decision-making during the first year of the COVID-19 pandemic?

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CHAPTER 2: LITERATURE REVIEW

Introduction

The purpose of the study was to examine what leadership styles and decision-making models were used by county boards of supervisors in counties that outperformed other counties due to the variables identified in the study during the first year of the COVID-19 pandemic. To better understand how to interpret the essence of this study, a literature review was conducted, and the themes of this dissertation are highlighted in the below literature review. These themes include COVID-19 pandemic and other pandemics, leadership, crisis leadership, decision-making, and county government. Leadership styles and decision-making before and during the COVID-19 pandemic were the major context of the study.

The literature review that follows is an overview of COVID-19 pre-pandemic continued through the first year of the pandemic ending in March 2021. It addresses how medical and social intervention has proven to minimize the spread of COVID-19. This section also gives a historical view of other global pandemics from the 1900s and ending with the COVID-19 pandemic. This history of medical pandemics will aid the reader to understand the importance of leadership and decision-making during times of crises like a health pandemic.

Next, the researcher presents findings about leadership and the different styles that are associated. The leadership styles and practical application will allow the reader to understand what the major elements of leadership are and the how they present themselves in the study. Next the researcher addresses crisis leadership, which is addressed separately from leadership styles, because leadership in a crisis has its own specific frameworks and can be applied in many different types of crises. Following leadership styles, the researcher addresses decision-making,

different models, applications, and how decision makers in this study came to make the decisions they made during the first year of the COVID-19 pandemic.

The final section of this literature review addresses county-level government in the United States of America. This information is instrumental when giving the reader an understanding how county-level government fits in with both federal and state government in the United States and its impact during the COVID-19 pandemic.

Theoretical Framework

The purpose of the theoretical framework is to establish a primary framework upon which this study is built. The theoretical framework will assist in creating alignment between previous research and the need for this study. The theoretical framework also provides a core theory and possible sub-theories that are associated with the focus of this research. These theories and sub-theories are then linked to the research that is conducted in this study by demonstrating their connection but also demonstrating why this study is needed. The researcher used the theoretical framework to show that there are gaps in the previous research and that roughly defining the gaps continues the research process.

Crisis leadership is an important theory in today's environment, with most organizations and governments going through one or more crisis on an ongoing basis (Darmody & Smyth, 2016). Crisis leadership is an application of leadership approaches and styles applied during a crisis (Fink, 1986). The application of these leadership approaches and styles can be used by the same leaders in the same organization before and after a crisis, but during the crisis, the application must be deliberate and specific to the crisis (Firestone, 2020).

The intention of this study was to examine what leadership styles and decision-making steps county elected officials took during the first year of the COVID-19 pandemic. As

previously stated, the COVID-19 pandemic was a global crisis that affected everyone. This study looked to identify the leadership styles pre-COVID-19 and what changes were made when the pandemic started and through the first year of the pandemic. The second part of this study looked to identify the decision-making steps before the pandemic and identify the changes made to their decision-making process during the first year of the COVID-19 pandemic. It was the researcher's hope that, by using the crisis leadership framework, the researcher would be able to explain the importance of crisis leadership, fill gaps of how crisis leadership is used during a global crisis like the COVID-19 pandemic, and help further explain what crisis leadership is.

Where this framework is lacking and what this study addresses is that crisis leadership has never been applied to or studied during a global pandemic such as the COVID-19 pandemic. Every previous study, whether on business, government, or a mixture of the both, has never looked at a crisis that has the impact that COVID-19 has had on world, the United States, or the individual counties that make up all 50 states. By using the crisis leadership theoretical framework, the researcher hoped to draw upon the previous lessons and apply them to the global crisis COVID-19 was during the first calendar year.

Pandemics and COVID-19

Pandemic Overview

The major recourse in the United States regarding pandemics and specifically COVID-19 is the Centers for Disease Control and Prevention (CDC), which states that it “collaborates to create the expertise, information, and tools that people, and communities need to protect their health through health promotion, prevention of disease, injury and disability, and preparedness for new health threats” (CDC, 2021, para.). The other major contributor to understanding the current information on public health, pandemics, and COVID-19 is the World Health

Organization (WHO), which was founded in 1948 and is a United Nations agency that connects nations, partners, and people to promote health, keep the world safe, and serve the vulnerable, so everyone, everywhere can attain the highest level of health. WHO leads global efforts to expand universal health coverage by directing and coordinating the world's response to health emergencies and promoting healthier lives, from pregnancy care through old age.

There are a couple of different levels to diseases spreading; the CDC (2021) states that an epidemic is an unexpected increase in the number of disease cases in a specific geographical area. The CDC (2021) uses the examples of yellow fever, smallpox, measles, and malaria as they are bounded to a certain region. Other specific health-related behaviors, such as smoking and obesity, can be referred to as an epidemic because their case rates can increase above the expected level for the region (CDC, 2021). Another level of disease spread is a pandemic, and according to the World Health Organization (2021), a pandemic is when a disease's growth becomes exponential to the point where rates skyrocket and cases grow more than the day prior. The WHO (2021) states that, when a pandemic is declared, the virus has nothing to do with virology, population immunity, or disease severity, it just means that a virus covers a large area, larger than a community or region.

One of the more common and reoccurring pandemics we face is influenza. The CDC (2021) defines an influenza pandemic as "a global outbreak of a new Influenza A virus. Pandemics happen when new (novel) influenza-A viruses emerge which are able to infect people easily and spread from person to person in an efficient and sustained way" (para.).

These pandemics create challenges to elected officials because of the disruption to the normal processes (Seeger et al., 1998). During pandemics and other crises, the elected official

has to create change, influence followers to the new normal, and know what lessons learned from the crisis can be carried beyond the length of the crisis (Boin et al., 2010).

Past Pandemics

The COVID-19 pandemic is not the United States' first widespread pandemic (CDC, 2020b). The 1918 influenza pandemic, also known as the Spanish Flu, lasted from February 1918 to April 1920. The origins are unknown, but an estimated 500 million (one third of the world's population) people globally were infected with the virus; 50 million people were killed due to the virus, with 675,000 of those deaths happening in the United States (CDC, 2020b). During the 1918 pandemic, the H1N1 Avian strain's mortality was high for people younger than 5 years old, people between 20 and 40 years old, and 65 years and older. The fact that healthy people between the ages of 20 and 40 were dying from the virus was a unique feature to the 1918 influenza pandemic. Since there was no cure or vaccine to stop the spread of the virus, many different non-medical interventions were created to keep the virus from spreading. The methods were isolation, quarantine, the practice of proper hygiene, using disinfectants, and the limitations of public gatherings (CDC, 2020b).

In 1957, an influenza virus spread from Guizhou in southern China across the world and in the United States. The virus was an influenza A virus that was a subtype of H2N2 and was responsible for one to four million deaths worldwide and around 70,000 to 116,000 deaths in the United States. The 1957 influenza pandemic continued into 1958 and could have continued longer and affected more people, but Maurice Hilleman obtained a sample of the virus along with other vaccine manufactures in May of 1957, and vaccine trials started in July 1957. Due to Hilleman's vaccine, the spread and mortality of the 1957 influenza virus were minimized, saving the lives of one million Americans (CDC, 2020b).

Eleven years later, a variant of the 1957 influenza H2N2 strain spread from the United States. This virus was comprised of two genes from an avian influenza A virus. This virus contained the new H3 hemagglutinin and the N2 neuraminidase that was in the 1957 H2N2 virus. This influenza pandemic was estimated around 100,000 deaths in the United States and around one million deaths worldwide, and a majority of the population it affected was those who were 65 years of age and older. This 1968 H3N2 virus turned into the seasonal flu, which continued to affect everyone but continued to be deadly predominantly in those 65 and older (CDC, 2020b).

In 2009, there was a return of the 1918 H1N1 influenza A virus, which was first found in the United States. This new H1N1 virus had a unique combination of influenza genes not seen from previous influenza outbreaks identified in animals or people. This “new” influenza was different because, unlike most other viruses, it attacked the population under 65 more than the older age range. This was due to the fact that those 65 and older still had antibodies from previous influenza vaccines, where the younger population did not have these antibodies. This outbreak cost the lives of approximately 12,500 Americans and an estimated 150,000–575,000 people worldwide (CDC, 2020b).

COVID-19 Pandemic

The most recent influenza pandemic is the COVID-19 global pandemic that has affected almost every country on the planet. The CDC (2021) defines COVID-19 as a respiratory disease caused by SARS-CoV-2, a coronavirus discovered in 2019. The virus spreads mainly from person to person through respiratory droplets produced when an infected person coughs, sneezes, or talks. Some people who are infected may not have symptoms. For people who have symptoms, illness can range from mild to severe. Adults 65 years and older and people of any age with underlying medical conditions are at higher risk for severe illness (CDC, 2021).

The Coronavirus gets its name because of its appearance: it has spike proteins that come from its body having the appearance of a crown, and the word corona is Latin for crown (CDC, 2020). The protein spikes in the Coronavirus are important to its biology, because it is those proteins that attach themselves to human cells and infect, replicate, and spread to other cells. With most viruses, the genetics of the virus mutate with time and are referred to as variants to the original virus (CDC, 2021).

The COVID-19 pandemic has created both a public health crisis and an economic crisis in the United States. The pandemic has disrupted lives, pushed the hospital system to capacity, and created a global economic slowdown (Triggs & Kharas, 2020). According to Triggs and Kharas (2020), “The economic crisis is unprecedented in its scale: the pandemic has created a demand shock, a supply shock, and a financial shock all at once” (para.). These crises have created several compounding issues for government leaders to address all while trying to keep the people in their counties safe and healthy.

“The coronavirus pandemic has changed our way of life for an indefinite period of time” (National Association for Family, School, Community Engagement, 2020, para.). The 2019 Novel Coronavirus, called SARS-CoV-2 and commonly referred to as COVID-19, is a virus that caused an outbreak of respiratory illness that was first found in Wuhan, China, in 2019 (CDC, 2020). According to the CDC (2020), COVID-19 is similar to other respiratory viruses, because it spreads quickly through droplets that project from a person’s mouth or nose when they breathe, cough, sneeze, or speak. Since the first report of COVID-19, it has spread as a pandemic affecting the entire world with more than 35 million infections, and one million deaths were reported as of October 5, 2020 (Arachchi & Managi, 2021).

On March 11, 2020, the World Health Organization declared that the COVID-19 outbreak was a pandemic, and on March 13, 2020, President Donald Trump declared a national emergency in the United States (WHO, 2020). Within the month of March, several states in the United States and countries start to issue mandatory stay-at-home orders. With these mandatory stay-at-home orders, most organizations closed their physical doors temporarily, and other businesses started sending their employees home to work. Over the course of 2020, both United States federal lockdowns and state-sponsored lockdowns continued with different attempts at reopening. Most states in the United States reopened to some degree, but over the course of the first 365 days of the COVID-19 pandemic, only two states completely reopened 100% and had no mask mandates (CDC, 2021). As of March 31, 2021, the United States national death total was approximately 540,000, and the county mean was 187.02 COVID-19 deaths per 100,000.

According to the WHO (2020) and the CDC (2020b), COVID-19, which is also known as the Novel Coronavirus 2019, originated from a vast host and family of viruses such as the avian flu and influenza. This new virus is spread through close contact with other people by touching a surface or object that has the virus on it or through airborne particles (CDC, 2020b). COVID-19 is highly contagious and is a respiratory illness and can cause pneumonia (CDC, 2020b). The symptoms of COVID-19 can range from people being mildly, moderately, to severely ill to include death (WHO, 2020). The COVID-19 pandemic originated in Wuhan, China, with its first identified case in December of 2019. According to the CDC (2021), there is an investigation that is still ongoing to determine the official origin of the virus.

From March 2020 to March 2021, there were approximately 30 million COVID-19 infection cases and 541,000 deaths in the United States resulting from complications attributed to COVID-19 (USAFacts.org, 2021). Due to this high infectious rate, Shuja et al. (2020) stated that

the COVID-19 pandemic created major changes to everyday life for individuals around the world. Zhang and Ma (2020) wrote that the healthcare systems were overwhelmed, schools had to shut down or change to full remote learning, and stay-at-home orders had to be put in place to slow the spread of the virus. In addition to these changes, mandates and strong government recommendations for social and physical distancing were put in place, wearing of face masks indoors and outdoors was mandatory depending on state and county orders, and limitations to indoor capacity contributed to the closure of many businesses due to COVID-19 and its rapid spread. Kochhar (2020) stated that, in the United States, unemployment rose higher in 3 months of COVID-19 (March 2020–May, 2020) than it did in the 2 years of the 2007–2009 recession.

Physical distancing continued as the science showed that COVID-19 cases decreased by 48% and deaths by 60% when states and counties implemented lockdowns (Ferwana & Varshney, 2021). Mask wearing was also an intervention used to decrease COVID-19 infections by 70%. Physical distancing and the wearing of masks to minimize the spread of COVID-19 seem to have helped in counties that chose to follow distancing and mask guidelines. Even though all counties had access to masks and had the options and the guidelines to distance themselves from others, there were some counties that had fewer cases of COVID-19 than others (Ferwana & Varshney, 2021). These non-medical interventions were imperative for people who were in a public space, as COVID-19 could spread by both those showing symptoms and those who were not (Borgonovi & Andrieu, 2020). In 2021, three different vaccines were created to minimize the spread of the COVID-19 pandemic. Ferwana and Varshney (2021) wrote that 70% to 80% of the United States needed to be vaccinated for there to be a positive threshold to eliminate social distancing, mask wearing indoors, and for a return to “normal.”

The COVID-19 pandemic also affected American politics due to the changes it created during the first year. When the pandemic started at the beginning of 2020, both parties could agree on several ways at handling the crisis, but as the pandemic wore on, there was less and less common ground. Democrats and Republicans started to disagree on everything, such as eating out at restaurants or reopening schools. These topics were not just talking points for politicians; they were used as battle cries for their followers. This separation continued throughout 2020 and was seen during the 2020 United States presidential election, where record numbers of votes were cast, and mostly by mail-in voting that was allowed due to the ongoing pandemic. After President Joe Biden took office in January 2021, the separation of the parties only continued as vaccines became more available and employers demanded proof of vaccines. Vaccines became the next hot topic in politics during 2021, playing out into 2022. As vaccines and then boosters were more commonplace, and organizations demanded their employees return to the office, companies along with the help of the federal government started to demand employees be fully vaccinated to continue their employment with the organization. This was the next partisan fight between Democrats and Republicans, which led to many people refusing to be vaccinated losing their jobs.

As the COVID-19 pandemic continued, researchers also started to look at different non-medical ways to reduce the spread of infections. Makridis and Wu (2021) stated that the COVID-19 pandemic is the largest world-wide shock in the past century since the 1918 influenza. COVID-19 has many different adverse effects and affects everyone, but some communities were hit harder than others (Makridis & Wu, 2021). Communities with a higher level of social capital were found to show signs of higher infection rates than other communities with equal concerns, because they had higher levels of social trust, family bond, community attachment, and security

(Ferwana & Varshney, 2021). The COVID-19 pandemic had a major impact on our health, our workforce, and our social encounters due to social distancing and isolation. These concerns are the problems that county elected officials had to face during the first year of the COVID-19 pandemic, and this study focused on whether these problems changed their leadership styles or their decision-making processes.

Mitigation Options

The COVID-19 pandemic was a major blow not just to the United States, but to the entire planet (CDC, 2021). Over the course of the first 2 years of the COVID-19 pandemic, there were several ways to mitigate the spread of the virus. At the beginning of the pandemic, everyone was told to quarantine and distance from everyone outside of those they lived with. This physical distancing was a quick reaction to early information that stated the COVID-19 virus was being passed via airborne particles.

Soon after physical distancing started, the plan to mitigate COVID-19 was through the wearing of masks. In early 2020, this meant homemade, cheap cloth, or the N95 mask that was soon mandated in almost every county in the United States. The wearing of masks and physical distancing was a two-pronged attack on minimizing the spread of COVID-19. This attack to minimize the spread of COVID-19 came from the direction of elected leaders across the country. With so many different avenues of information, citizens had to process all this information and follow through by following the desires of the elected leader. In the case of county leadership, it was their responsibility to create safety and security for their community, and the easiest way for them to create this safety was by having physical distancing and masks worn while in public places. This unfortunately caused many businesses to lose money or close, but it was a way to keep their community safe.

The masks were also something every leader could ensure was done and everyone had access to, as masks were cheap, available, and sometimes given if one was not available in a social setting. Masks and physical distancing were great ways to slow the spread of COVID-19 but were not a long-term or a sustainable solution to a virus that was constantly mutating as changes to its exposure continued (Conger, 2021).

In 2021, the first vaccines were approved and distributed across the country for those who were over 65, healthcare workers, and those who were identified as high risk (CDC, 2021). After a few months, the three major vaccines (Moderna, Pfizer, and Johnson & Johnson) were made available to everyone 16 or older, and then after more studies they were available to everyone 12 and older (CDC, 2021). This initial vaccine was broken up into two different injections or just one for the Johnson & Johnson, and this was continued with multiple boosters. These vaccines were made available to everyone and distributed through healthcare institutions coordinated by the local government.

With the multiple ways county leaders were able to mitigate the spread of COVID-19, each county experienced different results that could be attributed to the leader's ability to influence their community to take actions that would help mitigate the spread of the COVID-19 pandemic (Gates, 2018). According to Memish et al. (2020), "In a fragile situation, such as COVID-19, it is not the lack of solutions, rather the ineptness of its leaders that fails the society" (Conclusion section, para. 1).

The reach of this pandemic was as long as our options for assistance from other countries. In the United States, we have relationships with other countries who helped us with ways to mitigate the spread of COVID-19. Globalization created opportunities for Americans to have

access to masks, face shields, and other protective agents to minimize oral partials that might contain the COVID-19 virus.

Summary

The COVID-19 pandemic has changed our world the past 2 years, and emerging research is looking at non-medical ways to minimize the spread, to include social capital factors like community attachment, social trust, family bond, and security and how these factors can be used in a way that does not spread the infection. The researcher believes that there are other factors that also reduce the spread of COVID-19, such as leadership and sound decision-making from elected county officials. In the coming sections of this literature review, the researcher will set the tone for the importance of leadership, its styles, behaviors, traits, and skills that are associated with and assist elected leaders in being better decision-makers, which can contribute to a county's COVID-19 deaths per 100,000 level. The researcher will also explain how decision-making can help an elected official to make better decisions during a pandemic.

Leadership

Leadership is a highly valued commodity and is an important field of study because it is everywhere, but it is hard to identify. A simple concept but put in different context can become hard to understand. Leadership is special; it is something we see and do every day, but it is hard to define. "Psychologists regard leadership as a cocktail of behaviors and types of relationships" (Sorenson & Goethals, 2007, p.). We try to cage and tame leadership, but we are bewitched and titillated by it (Burns, 1978). Leadership is all around us but is something that most do not understand. In fact, the definition is something that most cannot give. Stogdill (1974) writes,

There are almost as many different definitions of leadership as there are people who have tried to define it. It is much like the words democracy, love, and peace. Although each of us intuitively knows what we mean by such words, the words can have different meanings for different people. (p. 33)

The definition has evolved over the course of the 20th and into the 21st century. According to Moore (1927), leadership was the ability to impress the will of the leader on to those being led through obedience, loyalty, respect, and cooperation. In the 1930s, leadership was about influence instead of the earlier domination that Moore (1927) mentions. The 1930s also started to look at personality traits in leaders and evaluate what those traits are. The 1940s started to change the view of leadership and focused on two important aspects. The first was the behavioral aspects of a leader while involved in group activities (Hemphill, 1949), and the second aspect was what Copeland (1942) addressed as drivenship, which he stated was leadership by coercion.

Seeman (1960) stated that, in the 1950s, there were three dominant themes in leadership. The first was group theory, which Northouse defined as what leaders do in groups. The second theory is leadership and its relationship that develops in shared goals, or leadership on behavior of the leader. Lastly, Seeman (1960) wrote about effectiveness, the leader's ability to influence overall group effectiveness. The 1950s set the tone for what was coming in the 1960s. Seeman (1960) wrote that leadership was the behaviors that the leader had to influence their followers toward shared goals.

In the 1970s, the approach of leadership continued that of the 1960s, where leadership was reviewed by behaviors, influence, and how leaders interacted with those they led. Burns (1978) defined leadership as "the reciprocal process of mobilizing by persons with certain motives and values, various economic, political, and other resources, in a context of competition and conflict, in order to realize goals independently or mutually held by leaders and followers" (p. 425). Burns' (1978) definition is one that was widely used through the 20th century and continues to be used in the first quarter of the 21st century.

In the 1980s, in the wake of Burns' (1978) writing on transactional and transformational leadership, there was a spotlight on leadership, and many scholars came to look at leadership as its own study. Several themes continued from past decades, such as leaders persuading followers to do what the leader wants, influence was researched in every possible way, and traits were examined to see if there was a specific list of traits that one could look for to pick a better leader.

In the 1990s and into the 21st century, several different leadership approaches were created and reviewed. Bill George (2003) developed authentic leadership, which focuses on the characteristics of authentic leaders. Servant leadership, first created by Robert Greenleaf (1970), is a leadership theory that puts the leader in the role of a servant to followers. This leadership theory became a focus of governmental leaders in the wake of the terrorist attacks on September 11, 2001.

Through the past 100 years, leadership has held different definitions and has focused on several different aspects, including behavior, influence, and trait (Saks, 2006). Even though the years have changed, the idea of what leadership is has always been the same: a person who can influence, by natural traits or coercion, followers to get them to do what they want them to do (Macey & Schneider, 2008). Many view leadership and management as the same, but there are many differences that make them two separate fields of study. Kotter (1996a) defined management as a set of processes that keep a complicated system of people and technology running smoothly, with the most important aspects of management including planning, budgeting, organizing, staffing, controlling, and problem solving. Kotter and Cohen (2002) defined leadership as the set of processes that creates organizations in the first place or adapts them to changing circumstances.

Rost (1991) explained the difference of leadership and management as leadership being multidirectional, where leadership does not hold a title. Anyone in any position can have leadership and be a leader. Rost (1991) stated that management is unidirectional, where only the person with positional power has authority. Leadership and management are two separate fields of study, and, according to Zaleznik (1977), managers and leaders are two different types of people. Zaleznik (1977) wrote that a manager is reactive and works with groups to solve problems but only with low emotional involvement. Leaders, however, are emotionally active and involved in shaping ideas instead of responding to them. A leader's motivation is changing the way people think about what is possible (Zaleznik, 1977).

Leadership Approaches

Stone et al. (2004) stated that the beginnings of leadership are traced to early civilizations, and, like civilization, leadership has developed with time. The study of leadership attempts to understand the dynamics between leaders and followers; distinguish between traits, styles, and processes; and identify the challenges of a leader. There is little argument that leadership has a role in today's society, but the question that continues to be asked is what leadership style is most appropriate under the circumstances that are presented to the leader? To answer this question regarding leadership styles, the reader needs to know the importance of the different leadership approaches.

Trait Approach

The trait approach to leadership is one of the earliest systematic attempts to study leadership (Northouse, 2019). These early theories were referred to as "great man" theories, because they were taken from the qualities and characteristics of prominent members of society, politics, and military leaders (Jago, 1982). According to Bass (2008), it was believed that these

prominent leaders were born with great leadership traits and that only great people possessed them, which spearheaded leadership research in the early 20th century.

Later in the 20th century, many researchers challenged the idea that only certain people possessed leadership traits (Bryman, 1992; Stogdill, 1948). Stogdill (1948) stated that there was no consistent set of traits found in a leader compared to one who was not a leader and that a person who is a leader in one situation may not be a leader in another situation. Stogdill's (1948) suggestions made way to the thought process that leadership could be viewed as a relationship between people and social settings, not necessarily based on the traits that a person is born with.

The trait approach to leadership has become a respected research approach for scholars, with charismatic leadership at the forefront of the trait approach to leadership (Bennis & Nanus, 2007). Jung and Sosik (2006) wrote those charismatic leaders do have traits, ones that are taught and groomed, not given by birth. The traits that Jung and Sosik (2006) highlighted that those charismatic leaders develop are self-monitoring, engagement in impression management, motivation to attain social power, and motivation to attain self-actualization.

The trait approach to leadership's contribution to leadership in the 20th century is primarily defined from Stogdill's (1948, 1974) two surveys and Goldberg's (1990) Five-Factor Personality Model. Stogdill (1974) completed his two surveys in 1948 and 1974, respectively. The first survey came from collected data gathered between 1904 and 1947 that analyzed over 124 traits. The second survey collected data from 1948 to 1970 and analyzed 163 traits. The conclusion of the two surveys found the following eight major traits that a person would possess that separate them as a leader from an average group: intelligence, alertness, insight, responsibility, initiative, persistence, self-confidence, and sociability (Stogdill, 1974).

Goldberg (1990) conducted research on human personalities in the attempt to identify if certain personalities would make better leaders. His research was confirmed by Judge et al. (2002) when they conducted an analysis of Goldberg's five major personalities. The five personalities that Goldberg identified were *neuroticism*, which is the tendency to be depressed, anxious, insecure, vulnerable, and hostile; *extraversion*, which is the tendency to be sociable and assertive and to have positive energy; *openness*, which is the tendency to be informed, creative, insightful, and curious; *agreeableness*, which is the tendency to be accepting, conforming, trusting, and nurturing; and *conscientiousness*, which is the tendency to be thorough, organized, controlled, dependable, and decisive (Goldberg, 1990).

Trait approach to leadership has its positives and its criticisms. Rath (2007) stated that a strength is the ability to consistently demonstrate exceptional work, where a criticism is defined as the act of expressing disapproval of someone or something and opinions about their faults or bad qualities, a statement showing disapproval. The major strengths of the trait approach to leadership are that it is appealing and is easy to understand. The example of "Great Man" approach made everyone understand traits by using existing global figures to represent what leadership traits can be. The next strength to trait approach to leadership is that it has over 100 years of research behind it, which in a developing field of study is a large amount of time. The third strength is that the trait approach is more conceptual than other approaches, as it highlights the leader in the overall leadership process. The final strength of the trait approach is that, through the century of research, it has produced benchmarks that researchers and leaders can use to measure their leadership abilities.

The trait approach to leadership has several criticisms. The first is that, even though there have been decades of research, the amount and what traits are attributed to good and bad

leadership is ambiguous (Northouse, 2019). The second criticism to the trait approach to leadership is that, through all its research, the traits have been isolated in nature, and the situations, events, and surroundings have not been taken into account. The final criticism to the trait approach is that it is not a very useful approach to train or learn from. Even if you take major traits and apply them, each individual needs to become an expert in that trait, and even if the person can do this, they will also need to consider their current situation that they are in to apply their mastery of the traits.

Skills Approach

The skills approach to leadership is similar to the trait approach to leadership, because it is leader centered. The focus of the approach is to identify traits or skills that a leader would have to be viewed as an effective leader (Katz, 1955). Within the skills approach to leadership, there are a couple of major concepts; the first is the three-skill approach, and the second is the skills model.

The three-skill approach to trait leadership was developed by Katz (1955) during his field research to find effective administration. Katz (1955) found that three major skills were needed to be an effective administrator: technical skills, human skills, and conceptual skills. Technical skills were identified as knowledge and proficiency in a specific activity, such as analytics, use of tools, or software (Katz, 1955). Human skills were identified as the ability to work with humans, which was different from technical skills, as this was identified as proficiency in things. Katz (1955) viewed human skills an important skill for leaders because it helped the leader to work with followers to get them to work in a group and achieve a common goal. In Katz's (1955) research, he found that human skills also created an atmosphere of trust and encouragement to become involved in the production of things. The final skill that was identified

was conceptual skills, which Katz (1955) identified as being able to work with ideas and concepts, a skill not like technical skills, which work with things, or human skills that work with humans. A leader with conceptual skills is one that is comfortable working with new concepts and ideas and are central to a leader's vision and plan, which is passed down to their organization or followers (Katz, 1955; Kouzes & Posner, 2017)

The next major attribute to the skills approach to leadership is the skills model, founded by the United States Army in the 1990s (Mumford, Zaccaro, Connelly, et al., 2000). The skills model was developed from years of information gathered from over 1,800 United States Army officers. The officers in the training were all field-grade officers (2Lt to Colonel), and a variety of measures were used to collect the different skills these officers held (Mumford, Zaccaro, Harding, et al., 2000).

The skills model is broken down into three main components: individual attributes, competencies, and leadership outcomes. The model works when the individual attributes of the leader are applied to the general competencies, which results in the leadership outcomes (Mumford, Zaccaro, Harding, et al., 2000). These three components allowed the researchers to explain the underlying elements of effective performance of leaders (Mumford, Zaccaro, Harding, et al., 2000). The first component, individual attributes, can consist of general cognitive ability, crystallized cognitive ability, motivation, personality. The second component is competencies, and this consists of problem-solving skills, social judgment skills, and knowledge. The final component is leadership outcomes, which consists of effective problem solving and performance (Mumford, Zaccaro, Harding, et al., 2000).

Like the trait approach to leadership, the skills approach has several positives and criticisms. The trait approach to leadership is leader-centered, is attractive, and is an obtainable

approach, as skills can be taught and developed, unlike the trait approach to leadership (Northouse, 2019). The trait approach to leadership also incorporates several different micro-topics like problem-solving, career experiences, and environmental influences (Mumford, Zaccaro, Harding, et al., 2000). The trait approach to leadership also has a few criticisms, with the primary criticism being that many of the skills that are incorporated in the skills approach are in fact not leadership qualities by their own definition and can be used in several research topics. Another criticism to the skills approach to leadership is the model is similar to the trait approach, where it is not predictive of what a good leader will be (Northouse, 2019).

Behavioral Approach

The behavioral approach to leadership addresses the behavior of the leader and the focus of how the behaviors turn into leadership actions. Even though the behavioral approach to leadership is different than the trait approach and the skills approach, the behavior approach to leadership is an influence on the leader's ability to provide leadership to followers (Cartwright & Zander, 1970). The behavioral approach to leadership is broken into three major studies: the Ohio State Studies, the University of Michigan Studies, and Blake and Mouton's (1964) managerial (leadership) grid composed of two different kinds of behaviors. The first kind of behavior is task behaviors, which facilitate goal accomplishment and help leaders achieve their objectives, and the second is relationship behaviors, which is when a leader helps followers feel security and comfortable with themselves, each other, and situations they are in (Northouse, 2019).

The Ohio State study was conducted by Stogdill in 1945 to identify observable behaviors of leaders and not focusing on their traits. The study constructed a questionnaire named the Leader Behavior Description Questionnaire (LBDQ) that was made up of 1,800 items that

described different aspects of a leader's behavior (Hemphill & Coons, 1957). A shortened version was later developed and was referred to as LBDQ-XII (Stogdill, 1963).

The Ohio State study revealed two major themes from the responses given by the respondents about leaders' behavior. The first major theme was initiating structure behavior, which is the behavior of leaders who define the leader-follower role so that everyone knows what to expect and to establish formal lines of communication and how tasks will be performed (Stogdill, 1974). The second major theme from the Ohio State study was consideration behavior, which is behavior of leaders who are aware of their followers' concerns and try to create a warm, friendly, and supportive climate (Stogdill, 1974).

Around the same time of the Ohio State study, researchers at the University of Michigan were also researching leadership behavior, with an emphasis on leaders' behaviors and their performance with small groups (Likert, 1967). During their study, the researchers at the University of Michigan found two types of leadership behaviors that stood out, employee orientation and production orientation (Bowers & Seashore, 1966). Employee orientation behavior is when a leader focuses on their followers with a human relations emphasis, looks at their followers as human beings with individuality, and cares about their personal needs (Bowers & Seashore, 1966). The second major theme, production orientation, focuses on leadership behaviors in regard to technical and production aspects of the relationship. In this theme, followers were viewed as a means for getting work accomplished and opposite to employee orientation where followers were viewed as humans (Bowers & Seashore, 1966).

The third study that defined the behavioral approach to leadership is the Managerial (Leadership) Grid, which was created by Blake and Mouton in the 1960s. The Managerial Grid is a well known model for managerial behavior but over time during the many changes to the

grid was developed to be used for leadership studies (Blake & Mouton, 1985). Similar to the University of Michigan studies, the newly renamed Leadership Grid identified two major components, concern for production and concern for people.

The grid is composed of a horizontal and vertical axis with a minimum score of one and a maximum score of nine (Blake & Mouton, 1978). The Leadership Grid has five major leadership styles: authority-compliance, country-club management, impoverished management, middle-of-the-road management, and team management (Blake & Mouton, 1985). The authority-compliance style puts an emphasis on tasks and job requirements where human elements interfere to a minimum (Blake & Mouton, 1964). Country-club management is where there is a low concern for the tasks to be completed by the followers, but there is a high level of interpersonal relationship between leader and follower (Blake & Mouton, 1964). Impoverished management represents a leader who does not concern themselves with either the task or the relationships they have with their followers (Blake & Mouton, 1964). The fourth style of leadership is middle-of-the-road management, and in this style the leader is a compromiser with production and the relationships they have with their followers. Team management is the best style of leadership under the Leadership Grid, as it describes the leader as one who focuses on both their followers and the production equally at a high level. Blake and Mouton (1964) described the leaders who were team managers as ones who stimulate participation, act determined, make priorities clear, follow through, and enjoy working.

The behavioral approach to leadership has several strengths and criticisms, with the biggest strength being that before the behavioral approach studies, leadership was only viewed as a trait approach. Most of the major studies addressed show two distinct approaches to the behavioral approach to leadership, task and relationship (Northouse, 2019). Like other

approaches to leadership, the behavioral approach has its weaknesses, with the biggest criticism being that it associates a leader's behavior with performance outcomes (Bryman, 1992). The other criticism to the behavioral approach to leadership is that there is not a universal approach to the behavioral approach to leadership. Similar to the definition of leadership, behaviors of leaders are not easy to pinpoint with actual performance outcomes (Martin et al., 2012).

Situational Approach

The situational approach to leadership is extensively used in organizational leadership training, development, and research because of its focus on the situation at hand and how a leader reacts during the situation (Blanchard, 1985). Northouse (2019) states that the situational approach to leadership is when a leader matches their style to the competence and commitment of the followers. Northouse (2019) writes,

The situational approach stresses that leadership is composed of both a directive and a supportive dimension, and that each has to be applied appropriately in a given situation. To determine what is needed in a particular situation, a leader must evaluate her or his followers and assess how competent and committed they are to perform a given goal. (p. 167)

The situational leadership model, which defines the leadership approach to leadership, is broken into four distinct leadership styles (Blanchard et al., 1993). The first leadership style (S1) is high directive-low supportive, which is referred to as a *directing* style where the leader is focused on communication on achieving goals and not supporting the follower (Blanchard et al., 2013). The second leadership style (S2) is a high directive-high supportive style and is called the *coaching* leadership style because the leader is equally focused on goal achievement but also reassuring the follower by focusing on their socioemotional needs (Hersey & Blanchard, 1969). The third leadership style (S3) is a high supportive-low directive leadership style referred to as the *supporting* approach, as it puts the focus of the leader on the listening, praising, giving

feedback to followers, and not as much of a focus on the goals of the leader (Blanchard et al., 1993). The last leadership style in the situational leadership model is the low supportive-low directive style, which is also known as the *delegating* approach to situational leadership. In the delegating approach, the leader is hands-off with the followers with both the goals and the socioemotional needs of the followers (Blanchard et al., 2013).

The second major function of the situational leadership model is the development level, which puts followers into four different categories: D1, low in competence and high in commitment similar to a new employee; D2, when followers have some competence but low commitment, which is compared to an employee who has recently started in their position; D3, which is when a follower has moderate to high competence but variable commitment, similar to an employee that has been in their current role for a little while; D4 followers are high development and a high degree of commitment, similar to an employee who has been around for a long period (Blanchard, 1985).

The situational approach to leadership is a very important tool to the practical application of leadership in several different settings, such as organizations, governments, and internally in micro-groups (Hersey & Blanchard, 1993). Situational leadership has several strengths, with the main strength being that it has been used by leadership practitioners for several decades and used by 80% of Fortune 500 companies (Hersey & Blanchard, 1993). The second strength to situational leadership is that it is extremely flexible for the leader and allows the leader to use a different approach depending on the situation and forces the leader to treat followers differently depending on the goal and their position in the development phase (Graeff, 1997; Yukl, 1989).

The situational approach to leadership also has several criticisms, with the major criticism being that, beyond most of the work done by Blanchard, there are limited studies

addressing the assumptions to the approach. Theoretically, the situational approach has not been developed beyond the limited publications that have been done. The approach is practically known, but there are limited studies completed on its effectiveness (Graeff, 1997; Yukl, 1989). The final criticism is that the different leadership styles and development levels are ambiguous to the leader, and there is not always a perfect answer to the problem (Graeff, 1997).

Leadership Styles

As previously mentioned, leadership has many different definitions, fields, and even approaches to create the “better” leader, but all these differences combined are applied to several different leadership styles. Leadership styles have a variety of different goals that define what the style focuses on. In this study, the researcher focused on *servant leadership*, which puts the leader as serving the followers; *authentic leadership*, which focuses on leaders who are authentic with their followers; and *transformational leadership*, which emphasizes the leader as making change by engaging with their followers, which creates motivation in both the follower and leader (Burns, 1978; George, 2003; Greenleaf, 1970).

These leadership styles are not all the different leadership styles that have been developed from previous research. There are several major leadership styles like path-goal leadership (which focuses on how leaders motivate followers), adaptive leadership (which is about how leaders encourage people to adapt and deal with problems, challenges, and changes), and even followership-focused leadership style (Evans, 1970; Heifetz, 1994).

Servant Leadership

Servant leadership is a leadership style that was heavily researched by Robert Greenleaf, who is often referred to as the father of servant leadership (Hale & Fields, 2007). Servant leadership is often viewed as a trait approach to leadership; it can be also viewed as behavioral,

as it is not always a natural leadership style—it can be taught (Spears, 2010). Through his research, Greenleaf (1970) developed the characteristics of servant leadership. Greenleaf was able to take the notion of loosely defined characteristics and principles and create the definition for servant leadership. According to Parris and Peachy (2013b), researchers are still attempting to precisely define servant leadership, but most researchers use Greenleaf's (1970) definition as the baseline for defining servant leadership:

It begins with the natural feeling that one wants to serve, to serve first. Then conscious choice brings one to aspire to lead.... The difference manifests itself in the care taken by the servant—first to make sure that other people's highest priority needs are being served. The best test...is: do those served grow as persons; do they, while being served, become healthier, wiser, freer, more autonomous, more likely themselves to become servants? and, what is the effect on the least privileged in society; will they benefit, or, at least, will they not be further deprived? (p. 15)

Greenleaf's (1970) definition of servant leadership is complex but does hold several basic pillars for how servant leaders will lead. Two of the main principles of servant leadership are that the follower's needs and self-interests are placed over the needs and self-interests of the leader, and the leader must demonstrate a strong moral behavior toward their followers, their organization, and the other stakeholders (Ehrhart, 2004; Graham, 1991; Hale & Field, 2007). Greenleaf's (1977) research describes that a servant leader's duties go beyond simply serving their followers, but they hold a social responsibility to be concerned about those who are less fortunate, and if there are social inequalities and injustices, it is the responsibility of a servant leader to remove them (Beck, 2014; Graham, 1991).

Greenleaf (1970) writes that servant leaders should value their community, because the community provides a face-to-face chance for both leader and follower to experience interdependence, respect, trust, and growth. Beck (2014) states that servant leadership relates to

American political theories of conservatism and liberalism, as servant leaders focus on people and building community.

Spears (1995) took Greenleaf's (1970) concept of servant leadership and synthesized the process to develop 10 characteristics that allow others to understand how to be a servant leader. The characteristics consist of *listening*, where a servant leader communicates by listening first and understands that being receptive to others' needs validates their perspectives (Spears, 2002). The second characteristic is *empathy*, which Spears (1995) stated is when the servant leader "stands in the shoes" of their followers, which allows the followers to feel desired, unique, and validated. The next characteristic of servant leadership is *healing*, or to make whole (Greenleaf, 1977). To allow their followers to be whole, the servant leader needs to focus on wellness, which gives the leader the opportunity to let the follower find wholeness (Parris & Peachy, 2013a). Coggins and Bocarnea (2015) wrote that, even though the servant leader cannot force the follower to heal, the opportunity to heal will give the follower safety if a traumatic event occurs.

The fourth characteristic of servant leaders is *awareness*, which according to Greenleaf (1977) is when the servant leader is receptive to physical, social, and political environments, which then puts their followers in a better position to succeed. Servant leaders also need to be aware of the state of their followers and the scenarios that are happening around them (Parris & Peachy, 2013a). Coetzer et al. (2017) stated that awareness can also be viewed as risky but courageous. Awareness in the servant leader lets the followers analyze the setting and make the calculations they need to succeed. The next characteristic to servant leadership is *persuasion*, which can be tricky as change is difficult to navigate and a servant leader will come across change and needs to be capable of communicating with their followers about what the next steps can be. Given all the characteristics, persuasion is closely related to that of the definition of

leadership, because it is a leader influencing a follower to be aligned to make the change that is needed (Spears, 2010). Parris and Peachy (2013a) believe that servant leaders influence by persuasion differently than other leadership styles because they do not threaten or pressure their followers, but instead explain and persuade.

The sixth characteristic of servant leadership is *conceptualization*, which Greenleaf (1977) found to be essential for servant leaders, as this characteristic allows the leader to prepare for the desired future. When a servant leader provides the security their followers desire, the leader's ability to conceptualize allows the followers to create through their creativity, and followers can be optimistic about an unknown future (Coggins & Bocarnea, 2015). The next characteristic of servant leadership is *foresight*, which according to Spears (2010) is when servant leaders learn from their past experiences, and the learning process allows them to look at a current and future scenario and find possible wins or losses. This characteristic is another example of servant leaders preparing a better outcome for their followers (Parris & Peachy, 2013b). The eighth characteristic of servant leadership is *stewardship*, which Greenleaf (1977) described as holding things in a position of trust for the overall greater good. Gandolfi et al. (2017) views the servant leader as the role of a caretaker if they are entrusted to lead any group of followers. For a servant leader, the big picture is to maintain this trust with other stakeholders who interact with the followers, and, as a steward for their followers, a servant leader creates trust to ensure that the followers are safe in a current setting and for future settings (Frey, 2017).

The ninth characteristic of servant leadership is *commitment to the growth of people*, which is when a servant leader focuses on the development of their followers (Greenleaf, 1977). This characteristic is important to servant leadership, because by developing their followers, they are empowering their desires to be better, which can improve their quality of life, and in turn the

follower has a greater trust and respect for the servant leader (Frey, 2017; Parris & Peachy, 2013b). The final characteristic of servant leadership is *building community*, which is similar to growth of people, but the focus is on the development of the community (Greenleaf, 1977). This final characteristic is a culmination of the other nine, as all 10 characteristics are found in the community that the servant leader and their followers operate in. Carter and Baghurst (2014) wrote that, when a servant leader develops trust within the community, it also creates a place where their followers are more committed to the focus of the community. This can build stronger ties within the community where you see a higher sense of community and social capital (Putnam, 2000).

The servant leadership style is not complete just from Spears' (1995) synthesis of Greenleaf's (1977) theory of servant leadership. Laub (1999) added to the previous characteristics by including valuing people, people development, authenticity and accountability, and leading and sharing leadership. Shirin (2014) added that culture, setting, leadership characteristics, and follower agreement need to be added to the traits and behaviors of a servant leader. In conclusion, Greenleaf (1970) created the concept of servant leadership, and, with the assistance of Spear (1985), a set of 10 characteristics was developed. From all of this, servant leaders are characterized by humility, caring, selflessness, and putting their followers' interests before their own, but mainly servant leaders have two distinct traits: serving first and concentrating on others' needs (Grisaffe et al., 2016).

Authentic Leadership

Authentic leadership is a newer leadership style and is often described as one where the leader is of high morals, high sense of self-awareness, and awareness of others (Avolio et al., 2009; Chan, 2005). There are three major viewpoints when defining authentic leadership, with

the first viewpoint being an intrapersonal perspective, which focuses on what goes on within the leader and suggests that an intrapersonal authentic leader is self-aware, self-regulated, and has self-knowledge (Shamir & Eilam, 2005). The second viewpoint is an interpersonal process, which portrays the authentic leader as relational and created by both the leader and the follower and where the authenticity emerges from the shared interactions and experiences from the leader and followers (Eagly, 2005). The final viewpoint to authentic leadership is the developmental perspective, which is the authentic leadership style that can be developed and nurtured as a skill over time, and not a personality trait (Avolio & Gardner, 2005).

Due to the complexity of authentic leadership, it has been divided into three different approaches that can describe authentic leadership (George, 2003; Luthans & Avolio, 2003; Terry, 1993). The first approach is the practical approach, which was developed by Bill George (2003) and describes authentic leaders demonstrating five basic characteristics: (1) sense of purpose, (2) strong values that demand they do the right thing, (3) have trusting relationships, (4) possess self-discipline and act upon their personal values, and (5) be caring and empathetic to others' needs. The five characteristics of an authentic leader are demonstrated through five dimensions: purpose, values, relationships, self-discipline, and heart (George & Sims, 2007). These five dimensions are represented by five characteristics that individuals need to develop to become authentic leaders, which are passion, behavior, connectedness, consistency, and compassion (George, 2003).

George's (2003) five characteristics are important to understanding the whole concept of what makes an authentic leader. Researchers show that purpose is important to authentic leadership because the leader knows what they care about and where they want to go and can inspire their purpose to their followers (Kotter, 1996b). Passion has been shown to be important

to authentic leaders, because it is the deep-rooted interest that is shown through passion that gets the attention of followers that allows them to see that the authentic leader cares about their purpose (Meyer & Allen, 1991).

An authentic leader's values are what drive them to their purpose (George, 2003). George (2003) wrote that an authentic leader knows their "true north," and their values dictate how they behave as a leader. Avolio and Gardner (2005) found that authentic leaders share their values with their followers through their actions, and the performance of their duties is a testament to who they are as a leader. This has been seen in historical figures such as Gandhi, Nelson Mandela, and Winston Churchill.

The third characteristic of an authentic leader is their focus on relationships and how their connections to their followers and other parties that interact with their followers are important to them as a leader (George, 2003). An authentic leader is willing to share their strengths and their weaknesses with their followers, which allows a sense of safety with their followers who will trust them and share with the authentic leader their strengths and weaknesses (Avolio & Gardner, 2005; George, 2003).

The fourth characteristic of authentic leadership is self-discipline, which is key to an authentic leader, as their ability to focus on their purpose and values will be tested over time, and it is the consistency that they show to their followers that is important for their goals to be completed (George, 2003). The final characteristic that George (2003) identified for an authentic leader is heart; the compassion of an authentic leader is a big characteristic because, without heart or compassion, the leader cannot be truly authentic with their followers (Avolio et al., 2009).

The second approach to authentic leadership is the theoretical approach, which was founded by researchers attempting to develop a theory that defines authentic leadership (Kumar, 2014). The theoretical approach to authentic leadership became a popular research topic after the September 11, 2001, terrorist attacks, Wall Street corruption, and incompetent government leadership in the United States in the decade that followed (Fry & Whittington, 2005; Luthans & Avolio, 2003).

The first step in the theoretical approach was to operationally define authentic leadership. Researchers developed the definition from different academic fields of study, such as leadership, psychology, and ethics (Cooper et al., 2005). The commonly used definition of authentic leadership that emerged from the theoretical approach is

a pattern of leader behavior that draws upon and promotes both positive psychological capacities and a positive ethical climate, to foster greater self-awareness, and internalized moral perspective, balanced processing of information, and relational transparency on the part of leaders working with followers, fostering positive self-development. (Walumbwa et al., 2008, p. 94)

The four positive psychological attributes that are defined by Walumbwa et al. (2008) are self-awareness, internalized moral perspective, balanced processing, and relational transparency, which form into four factors that influence authentic leadership. According to Cameron et al. (2003), those four factors are *confidence*, which aligns with self-efficacy or the ability to successfully accomplish tasks (Bandura, 1977); *hope*, which is also viewed as a positive motivation that an authentic leader passes to their followers (Luthans & Avolio, 2003); *optimism*, which is when an authentic leader can take situations and process them into a positive light and favorable results (Luthans & Avolio, 2003); and *resilience*, which is the ability of the authentic leader to recover and adjust to situations with unfavorable endings (Covey, 1990).

The third approach to authentic leadership is referred to the “Seven Cs of Authenticity” by Robert Terry (1993), who developed the seven Cs based on the idea that leaders “move from good intention to the embodiment of intention in the world acting in a way that matches words with actions and looks beyond a single action to consider how that decision will ripple through the organization” (McManus et al., 2018, p.). In Terry’s (1993) research, he found that consistency, concealment, correspondence, comprehensiveness, coherence, convergence, and conveyance were the seven attributes that made a leader authentic in their actions. Terry (1993) stated that a leader must be mindful of the consequences of their actions and that communication with their followers was key to their ability to authenticate their leadership.

Authentic leadership is a newer leadership style but is a relevant style because of its two approaches (Steffens et al., 2016). Due to its relevancy, authentic leadership has been used in both organizational leadership and government leadership (George, 2003). In organizational leadership, there is a correlation between the use of authentic leadership and the followers under an authentic leader where production is higher and organizational culture is strong (Stander et al., 2015). Government leaders also use the authentic leadership style to benefit their constituents, which has been seen in top political figures over the past 100 years and in local governments in the United States. Another strength of authentic leadership is that it is based in authentic values, and the behavioral aspects of authentic leadership can be developed with time and experiences (Luthans & Avolio, 2003).

For all the strengths that the authentic leadership style has, it is also filled with criticisms, mainly focused on the fact that it is a newer leadership style and the theoretical development of the leadership style has not been fully explained (Cameron et al., 2003). Researchers have found that this is particularly focused on George’s (2003) practical approach to the leadership style,

because it is not empirical based and only offers insight on authentic leadership. The second criticism to authentic leadership researchers have found is the moral aspect to the style; it is not fully developed and explained, as morality is not objective (Anderson et al., 2017).

Transformational Leadership

One of the most well-known leadership styles is transformational leadership, which was developed by political sociologist James MacGregor Burns and explained in his book, *Leadership* (1978). In Burns' seminal book, he wrote how historic world leaders engaged with others, and these connections raised the motivation, influence, and the intellectual stimulation in both the leader and the followers (Bass & Riggio, 2006). Transformational leadership is unique because it is not a quick process and cannot be rushed by the leader (Bass, 1998). This long-term process forgoes short-term goals and values developing a shared vision and inspiration where everyone pursues the vision created (Bass & Riggio, 2006).

Transformational leadership is a process that changes and transforms people. It connects the leader with the follower through emotions, values, ethics, and goals (Burns, 1978). In his book, Burns created a baseline for transformational and transactional leadership. Northouse (2019) wrote,

Transformational leadership is the process whereby a person engages with others and creates a connection that raises the level of motivation and morality in both the leader and the follower. This type of leader is attentive to the needs and motives of followers and tries to help followers reach their fullest potential. (p. 264)

Burns (1978) gave examples of world leaders who are examples of transformational leaders and emphasized their actions to inspire their followers. Transformational leadership's style is a "greater" change and one that will last longer than the leader is in a position of power. Transformational leadership with proper ethics and values can change an organization, an

institution, and—where we see most versions of transformational leadership—a government (Koehler, 1996).

Bass (1985) continued what Burns started when defining and describing transformational leadership. Bass (1985) expanded and refined what transformational leadership is but put more focus on the follower's needs and created a leadership continuum. Bass' (1990) leadership continuum has three parts, with transformational leadership on the left, which creates long-term change, influences followers, and has the leadership trait that highlights transformational leadership—charisma. The next part, in the center of the continuum, is transactional leadership, and this is based on the transactional leader, mostly someone in management who controls followers with contingent rewards such as pay, and they provide constructive transactions (Bass & Avolio, 1990). This style of leadership is contingent on the power of the leader over the follower. The final part on the continuum is laissez-faire leadership, and this is when a leader is nontransactional or does not engage with their followers (Yammarino, 1993).

Bass and Avolio (1995) also separated transformational leadership into a set of different factors. They are *idealized influence*, which is the emotional component of leadership and describes how a leader has a strong desire to be a role model to others and offer a vision and a sense of mission (Bass & Avolio, 1995). The next factor is *inspirational motivation*, and this is when a leader communicates their expectations to their followers and inspires them through motivation (Bass & Avolio, 1995). The third factor, *intellectual stimulation*, is when a leader can stimulate their followers to be more creative and to challenge their own beliefs and values (Bass & Avolio, 1995). The final factor is *individualized consideration*, and this when a leader listens to their followers and what they want and focuses on the followers' needs and desires (Bass & Avolio, 1995).

Kouzes and Posner (2002) started interviewing more than 1,000 senior managers and had them describe what their personal best experience was as a leader. With this information, they created their five practices: *model the way*, which is when a leader establishes what their values and philosophy are; *inspire a shared vision*, which is when a leader aligns their vision with their followers, and, through their shared vision, they can equally understand what they are working for; *challenge the process*, which pushes the leader to take calculated risks and grow from each risk; *enable others to act*, which is where a leader creates trust with the followers and with this trust enables the follower to collaborate with others to perform at a higher level; and *encourage the heart*, which is where a leader promotes their employees through praise and acknowledgement (Kouzes & Posner, 2017).

Where these two models of transformational leadership are similar is there is a set of influence from the leader to the follower (Mason et al., 2014). Burns looked at historic figures and their traits to establish what a transformational leader is, where Bass, Kouzes, and Posner created several different factors that work as a guide for a transformational leader to follow or understand to become a better leader (Bass, 1990; Burns, 1978; Kouzes & Posner, 2017). Where these two contrast is that Bass takes his information from the view point of the follower, where Kouzes and Posner take their information gathered from the perspective of the leader (Bass, 1990; Burns, 1978; Kouzes & Posner, 2017).

Bennis and Nanus (2007) provided another perspective of transformational leadership. Bennis and Nanus' (2007) research wanted to know what a leader's strengths and weaknesses were. From their research, Bennis and Nanus (2007) concluded that there were four common strategies used by leaders who were transforming their organization. The first strategy was vision, and they state that a leader who has a clear vision for their organization's future was

viewed as a strong leader (Bennis & Nanus, 2007). The vision must be realistic and believable, and it must be simple and understandable. This vision also needs to grow from the needs of the entire organization and be claimed by those in the organization. The second factor was the leader must be a social architect, which means that they need to create shared meaning for everyone in the organization (Bennis & Nanus, 2007). The leader must also clearly communicate the direction of the organization. The third factor was trust; according to Bennis and Nanus (2007), trust means that the leader needs to be predictable and reliable even when there are times of uncertainty. The last factor is creative deployment of self, and this is when a leader knows who they are, knows their strengths and weaknesses, and through their awareness they can focus on what they are good at and reach for their organization's goals (Bennis & Nanus, 2007).

Another view at transformational leadership comes from House (1976), whose work was released around the same time as Burns and was continued by Bass in his work on transformational leadership (Bass, 1985). House (1976) viewed that a charismatic leader acts in certain ways that create charismatic effects on their followers. The ability to be charismatic has several characteristics, and they include being dominant, a desire to influence others, self-confidence, and a sense of moral and values (Hunt & Conger, 1999).

House (1976) also found that charismatic leaders also display certain types of behaviors. The first behavior is they are strong role models, and they have well established values and beliefs (House, 1976). The second behavior is that they are competent, and their followers believe they are as well (House, 1976). The third behavior is they clearly communicate what their philosophy is, and they articulate how it will benefit all (House, 1976). The fourth behavior is they have high expectations of their followers, and they hold them to a higher standard, and with that standard, the followers have a higher sense of being (Avolio & Gibbons, 1988). The

fifth behavior is that charismatic leaders create important motives for their followers such as affiliation, power, and esteem (House, 1976). We see charismatic behaviors in appointed politicians when they empower their followers with political affiliation, power in numbers, and esteem that their views are like them and other followers (Boehm et al., 2015).

Regardless of what theoretical viewpoint a leader takes, a transformational leader creates change by influencing their followers to create the change expected to reach their goals, while clearly communicating their vision and having strong morals and ethics. There are small details that make each model its own based on the viewpoint, but, collectively, a leader who looks to create change can become a more transformational leader by understanding the collective traits, behaviors, and characteristics (Bass, 1985; Burns, 1976; House, 1976; Kouzes & Posner, 2017).

Transactional Leadership

Transactional leadership is usually mentioned near the same conversation as transformational leadership; while the two styles are leader-follower focused, they are distinctly different leadership styles (Burns, 1978). Transactional leadership is focused on the exchanges that occur between the leader and the followers (Bass, 1985). The exchanges between the leader and the follower allow the leader to accomplish their objectives, complete tasks, and motivate their followers through contractual agreements (Sadghi & Pihie, 2012). Transactional leadership is also beneficial to followers as it allows followers to fulfill their personal self-interest, reduce workplace anxiety, and be able to focus on clear organizational objectives that can increase customer service, increase quality, reduce costs, and increase production (Sadghi & Pihie, 2012).

Burns (1978) was able to start the conversation by operationalizing both transactional and transformational leadership as distinct leadership styles. This started the broader research that showed in transactional leadership that the relationship between leaders and followers was a

series of exchanges of gratification designed to produce the most organizational and personal gains (Burns, 1978). Over time, the research on transactional leadership showed that it flourished during fast, simple transactions among multiple leaders and their followers, continuously moving from transaction to transaction in search of their own exchange of gratification (Bass, 1985; Burns, 1978). This gratification exchange only works because of reciprocity, flexibility, adaptability, and real-time cost benefit analysis in every aspect of leaders and followers (Burns, 1978).

Research supports that transactional leadership and effectiveness can work in certain environments but not all (Bass & Riggio, 2006). Even though Burns (1978) operationalized transactional leadership, he challenged that transactional leadership can lead followers to only short-term relationships with their leader. Burns (1978) declared that the leader-follower exchange in a transactional relationship tends to be shallow, temporary, and only for gratification, which can lead to future resentment between all participants. Burns was not the only person to find shortcomings in transactional leadership; additional researchers found that transactional leadership theory is a one-size-fits-all approach that disregards situational and contextual factors related to organizational challenges (Beyer, 1999).

Transactional leadership theory is an important leadership theory for both leaders and followers to understand and appreciate, because it does serve a purpose and is commonly used in many leader-follower exchanges—and even as an aspect of transformational leadership theory (Bass & Riggio, 2006). In regard to government leadership styles and leadership during a crisis, the researcher can see that there are several benefits that come from transactional leadership, with the concept that the exchange between the two parties helps both succeed, but the researcher also sees that transactional leadership theory lives in the exchange—and during a crisis like

COVID-19, what is the benefit for both leader and follower when the leader is looking to maintain a current organizational situation, direct behavior of followers toward the leader's goals, and fulfill their own self-interest (Sadeghi & Pihie, 2012)?

During a crisis, it appears that both transactional and transformational leadership have their pros and their cons, but like the previous literature has shown, the focus is primarily on the leader and what they want, what their goals are, and their style to lead their followers. Both leadership styles are missing the element of putting the wants of the follower in the foreground. This is evident in transformational leadership, as the leader has the vision and the follower must be on board for the leadership style to work, and there must be a contractual agreement with both parties to benefit for a transactional leader to succeed (Bass, 1985; Burns, 1978).

Summary

Leadership is important to all elected county officials and is something the residents of their county expect of their elected official. This brief literature review on leadership explains that leadership styles can help or hinder an elected official during a crisis such as the COVID-19 pandemic. It is these behaviors, skills, and traits that define the different leadership styles that the researcher analyzed during the data collection and data analysis section of this qualitative study to see what leadership styles were used before and during the COVID-19 pandemic by county leaders of counties that outperformed other counties in minimizing the spread of COVID-19.

Crisis Leadership

Crisis leadership is an important theory in today's environment, with most organizations and governments going through one or more crises on an ongoing basis (Darmody & Smyth, 2016). Crisis leadership is an application of leadership approaches and styles applied during a crisis (Fink, 1986). The researcher has previously defined leadership, the common approaches,

and different styles that are used by leaders, but in this section, the researcher will provide a few practical and theoretical definitions of what a crisis is, along with how those styles, approaches, and traits work in eliminating or dealing with a crisis such as COVID-19. The application of these leadership approaches and styles can be used by the same leaders in the same organization before and after a crisis, but during the crisis, the application must be deliberate and specific to the crisis (Firestone, 2020).

According to Mitroff (2004), a practical approach to a crisis is that

crises, catastrophes, and calamities are an unfortunate but inevitable fact of life. They have been with us since the beginning of time. It can be argued that they will be with us until the end of human history itself. In short, they are an integral part of the human condition. They are the human condition. (p. 33)

Seeger et al. (1998) wrote that a crisis is “a specific, unexpected, and non-routine event or series of events that create high levels of uncertainty and threat or perceived threat to an organization’s high priority goals” (p. 233).

The United States Military (Joint Chiefs of Staff, 2011) has defined a crisis as

an incident or situation that typically develops rapidly and creates a condition of such diplomatic, economic, or military importance that the President or SecDef (Secretary of Defense) considers a commitment of U.S. military forces and resources to achieve national objectives. It may occur with little or no warning. It is fast-breaking and requires accelerated decision making. Sometimes a single crisis may spawn another crisis elsewhere. (p. 29)

All these definitions have several items in common: that a crisis can happen quickly, with little to no warning, and that the crisis must go against the organization or government’s objectives and goals while forcing them to take steps to mitigate the possible impact of the crisis (Boin et al., 2010). Crisis can also be viewed individually based on the leader’s worldview, which means that the way they perceive a crisis is how a leader reacts to one (Firestone, 2020). Firestone (2020) wrote that, because of a leader’s worldview and how they approach a crisis, it is

the theoretical approach to crisis leadership that contains different actions, approaches, and styles that prepare the leader to navigate their organization or government through the potential crisis. One of the major leadership styles that is used during an ever-changing crisis is the situational leadership approach. Because of the unpredictable timing of a crisis, a leader needs to be ready to address the situation they are currently faced with.

Understanding the definition of a crisis is the first step; knowing what a crisis step is is the next, as these events are practical examples of what a crisis can be and what their impact to an organization or a country's government can be. According to Pearson and Clair (1998), a leader depending on their followers' needs should consider and evaluate the following list of crisis events: natural disasters, massive product recalls, environmental mishaps, transportation accidents, protests against the organization, work-related death or injury, disruptive employees, security or data breach, social media incidents, product tampering, attack or protest on customers, terrorist attacks, stock issues/corporate takeover, disruption of utilities' access, or corporate reorganization.

Most crises occur outside of the organization and the leader's control, and most of the crises that happen can be sectioned into external or internal. Since most are external, it is better for a leader to subcategorize the external crisis into overlapping groups (Harvard Business Essentials, 2004). A leader unlike a manager needs to be prepared to lead their followers by following the followers' needs, by their own values, or by interacting with their followers so that their goals are aligned to move past any potential crisis, so they need to understand different examples of external crises (Burns, 1978; Coombs, 2007; George, 2003; Greenleaf, 1970).

Some major crisis groups a leader should prepare for are accidents and natural events such as hurricanes, tornados, wildfires, earthquakes, or tsunamis. Depending on their location,

natural disasters have the potential to create unexpected issues to their organization or government (Pearson & Clair, 1998). The second group is health crisis such as COVID-19 and the health, government, and logistical problems that COVID-19 and other health pandemics have created for leaders. Technological accidents are another crisis group that create trouble for a leader (Pearson & Clair, 1998). This was evident during the Chernobyl and Fukushima nuclear spread or the BP and Exxon Valdez oil spills.

Economic crisis is another category a leader should prepare for, as we saw during the Great Depression in the United States during the 1930s, the Great Recession in the late 2000s, and now during the COVID-19 pandemic. Another concern for leaders should be geopolitical turmoil, as this can create disruption to both private and public organizations (Bhaduri, 2019). Firestone (2020) stated that geopolitical crises come from war, protests, and ongoing country conflicts like the United States in Afghanistan or the Israeli–Palestinian conflict. Geopolitical crisis can affect a leader’s organization, and so can unethical actions. Unethical actions have created some very large business crises in the past 30 years like Enron, Bernie Madoff, and Wells Fargo Bank (Firestone, 2020).

Even though this list is not exhaustive, it shows the leader that there are several different types of crises that can come and that the leader should be prepared with a game plan for their organization when the crisis does happen. These plans that the leader creates will incorporate the lessons and frameworks of crisis leadership but will also rely on crisis management to carry out the plans the organization’s leaders create (Mitroff, 2004). Firestone (2020) stated that being prepared for a crisis is important to a leader, because one crisis can lead to additional crises, which was seen, for example, in Japan: after the tsunami hit land, it caused damage to the nuclear reactor, which then spread nuclear waste among the region, which still, after almost a decade,

has regions of the area off-limits due to radiation levels. Leaders need to also be aware that research shows that a majority of crises are caused by human error, and not by just one person, but usually caused by a domino effect of small errors creating larger ones (Simonsson & Heide, 2018).

Understanding what crisis leadership is is important, as you can see from the several practical examples given. During the first 2 years of the COVID-19 pandemic, the United States has gone through a global health crisis, an economic crisis due to COVID-19, and, as of 2021, rising inflation, pulling out of a war, and now assisting Ukraine with its own war against Russia. These collective crises have created an event that is not often seen, and applying leadership theory to a crisis to assist organizational and government leaders is a must.

Models and Theories

Crisis leadership has been a relatively newer study and approach to leadership studies, and the number of theories, models, and frameworks is minimal (Carpenter & Poerschke, 2020). Most researchers view crisis leadership as a strategy to help their organization return to “normal” after the crisis has ended, with a major focus for the leader to work on communications during a crisis (Ulmer, 2001). A leader is responsible for the organization’s communication during critical moments, especially early during the crisis, at the height of the crisis, and when transitioning out of the crisis (Demiroz & Kapucu, 2012; Jin et al., 2017; Ulmer, 2001). Researchers have also found that leaders should communicate a strong singular message that best represents the organization to the community, stakeholders, and the media (Jin et al., 2017; Lerbinger, 1997).

Boin et al. (2005) have researched crisis leadership and identified five tasks of crisis leadership. First is sensemaking to diagnose the situation, which means that the leader needs to understand the problem that the crisis is causing to their organization. In the case of the COVID-

19 pandemic, the leader needs to have the sense that COVID-19 is changing almost all aspects of life, both professional and personal. The second task is decision-making for a strategy, which is understanding what the crisis is and what decisions will help to eliminate the crisis. In the COVID-19 pandemic, this means that the leader needs to know how to make decisions that will align with their strategy and the wants of their followers.

Boin et al. (2005) described the third task to crisis leadership as coordination of implementation, which is the ability to implement the plan to eliminate the crisis. The next task is to motivate others to move beyond the situation, which, like the definition of leadership, is to motivate and influence others to carry out the mutual plan. Elected officials have to be careful that they are not making too many demands on their followers, as too many mandates can cause followers to not align with the process to get out of the crisis. A well-developed plan to move past a crisis like the COVID-19 pandemic is important for a leader, because it will also serve as a roadmap for them to follow. The final task Boin et al. (2005) found from their research was responsibility and learning from response efforts, which is being responsible for personal or organizational problems pre crisis, during the crisis, or after the crisis and being able to learn and apply the lessons learned to the game plan for the next potential crisis. Learning from each crisis and knowing what to do and what not to do is very important for a leader to know. During the COVID-19 pandemic, many elected leaders were making decisions the best they knew how, and they were constantly changing what the community could and could not do based on their learning of the crisis.

Bauman (2011) wrote that, in a crisis, a leader needs to remember the importance of their values and ethics, as they are the bedrock to who they are and how they shape the image of their organization. Crisis can be a challenging time for leaders, but in all judgments, decision-making,

and actions, a leader needs to keep their values at the forefront while addressing safety, psychological stress, and restoration from the crisis for their followers and organization (Demiroz & Kapucu, 2012; Dückers et al., 2017; Marcus et al., 2006).

Summary

Crisis leadership is a different approach than most other leadership styles. The biggest factor is that leadership is needed at all times, and leaders can use the principles of different leadership styles to approach different things that they are dealing with, where crisis leadership is comprised of different frameworks specific to times of crisis. The research shows that a leader in a crisis needs to be hyper-focused on the problem at hand to move past the crisis. A crisis like COVID-19 would be a scenario where a crisis leadership framework would be used, but the longevity of this global pandemic may need additional processes. A combination of leadership styles and crisis leadership frameworks could be used to assist a county leader when making decisions on behalf of their community.

Decision-Making

There are several different theories when it comes to making decisions. In political decision-making, the major theory used is rational choice theory (McCormick, 2011). Rational choice theory is based on the idea that human beings make decisions that bring them the most benefit with the least amount of cost (McCormick, 2011). To do this, the decision-maker must be able to calculate the benefits and weigh them against possible losses in the decision-making process.

Making moral and ethical decisions is important for leaders to understand. To gain followers and share your goals and have your mission accepted by the public, you must have moral and ethical values, and these break down to moral and ethical decisions. One of the major

aspects of transformational leadership, authentic leadership, and servant leadership is shared ethics between leader and followers (McManus et al., 2018).

Bandura (2002) wrote about the moral self and the development of a moral self; individuals adopt standards of right and wrong that serve as guides and deterrents for their conduct. This underlines the major theme of this article, as Bandura looked to understand the moral self and how that impacts how we make decisions (Bandura, 2002). Bandura (2002) wrote that our moral standards are not fixed internal regulators and that they only operate when activated. Bandura (2002) also mentioned that there are many psychosocial maneuvers that trigger moral self-sanctions and can be engaged and disengaged. This selective activation and disengagement allow different types of conduct by people with similar morals.

Bandura (2002) went on to write that we often do not engage in harmful conduct until we are justified based on our morals or we are convinced that it matches our morals. As individuals and organizations, we often look for moral justification. Bandura's example is the war on terror and how both sides (Westerners versus Muslims fighting in the War on Terror) justify their actions by acts done by the other. Bandura (2002) quoted Voltaire: "Those who can make you believe absurdities can make you commit atrocities." This quote turns into commentary, which builds the masses for their own moral justification (Bandura, 2002).

Bandura (2002) listed a few types of moral disengagement practices that people and organizations conduct to morally act on something that normally they would not. The first is *moral justification*, which we often see in the moral justification of war. We are not pushed into warfare until an act allows us to justify an otherwise unmoral act, such as killing another human (Kramer, 1990). The second is *euphemistic labelling*, which is when we reconstruct our language to soften the actual act (Lutz, 1987). Bandura gave the example of a soldier saying they "wasted"

someone when they are saying they “killed” someone. The third is *advantageous comparison*, which happens when a group justifies its actions through its own agenda or lens (Bandura, 1990). The next example is *displacement of responsibility*, which was evident in the Milgram (1974) experiment. If responsibility is transferred or removed, our morals can go to the wayside.

The next moral disengagement is *diffusion of responsibility*, which is seen mainly in group decision-making. A group will act more cruelly than an individual (Bandura, 2001; Kelman, 1973). The next example is *disregard or distortion of consequences*, or minimizing consequences; this is seen in politics. This is where we see certain levels of hierarchical chains of command in place to buffer the leader from the act (Tilker, 1982). Another example is *dehumanization*, which is a disengagement that happens during wartime. Over the course of American history and the wars it has fought, we have made negative names for our enemy to dehumanize who they are. This gives the member of the military a name or a “face” of who the enemy is (Ivie, 1980; Keen, 1986).

Regarding ethics and decision-making, Sezer et al. (2015) described those unintentional biases that can create unethical behavior. People view themselves as more ethical, fair, and objective than others, but they can act against their morals (Sezer et al., 2015). The authors gave a review of three sources of ethical blind spots: implicit biases, temporal distance from an ethical dilemma, and decision biases (Sezer et al., 2015).

The first bias, *implicit bias*, happens when people do not recognize their positive and negative views of others, and these implicit attitudes can result in discriminatory behavior (Banaji & Greenwald, 2013; Sezer et al., 2015). The second bias, *temporal distance from decisions*, is another unintentional behavior. Wade-Benzoni et al. (2012) stated that, when forecasting the future, the individual has a “should-self” and a “want-self.” Sezer et al. (2015)

wrote that the difference is “should-self” is the decision that would best suit the future and “want-self” best suits the unneeded or the present. Before making a decision, people predict they will behave in accordance with their “should-self,” a choice that supports their moral self-view. However, when it is time to make a decision, the “want-self” becomes dominant—the immediate gains from the unethical act become much more salient in the present, while the ethical implications fade away (Sezer et al., 2015). The final bias, *decision bias*, can happen post-decision when a person who is given the opportunity to cheat does so; they then view that activity as more acceptable (Sezer et al., 2015).

Rational Decision-Making

Rational choice theory states that decisions are made based on costs and benefits and that the decision-maker collects information to weigh the two before a decision can be made (Paternoster, 1989). According to Feiock (2007), the context in which a rational choice is decided is almost as important as any of the other variables that are weighed in the decision being made.

Within rational choice theory, there are several different models that are used, and some models only use a portion of rational choice theory. For this study, the researcher focused on just the rational decision-making model by Bazerman and Moore (2009), which has been proven to be an effective model when making decisions in a government setting.

A leader makes decisions hundreds, if not thousands, of times a day. “Yet most people remain largely unaware of how their minds accomplish complex tasks, and self-insight and experience offer little guidance” (Bazerman & Moore, 2009, p.). Decision-making models and approaches have been developed, such as normative decision-making, descriptive decision-making, creative decision-making, evidence-based decision-making, and rational decision-

making (Baron, 2004; Bazerman & Moore, 2009; Bell et al., 1988; Carpenter et al., 2009; Kreitner & Kinicki, 2009).

This literature review researched how decisions are made to establish a hierarchy of understanding and recommendations for leaders to improve on their decision-making. The implication to this guide is that there will be a greater understanding of rational and polyheuristic decision-making, understanding of how leaders are bounded in their decisions, examples of biases, definitions for levels of understanding, and how a leader can decide with social morals and ethics.

In decision-making, each scenario proposes a problem, and every problem has multiple alternative solutions (Simon, 1957). Bazerman and Moore (2009) developed a six-step decision-making model that allows the user to apply a rational application to each decision.

Bazerman and Moore's (2009) rational decision-making model is as follows: (1) *Define the problem*, which is to understand what the problem or problems are in the scenario; (2) *Identify the criteria*, when multiple objectives come from one problem; (3) *Weight the criteria*—different objectives mean that one needs to find the most important factor to solve the problem; (4) *Generate alternatives*, which is when the decision-maker creates alternatives to actions. Decision-makers spend more time than needed in this step and often only stop this step when the cost of the search outweighs the value of the added information (Bazerman & Moore, 2009). (5) *Rate each alternative on each criterion*, which is the most difficult stage, as this is when the decision-maker has to forecast for future events to explain their decision making; lastly, (6) *Compute the optimal decision*, which is where the decision-maker computes the ratings in step five by the weight of the criteria, applying that to each alternative and choosing the solution with the highest rating.

Even with a rational decision-making model such as the Bazerman and Moore (2009) model, humans take shortcuts on their process of making decisions. These shortcuts are because we process our thinking into two systems, system 1 and system 2 (Bazerman & Moore, 2009; Hammond et al., 1999; Kahneman, 2003; Stanovich & West, 2000). System 1 thinking “refers to our intuitive system, which is typically fast, automatic, effortless, implicit, and emotional. We make most decisions in life using System 1 thinking” (). System 2 thinking is “reasoning that is slower, conscious, effortful, explicit, and logical” ().

Individual judgment is bounded in its rationality, and we can understand decision-making better by the description and explanation than we can by focusing on the prescriptive decision analysis (March & Simon, 1958). This is because we think with bounded rationality, which Simon (1957) wrote is the decision-making process that is logically expected to lead to the optimal result, given the decision-maker’s values and risk preference. Bazerman and Moore (2009) mentioned the rational model is the set of assumptions to how a decision should be made and not the description of how a decision is made.

In human rationality, Bazerman and Moore (2009) mentioned two definitions that have a major impact in this book and our look at making decisions. The first definition is “Satisfice,” originally defined by Simon (1957), which is when decision-makers forego the best solution in favor of one that is acceptable or reasonable and don’t examine all possible alternatives and just search for a satisfactory solution that will suffice to achieve an acceptable level of performance.

A couple of decades after Simon’s work, Tversky and Kahneman (1974) developed several systematic biases that could influence judgment. This work identified a number of simplifying strategies when making decisions, which are called heuristics. “As the standard rules

that implicitly direct our judgment, heuristics serve as a mechanism for coping with the complex environment surrounding our decision” (Bazerman & Moore, 2009, p.).

Even though heuristics can be helpful to the decision-maker, they can lead to error when a person is using the rational decision-making model. A few heuristics that can create error are the *availability heuristic*, which is when the event in place is available by time or by emotion or vividness (Tversky & Kahneman, 1973); the *representativeness heuristic*, which occurs when an individual groups people based on assumptions or a stereotypical representation; and the *confirmation heuristic*, which, like confirmation bias, is when an individual will disregard new information and only process information that is consistent with their beliefs (Joyce & Biddle, 1981).

Another is the *affect heuristic*, which can occur when a person compares one person to another person and bases their feelings toward person two on their feelings on person one (Slovic et al., 2002). This is seen in interviewing candidates for a job, and the hiring person will compare two candidates against each other and not on their own merit.

Within these few heuristics, there are several biases that also aid system 1 thinking and take away from our ability to process in a system 2 platform. Under the *availability heuristic*, there are the following biases: the first bias is ease of recall, which is when individuals judge events based on recent memory and vividness of the events based on equal frequencies. The second bias is retrievability, which is when individuals are biased on assessments of the frequency of events based on how their memory affects the search process.

Under the *representativeness heuristic*, there are five biases. The first bias is insensitivity to base rates, which is, when assessing likelihood of events, the individual will ignore the base rate and any information even if it is irrelevant. The second bias is the insensitivity to sample

size, and this happens when individuals frequently fail to appreciate the role of the sample size. The third bias is misconceptions of chance, which comes when the data generated by a random process look random but are too short for the expectations to be valid. The fourth bias, regression to the mean, happens when the event tends to regress to the mean, but this is ignored. The fifth bias for this heuristic is the conjunction fallacy, which happens when individuals falsely judge two events happening as more probable than a larger set of occurrences, and the conjunction is a subset (Bazerman & Moore, 2009).

Finally, under the *confirmation heuristic*, there are five biases. The first bias is the confirmation trap, which is when individuals tend to seek confirmatory information for what they believe to be the truth. The second bias is anchoring, which comes when an individual makes estimates on values based on past events and information available, but insufficient adjustments are made based on the anchor. The third bias is conjunctive- and disjunctive-events bias, which happens when individuals overestimate the chances of conjunctive events and discount the probability of disjunctive events. The fourth bias is overconfidence, which is when individuals believe in their ability or judgment when answering moderately to extremely difficult questions. The last bias covered in chapter 2 is hindsight and the curse of knowledge, which occurs when individuals estimate the degree to which they would have predicted the correct outcome.

Groupthink

Irving Janis (1972) wrote the book, *Groupthink: Psychological Studies of Policy Decisions and Fiascoes*, and, through the review of several case studies, developed the term groupthink. Janis defined groupthink as the following: “‘groupthink’ refers to a mode of thinking that people engage in when they are deeply involved in a cohesive in-group, when the members’

striving for unanimity override their motivation to realistically appraise alternative courses of action” (Janis, 1972, p.).

Janis (1972) wrote that there are seven major defects in decision-making that have contributed to groupthink and the failures that have come with it. The first defect is the group’s discussions had only a few alternate courses of action. The second defect was that the group did not survey the objectives or the values implicated by the choice. The third defect is that the groups fail to reexamine the decisions that most of the members made at the beginning. The fourth is when the group neglects any ideas that were deemed unsatisfactory by the majority of the group. The fifth defect is when members of the group make no attempt to gain information from experts to bring estimates of losses or gains to be expected from other courses of action. The sixth defect is when selective bias comes up when the group responds to factual information and relevant judgments from experts, media, or critics. The seventh defect is when the group spends little time thinking about contingency plans to foreseeable setbacks that could derail the chosen course of action.

The main case study that Janis used to describe groupthink was the Bay of Pigs invasion of Cuba. Janis (1972) wrote, “The Kennedy administration’s Bay of Pigs decision ranks among the worst fiascos ever perpetrated by a responsible government. Planned by an overambitious, eager group of American intelligence officers who had little background or experience in military matters” (p.).

The ill-fated plan to send Cuban exiles that were trained by the Central Intelligence Agency to Cuba to create an armed political faction in the country to divide Fidel Castro and the people of Cuba was originally brought to the table by John F. Kennedy’s political adversary Richard Nixon. In April 1961, the operation started with 1,400 exiles, ships from the United

States Navy, air support from the United States Air Force, and the Central Intelligence Agency. Within 3 days, all the ground forces were killed by Castro's army or captured and sent to prison camps (Janis, 1972).

The decision-making core group was a list of "who's who" in American business, academia, and government. The president was John F. Kennedy, a naval hero, educated at Harvard, and the next generation of Kennedys. There was Dean Rusk, who was the secretary of state and had been recruited by Kennedy from his position as head of the Rockefeller Foundation (Janis, 1972). Next was Robert McNamara, the secretary of defense, who was once a faculty member at Harvard Business School, statistician for the United States Air Force, and then the president of the Ford Motor Company. During this time, McNamara devised new techniques for improving rational methods of decision-making (Janis, 1972).

Another member of the group, but only physically for 4 or 5 days before the invasion, was Robert Kennedy, the president's brother and the United States attorney general. Next was McGeorge Bundy, who was the president's special assistant for national security affairs. Bundy was once the dean of Harvard's Arts and Sciences, where he had a background in decision-making. The final member of the group was Arthur Schlesinger Jr., who was a noted Harvard historian (Janis, 1972).

Along with Kennedy's core group were three members of the joint chiefs of staff and the CIA's director and deputy director who were all carry-overs from President Eisenhower's cabinet. Though they were accepted, they were not completely connected to the main group (Tajfel, 1974).

In the aftermath of the failed invasion, there were six major miscalculations that came to light. These miscalculations were helpful to come up with different methods of decision-making

for groups (Packer, 2009). The first assumption was the idea that no one would know that the United States was responsible for the invasion and that everyone would believe the story provided by the CIA. The second assumption was that the opposing air force would be lackluster and could be taken out before the invasion. The third assumption was that all the 1,400 Cuban exiles would have high morale and desire to carry out the mission without the needed support of the United States. The fourth assumption was that Castro's army was not a real threat and the exiles could take a well-protected beachhead with no problem. The fifth assumption was that the exiles' invasion would create a domino effect where others in Cuba would start armed uprisings that could lead to the toppling of Castro's control. The last assumption was that, if the first objective was not completed, the exiles could move to the mountains and reinforce the guerrilla units that were waging war with Castro's regime (Janis, 1972).

In this case study, we have a group of extremely intelligent and successful people who were also knowledgeable in decision-making making some of the biggest blunders and some of the worst decisions ever recorded (McCauley, 1989). Janis (1972) wanted to know why this was and explained it over four factors and six symptoms that led to how groupthink is defined. The four factors were political calculations, a new administration bottled in an old bureaucracy, secrecy—to the point of excluding the experts, and threats to personal reputation and status. This is evident when you know the CIA is pushing for an invasion and approaching the president under the pretext that it will be a political victory, the division of the group with holdovers from the previous administration, exclusion of experts, and a core group who probably do not put their name on something unless they are getting the credit, where this was a group effort and only one person to either gain the credit or the fallout (Janis, 1972).

Janis (1972) mentioned that there are six symptoms that led to the groupthink in this case study. Those symptoms were the illusion of invulnerability, the illusion of unanimity, the suppression of personal doubts, self-appointed mind guards, docility fostered by suave leadership, and the taboo against antagonizing valuable new members.

Janis (1972) concluded that the failure of Kennedy's cabinet to detect any of the false assumptions behind the Bay of Pigs invasion was partially accounted for by the group's tendency to seek concurrence at the expense of seeking informational, critical appraisal, and debate. The concurrence-seeking tendency was created by shared illusions, which helped the group members to maintain a sense of group solidarity (Janis, 1972; Pinsonneault & Heppel, 1997). The biggest issues to the Bay of Pigs were the symptoms that contributed to complacent overconfidence in the face of uncertainties and explicit warnings that should have alerted the group to the risks of a clandestine military operation that was so ill-conceived that people all over the world know the name of the invasion site, and it has become the very symbol of perfect failure (Janis, 1972).

A counterpoint case study to the Bay of Pigs is the Cuban Missile Crisis, which included most of the same people under President Kennedy and still featured Cuba and Fidel Castro (Janis, 1972). The difference between the two is in the policy changes that occurred during the two events. Where in the Bay of Pigs groupthink was severe, in the Cuban Missile Crisis, there was little to no symptom of groupthink.

Janis (1972) mentioned that the changes between the two scenarios were new definitions of the participant's roles, as every member of the group was a "generalist." Kennedy also appointed the two people of the group he trusted most (his brother and Sorensen) as intellectual watchdogs or "devil's advocates" to the group and the decisions being made (MacDougall & Baum, 1997). The second change made was in group atmosphere—the sessions were conducted

without protocol, so anyone could speak their mind and not be concerned about hierarchy or saying something out of position. The next change was that there were subgroups that consisted of critical thinkers who would meet separately from the main group. The next change was Kennedy, as the leader, would remove himself from some sessions so his presence did not create bias in the group. Another occurrence came from the decision-making during the Cuban Missile Crisis, and that was honest, objective questions about grave dangers even after arriving at a decision, explicit discussion of moral issues, reversals of judgment, and nonstereotyped views of the enemy.

The lessons that Janis (1972) brought to light about groupthink and the examples of the Bay of Pigs and the Cuban Missile Crisis are great examples of how leaders and decision-makers can work quickly to remove this phenomenon called groupthink. Janis (1972) highlighted how two crises that happened with the relatively same group of people within a short timeframe can come together and think and decide on a crisis that does not have the same results. The Bay of Pigs shows how this group of highly motivated people made decisions without checks and balances, and during the Cuban Missile Crisis, those checks and balances were in place and the outcome was a success. These scenarios are an example of the possibilities that faced the county elected officials during the COVID-19 pandemic—by just having the same group of people make the decisions, there would not be any checks and balances in place. The Bay of Pigs and the Cuban Missile Crisis are also examples of a leader's ability to learn from previous experiences, adapt to the knowledge they have gained from the experience, and apply it to a different crisis. This example is important for leaders during COVID-19, as elected leaders had to take previous experiences and apply them to the early stages of COVID-19, but as lessons

were learned from the ever-changing environment that COVID-19 provided, leaders were able to adapt to changes to continue to minimize the spread of the COVID-19 virus.

In the previous Crisis Leadership section, we could see how crises need leadership and leaders that can make appropriate decisions when needed, and Janis' (1972) examples are good references, but the COVID-19 pandemic and the different levels of those making decisions are much more complex, which in turn can create complacency, which is a contributing factor to groupthink (Janis, 1972).

Chapter Summary

In summary, this literature review examined leadership, decision-making, crisis leadership, and COVID-19 and other global pandemics. This literature review was used to define leadership, understand the different approaches to leadership, define major styles of leadership used by government officials, and put them in the context and importance of their usage during a crisis. The second part of the literature review addressed decision-making, the different levels of understanding, decision-making styles and theories, groupthink, and ethics and values addressed during the decision-making process.

The third major section focused on crisis leadership and how leadership during a crisis is important for followers, organization, or constituents. This transition from leadership and decision-making to crises continued in the literature review of county-level government and how it operates during the COVID-19 pandemic and past pandemics.

This literature review helped the researcher to understand how the different approaches to leadership can be either learned, are behavioral, personality trait-related, or situational. The literature review was also important in defining the differences between transformational, servant, and authentic leadership and how the different leadership styles are used in different

crises and what leadership styles would be best used during a crisis. Leadership during a crisis is an important factor, but so is the skill of decision-making, knowing that leaders' decision-making can be flawed by biases and heuristics, and in certain situations evading "groupthink," which can destroy leaders and their organization if not avoided.

Part 1 The Nature of the Research Problem	Chapter 1 Introduction
	Chapter 2 Literature Review
Part 2 Research Methodology and Procedures	Chapter 3 Research Methodology
Part 3 Findings	Chapter 4 Research Results
Part 4 Conclusion	Chapter 5 Discussion and Conclusions

CHAPTER 3: METHODOLOGY

Political leaders use leadership theories to make decisions and every day (Nakatani, 2021). These political leaders used models, case studies, and theories that they learned in college, the military, the workplace, or while in public office prior to COVID-19 and applied them during the first year of the COVID-19 pandemic (Bridgman et al., 2020; CDC, 2021). The researcher believes that, during the pandemic, certain decision-making and leadership theories helped county leaders minimize the spread of COVID-19 in counties that historically have poorer health and are denser than the national average. The purpose of this qualitative study was to identify what counties performed the best in minimizing the spread of COVID-19 during March 2020 to March 2021 and interview the leaders of those counties to better understand what decision-making theories were used and what leadership styles helped them lead their county in the fight against COVID-19. The researcher researched, analyzed, and found leadership and decision-making recommendations for leaders to use and apply as the COVID-19 pandemic continues.

Research Questions

The researcher hoped to identify these best practices by first identifying which counties performed the best during the first year of the COVID-19 pandemic based on the dependent (COVID-19 deaths per 100,000) and independent (2020 presidential voting, county density, social capital index, and percentage of people in fair or poor health) variables. Once these counties were identified, the researcher answered the following research questions:

1. Which leadership theories offer the strongest explanations of the decision-making of leaders in counties that performed the best (minimized COVID-19 deaths) during the first year of the pandemic?

2. What changes did county leaders make to their decision-making during the first year of the COVID-19 pandemic?

Research Design

Qualitative research is a fantastic way to understand the essence of an experience through words, pictures, and letters (Creswell, 2013). According to Creswell (2013), qualitative research is used when a problem or an issue needs to be explored, when we want to empower individuals and share their stories, when a problem is complex and detailed understanding is needed, when researchers want to develop theories, and when statistical analysis does not fit the problem. Creswell (2013) defined qualitative research as follows:

Qualitative research begins with assumptions and the use of interpretive/theoretical frameworks that inform the study of research problems addressing the meaning individuals or groups ascribe to a social or human problem. To study this problem, qualitative researchers use an emerging qualitative approach to inquiry, the collection of data in a natural setting sensitive to the people and places under study, and data analysis that is both inductive and deductive and establishes patterns or themes. The final written report or presentation includes the voices of participants, the reflexivity of the researcher, a complex description and interpretation of the problem, and its contribution to the literature or a call for change. (p. 44)

Creswell (2013) described five main approaches to qualitative research that help researchers carry on the words of those that they are researching. These five approaches are instrumental to the researcher and what kind of “story” they are trying to tell in their research. The five approaches are narrative, which tells the story of the individual experience; phenomenological, which looks for the essence of a lived phenomenon; a grounded theory, which is a theory grounded in the views of the participants; an ethnographic study, which interprets the shared patterns of a culture or group; and lastly a case study, which provides an in-depth understanding of a case or cases (Creswell, 2013).

The researcher used the case study approach to qualitative research. Case studies are broken into two different categories; the first is an intrinsic case, and the second is an instrumental case (Creswell, 2013). An instrumental case is when the researcher aims to understand a specific issue, problem, or concern (Creswell, 2013). A case study is important in qualitative research, because the reader gets to experience the situation or situations through those that lived through it (Bloomberg & Volpe, 2016).

The researcher chose an instrumental case study design to focus on the leadership styles and decision-making models of leaders from counties that were shown to outperform others based on statistical data collection. Case studies are widely used in social science research to understand a social phenomenon (Yazan, 2015). The case study format allowed the researcher to gain an in-depth understanding of the leadership styles and decision-making process of county leaders.

Ethical Issues and Assurances with Qualitative Research

Prior to a qualitative research study, a researcher needs to think about all ethical issues that might come during all phases of the study, and a game plan must be put in place to eliminate those that come (Creswell, 2013). Mertens and Ginsberg (2009) mentioned that ethical issues can occur prior to the study, beginning of the study, during data collection, data analysis, reporting of data, and the publishing process.

To minimize part of that problem, the researcher conducted a statistical analysis of secondary data prior to conducting qualitative semi-structured interviews. The researcher used several variables that focused on size, overall health, social capital, and political affiliation during the 2020 United States presidential election. The quantitative analysis allowed the researcher to focus on a small target of counties that, based on the statistical analysis,

outperformed all other counties instead of choosing counties randomly due to their performance during the first year of the COVID-19 pandemic.

There are several ethical issues that can occur during the qualitative research process due to the nature of interacting with human subjects (Weis & Fine, 2000). The researcher ensured that all participants had informed consent forms, which were designed to ensure all possible participants what the study was about and what would take place during the qualitative process. All questions that participants had were answered, and they were given assurance that they could stop the interview at any time if they felt uncomfortable.

The researcher also kept the privacy of the participants secure, due to the fact that these participants are publicly elected government officials who are giving examples of their leadership and decision-making process during a very polarizing time in American history. To keep their privacy secure, I sent emails to their public recorded email addresses and communicated directly with the participant or their assistant. All interviews were conducted using video meeting software and were conducted in a private office on a private Wi-Fi network. After the interview was completed, the researcher sent the audio file to a third party to have it transcribed with a non-descript file name that only the researcher knew the name of. During the analysis of the data, the researcher continued to ensure the privacy of the participants by referring to them as “Participant” followed by a number. This number was associated with the participant and only known to the researcher, who kept the information in a password-protected file on a secure external hard drive.

Sample and Population

The researcher started the study by using quantitative research methods in an attempt to identify the counties that best mitigated the COVID-19 pandemic based on the dependent and

independent variables used. The researcher specifically chose the dependent and independent variables for this study because they met several important criteria to finding the counties that outperformed all others. The dependent variables in this study were COVID-19 deaths per 100,000, which is the most important factor in this study, as the researcher was looking to find the counties that were below the mean for all counties. The COVID-19 death rate in the United States is recorded in raw data but is used as a reference to the county or state's density by taking the deaths in the region and comparing it to the population and using the referenced number and reporting it in deaths per 100,000. By using this reference, it allows all counties to represent their COVID-19 deaths on an even platform (CDC, 2021).

The independent variables are equally important, as they helped identify counties that are big enough to be impacted by COVID-19 and represent both an urban and rural environment. Density is being used as an independent variable because a county in this study must meet a required density. An under-dense county has the ability to perform better than an extremely dense county, as there is less interaction between people, which has been proven by the CDC (2020) to spread COVID-19. For the study, the researcher found counties that are above the mean to represent the study.

The next independent variable was used to find counties whose population has a high percentage of fair to poor health, as this shows that, with the way the COVID-19 disease reacted, these unhealthy communities would be affected greater than healthier counties. The CDC (2020) has shown that elderly persons over the age of 65 and people with comorbidities have a higher risk to be in fair or poor health and have a higher rate contracting COVID-19 or dying due to the virus. Counties that have a higher percentage of their population that are in fair or poor health should have a higher mortality rate than those counties with populations in good health. For this

study, the researcher looked for counties that are above the mean for percentage in fair or poor health.

The next independent variable the researcher used for this study is the county percentage of votes for President Joe Biden during the 2020 United States presidential election. This variable is important to understand the political views during the polarizing time of the first year of the COVID-19 pandemic and how counties voted during this timeframe. The 2020 presidential vote and the COVID-19 pandemic were very important factors during the majority of the first year of the COVID-19 pandemic, and because of this, the research added the 2020 presidential election results as an independent variable so the researcher could find out if there was any significance to presidential election voting and if the county outperformed others. The researcher did not use the mean in the study, but the election results were used to describe the counties.

The final independent variables were used to identify counties that had a positive social capital index, which would identify counties that are relying on each other more than others, which would make it harder for them to socially distance themselves from their community, which could lead to a higher number of COVID-19 cases. The social capital index is the clearest picture ever taken of the health of American communities, and the United States Congress Joint Economic Committee recently concluded its Social Capital Project, which “advises Congress on policies to increase social capital through reconnecting Americans to work, improving investment in youth, making it more affordable to raise a family, increasing family stability, and rebuilding civil society” (United States Congress, 2022, para. 1).

Social capital at the county level is an important factor, as communities have been reliant on each other for such a long time (Elgar et al., 2020). Scholars state that social capital consists

of three major elements, trust, norms, and networks (Makridis & Wu, 2021). Social capital builds the trust in the community, and others are able to help and rely on the help of others and political institutions, which made it difficult for many communities when there were lockdowns and social distancing (Wu & Wilkes, 2018). Social norms refer to forms of social support and collective efficacy, which were common in communities during the first year of the COVID-19 pandemic (Elgar et al., 2020; Ferlander, 2003). The final element in social capital is social networks, which are the social ties in a community through group membership and community associations; these groups suffered during the COVID-19 pandemic due to social distancing and businesses closing due to lost revenue (Ferwana & Varshney, 2021).

The United States is comprised of a two-layered style of government referred to as federalism (Lobao & Kraybill, 2005). Federalism means that, depending on where you live in the United States, you are governed by the state that you live in, but also by the federal government (Lobao & Kraybill, 2005). Federalism was important to those who developed and wrote the Constitution, because the 13 original colonies were comprised of different and diverse population and needs, so it was important that the states had a different set of requirements and laws specific to them (Lobao & Kraybill, 2005).

The founding fathers of the United States wrote in Article IV of the United States Constitution that all states would be represented by the federal government at a higher level than the state government, as described in the below article's sections (U.S. Const. Amend. 4 S IV):

Section 1,

Full faith and credit shall be given in each State to the public acts, records, and judicial proceedings of every other State. And the Congress may by general laws prescribe the manner in which such acts, records and proceedings shall be proved, and the effect thereof.

Section 2, “The citizens of each state shall be entitled to all privileges and immunities of citizens in the several states.” Section 3,

New states may be admitted by the congress into this union; but no new state shall be formed or erected within the jurisdiction of any other state; nor any state be formed by the junction of two or more states, or parts of states, without the consent of the legislatures of the states concerned as well as of the congress.

Section 4,

The United States shall guarantee to every state in this union a republican form of government and shall protect each of them against invasion; and on application of the legislature, or of the executive (when the legislature cannot be convened) against domestic violence.

The United States is comprised of 3,007 counties, 64 parishes, 19 boroughs, 11 census areas, and 41 independent cities (United States Census, 2020). All of these regional areas act similarly to each other and take on different names depending what state or states they are in. Certain states have different names for their counties or subdivisions, such as Louisiana is comprised of the 64 parishes, Alaska has 19 boroughs and 11 census areas, and Virginia has a majority of the 41 independent cities with 38, with the other three being Baltimore, Maryland; St. Louis, Missouri; and Carson City, Nevada (United States Census, 2020).

Every “county” in the United States is referred to as a “local government” per the United States federal government, which falls below the state level. All counties operate in their own separate element, with cities operating at a smaller level than the county, but the county operates at a smaller level than the state in which it is (White House, 2021). The similar but separated structure of government allows for counties to hold local elections and have regional law enforcement and local laws that are specific to their region similar in relationship of a state to the federal government (Lobao & Kraybill, 2005).

Most counties are separated by three major sections: the board of supervisors, independent boards and commissions, and other elected officials (National Association of Counties, 2014). These major sections are similar to the state level and federal level of American government. The board of supervisors are elected positions that are held by those appointed for a specific-to-their-county term. Boards of supervisors are the elected leaders that are often viewed as the leaders of the county who create laws and policy and interact with state and federal officials to ensure the county is safe from crisis (National Association of Counties, 2014).

Putnam (2000) defined social capital as specific benefits that flow from the trust, reciprocity, information, and cooperation associated with social networks. Social capital creates value for the people who are connected and at least sometimes for bystanders as well. The Organization for Economic Co-Operation and Development (2020) define social capital as

Networks together with shared norms, values and understandings that facilitate co-operation within or among groups. In this definition, we can think of networks as real-world links between groups or individuals. Think of networks of friends, family networks, networks of former colleagues, and so on. Our shared norms, values and understandings are less concrete than our social networks. Sociologists sometimes speak of norms as society's unspoken and largely unquestioned rules. Norms and understandings may not become apparent until they're broken. If adults attack a child, for example, they breach the norms that protect children from harm. Values may be more open to question; indeed societies often debate whether their values are changing. And yet values—such as respect for people's safety and security—are an essential linchpin in every social group. Put together, these networks and understandings engender trust and so enable people to work together. (p.)

Every county in the United States has a different setting, with some being rural, others urban, some healthy, and some with a higher percentage of poor health. Counties in the United States even have higher or lower social capital rates. When conducting this study, the researcher wanted to not just look at COVID-19 deaths as a way of measuring how a county performed or a way to measure a county leader's leadership ability. To ensure there is evidence that some counties performed better than others, a couple of variables needed to be applied to ensure the

counties that outperformed others were found based on particular qualities in the county. The researcher checked the dependent variable with the independent variables to ensure that they correlated. After the researcher established that their correlation met the research standard, the researcher used descriptive statistics to find the mean of the variables and used that mean as the threshold to find the counties that performed well during the first year of the COVID-19 pandemic.

Though the goal of this study was to understand the human aspects of leadership styles and decision-making of county leaders, the researcher needed to remove any bias when choosing the counties and the elected officials for this study. To do this, the researcher relied on objective secondary data and commonly used statistical analysis to find the counties and their elected officials to determine who could be interviewed to collect qualitative data from. The process for this study was that the researcher obtained secondary public data from the Centers for Disease Control and Prevention (CDC) regarding the COVID-19 death rate. For this study, the deaths were counted from the first death attributed to COVID-19 in the United States to the end of March 31, 2021. The researcher collected data for the 2020 presidential election from Massachusetts Institute of Technology's Election Data and Science Lab. Massachusetts Institute of Technology's Election Data and Science Lab is a leading data-collection center for reporting on all federal elections since 1976. Their data is used by most major news outlets, including Politico, CNN, FOX, and NBC. The final sets of data are based on several social capital factors that were collected by the United States Congress from 2017 to 2022.

According to Putnam (2000), social capital is the connections among individuals, the norms of reciprocity and trustworthiness that come from them. This concept of social capital has shown that communities that relied on each other were closer as a community, which could be

seen as a negative during the first year of the COVID-19 pandemic when lockdowns, social distancing, and other measures were set in place to protect each other. Social capital has been cataloged by both Penn State University and the United States Congress Joint Economic Committee (United States Congress, 2022) to “advise Congress on policies to increase social capital through reconnecting Americans to work, improving investment in youth, making it more affordable to raise a family, increasing family stability, and rebuilding civil society” (para. 1). Within their research collected, they have several different variables that they use to create a “social capital index,” which is used to determine what counties have a positive or a negative social capital index.

The researcher conducted a Pearson correlational coefficient looking to find that there is a correlation between the dependent variable and the independent variables (Creswell & Creswell, 2018). Correlational research attempts to find the extent of the relationship between two or more variables using statistical data (Creswell, 2013). In correlational research, relationships between number and facts are the focus and then are interpreted. By using quantitative correlation research methods, the researcher looked to find and recognize trends and patterns in data, but it does not go as far as proving causes to the patterns (Creswell, 2013).

The next step the researcher did to identify the counties that outperformed was to use the descriptive statistical research method. According to Creswell and Creswell (2018), descriptive quantitative research looks to describe the status of identified variables at a place in time. By conducting descriptive quantitative research, the researcher can obtain systematic information about a phenomenon (Creswell & Creswell, 2018). In descriptive research, the researcher does not normally have a hypothesis but may develop one after data collection and the analysis and synthesis of the data provide the testing of the hypothesis (Creswell, 2013). Babbie (2010) stated

that, when using secondary or pre-existing data, the researcher must report the methods that were used to gather the data and describe any missing data that exists and provide clear reasoning why the missing data does not take away from the validity of the analysis.

Quantitative Results

After the quantitative analysis was completed using the above descriptive statistics, the researcher concluded the quantitative analysis by identifying six counties that outperformed the other counties in the United States based on the selected dependent and independent variables. Because the second phase of the study was qualitative in nature and the researcher used semi-structured interviews of county leaders from the identified counties, the counties that were identified are not named in this study to keep the participants' identities anonymous and confidential.

County 1

"County 1" is geographically located in the southeastern section of the United States. Within the county is the state's largest city and a major center for commerce. In the collection of data, this county's death per 100,000 was 159/100,000, which put it fourth lowest of the six counties. County 1 had a 60% vote for President Joe Biden in the 2020 United States presidential election, which was tied for third of the six counties. County 1 had a positive social capital index of 0.31, which made it third of the six counties. This county's percentage of fair or poor health was the second highest at 20.3%, and a density rating of 515.7, which puts it fourth out of the six counties. County 1 had three participants in the qualitative section of this study.

County 2

"County 2" is geographically located in the central midwest section of the United States. Within the county is the state's largest city and a major center for commerce. In the collection of

data, this county's death per 100,000 was 136/100,000, which put it third lowest of the six counties. County 2 had a 60% vote for President Joe Biden in the 2020 United States presidential election, which was tied for third of the six counties. County 2 had a positive social capital index of 0.004, which made it fifth of the six counties. This county's percentage of fair or poor health was the second lowest at 17.7%, and a density rating of 1131.0, which puts it second out of the six counties. County 2 had two participants in the qualitative section of this study.

County 3

"County 3" is geographically located in the southeastern section of the United States. Within the county is the state's largest city and a major center for commerce. In the collection of data, this county's death per 100,000 was 174/100,000, which put it fifth lowest of the six counties. County 3 had a 73.6% vote for President Joe Biden in the 2020 United States presidential election, which was the highest percentage of the six counties. County 3 had a positive social capital index of 1.13, which gave it the highest index rating of the six counties. This county's percentage of fair or poor health was the highest at 23.3%, and a density rating of 281.2, which makes it the least dense of the six counties. County 3 had two participants in the qualitative section of this study.

County 4

"County 4" is geographically located in the Appalachian region of the United States. Within the county is the state's fifth largest city, several medium-sized cities, and a major center for commerce. In the collection of data, this county's death per 100,000 was 94/100,000, which put it lowest of the six counties. County 4 had a 56.3% vote for President Joe Biden in the 2020 United States presidential election, which was second lowest of the six counties. County 4 had a positive social capital index of 0.49, which made it the second highest of the six counties. This

county's percentage of fair or poor health was the third lowest at 17.8%, and a density rating of 893.5, which puts it third highest out of the six counties. County 4 had two participants in the qualitative section of this study.

County 5

"County 5" is geographically located in the Appalachian region of the United States. Within the county is the state's 12th and 28th largest city, and an emerging center for commerce in the state. In the collection of data, this county's death per 100,000 was 177/100,000, which makes it highest of the six counties. County 5 had a 23.2% vote for President Joe Biden in the 2020 United States presidential election, which was lowest of the six counties. County 5 had a negative social capital index of -0.01, which made it the lowest of the six counties. This county's percentage of fair or poor health was the fourth lowest at 18.6%, and a density rating of 379.0, which makes it the second least dense out of the six counties. County 5 had three participants in the qualitative section of this study.

County 6

"County 6" is geographically located in the north Midwest section of the United States. Within the county is the state's largest city and a leading center for commerce in the state. In the collection of data, this county's death per 100,000 was 133/100,000, which makes it second lowest of the six counties. County 6 had a 69.4% vote for President Joe Biden in the 2020 United States presidential election, which was second highest of the six counties. County 6 had a positive social capital index of 0.20, which made it the fourth highest of the six counties. This county's percentage of fair or poor health was the lowest at 17.01%, and a density rating of 3957.4, which makes it the densest out of the six counties. County 6 had two participants in the qualitative section of this study.

Instrument and Data Collection

Once the researcher concluded the use of quantitative research methods to identify the counties that outperformed the other in minimizing the spread of COVID-19, the researcher started the qualitative research design to answer the two research questions. The researcher conducted an instrumental multiple case study to better understand what decision-making and leadership theories worked best during the first year of the COVID-19 pandemic.

For the qualitative data analysis of this qualitative study and in an attempt to answer Research Question 1: *Which leadership theories offer the strongest explanations of the decision-making of leaders in counties that performed the best (minimized COVID-19 deaths) during the first year of the pandemic?* and Research Question 2: *What changes did county leaders make to their decision-making during the first year of the COVID-19 pandemic?*, the researcher conducted an instrumental multiple case study to understand what decision-making and leadership theories worked for the counties that were identified in the quantitative analysis of this study.

To properly collect the qualitative data, the researcher took the counties that were identified through the descriptive statistical analysis and identified the county leaders (n=81) for each of those counties. In this study, the researcher focused on those who held a role of county board of supervisor, county supervisor, or one who had an elected county role that was named similar to board of supervisor or county supervisor (n=81). Once all the county leaders were identified, a public phone number and email address contact list was created for future contact.

The next step was to send a recruitment email to each member of the county leadership that explained the purpose of the study, requested their participation, and acted as informed consent. This email also had an attached link that forwarded the participant to a secondary

consent form and an introductory demographic survey. When the participants responded and agreed to be interviewed, the researcher scheduled interviews with the participants. Once there was an agreed date and time, the researcher conducted an approximate 30-minute semi-structured interview with each participant.

Semi-structured interviews are utilized in the qualitative section of the mixed-methods study to allow the researcher to probe issues that the participant believes are important from the questions asked (Clifford, 2016). The semi-structured format was important in this study to explore the participants' (n=14) responses to both leadership and decision-making during the first year of the COVID-19 pandemic. Based on the response to each question, direct follow-up questions were asked to obtain further information. The eight structured questions that were asked during the semi-structured interviews were as follows:

1. Describe what your leadership style was before March 2020. What was important to you as a leader?
2. What changes did you make to your leadership style after March 2020 when the COVID-19 pandemic started?
3. What factors were important to you as a leader during the first year of the COVID-19 pandemic?
4. Describe what impact COVID-19 has had on what is important to you as a leader.
5. What federal mandates during the first year of COVID-19 pandemic have restricted your leadership style?
6. What was your decision-making process prior to the COVID-19 pandemic? Please describe to me your step-by-step process.

7. What was your decision-making process during the first year of the COVID-19 pandemic? Please describe to me your step-by-step process.
8. What federal mandates during the first year of the COVID-19 pandemic have restricted your decision-making process?

Due to COVID-19 restrictions, all interviews were conducted remotely using Microsoft Teams, Zoom, or WebEx and were recorded using the interview software and recorded by a digital recorder for backup purposes. The recorded interviews were then transcribed so they could be coded for analysis. All recordings and transcriptions are held by the researcher in a password-locked file on the researcher's personal computer for safekeeping.

After 2 months of communicating with the 81 potential participants who matched the county location and elected title, the researcher was able to find 14 elected officials who agreed to participate in this study. Each participant requested to stay anonymous, and their identity was changed and coded to represent a participant number. A brief demographic of the participants (found in Table 1) will help identify who they are and their years of elected service.

Data Analysis

The next step for this study was the qualitative data analysis, which consisted of taking the recordings of the semi-structured interviews and submitting the files to Rev.com transcription services. The audio files for each individual interview were uploaded to Rev.com, and, within 72 hours, the researcher received a word-for-word transcript for each interview. After receiving the transcript from Rev.com, the researcher listened back to the recorded interviews and compared the interviews to the transcripts to verify their accuracy.

Table 1 – Demographic chart explaining participant’s sex, race, and years of service as an elected official, with totals

Participant Number	Sex	Race	Years as Elected Official
1	Male	Hispanic	4
2	Male	White	22
3	Male	White	28
4	Female	White	4
5	Female	White	15
6	Male	White	7
7	Female	White	8
8	Female	Black	4
9	Male	White	8
10	Male	White	42
11	Male	Black	3
12	Male	Black	4
13	Female	White	8
14	Female	White	7
Totals	6 Female	1 Hispanic	11.7 Years Average
	8 Male	3 Black	3 Years Lowest
		10 White	42 Years Highest

After verifying their accuracy, the researcher uploaded the transcripts to NVivo, a qualitative analysis software that is commonly used by researchers conducting qualitative

research studies. NVivo software is instrumental for researchers to help consolidate transcriptions, notes, and other qualitative data collected by the researcher (Bergin, 2011). According to QSR International (2022), NVivo is the premier qualitative software for dissertations and thesis presentations by streamlining qualitative analysis. NVivo software uncovers richer insights and produces clearly articulated, defensible findings backed by rigorous evidence (QSR International, 2022). Bazeley and Richards (2000) wrote that, with qualitative software like NVivo, “The researcher has the ability to manage, access, and analyze qualitative data and keep a perspective on all the data, without losing its richness or the closeness to data that is critical for qualitative research” (p. 1).

After the transcripts were uploaded to NVivo, the researcher started the coding and categorizing of data phase of the qualitative data analysis. According to Saldaña (2013), coding should be completed in a cyclical fashion, and for the study the 14 interviews were coded in a multi-phased process with the emphasis on ensuring the data were categorized and major themes identified. A secondary review of the major themes and categories revealed a total of four major themes regarding leadership styles and decision-making by county leadership during the first year of the COVID-19 pandemic.

Summary

This chapter presents an overview of the research methodology used for this qualitative case study. The researcher collected and analyzed data through descriptive and correlation statistical methods that allowed the researcher to identify the counties that best performed and identify the county supervisors from those counties. The research process continued for the researcher by collecting qualitative data through open-ended semi-structured interviews and analyzing qualitative data for the instrumental case study section of the study. The objective of

this study was to identify what counties better performed during the first year of the COVID-19 pandemic, which was collected from several secondary data sets, and then to use this information to contact the leaders of those counties and, through semi-structured interviews, use their words to tell the story of leadership styles and decision-making steps that allowed them to lead their followers. The plan for the data analysis was explained with the emphasis on how the data answered the two research questions asked in the study.

Part 1 The Nature of the Research Problem	Chapter 1 Introduction
	Chapter 2 Literature Review
Part 2 Research Methodology and Procedures	Chapter 3 Research Methodology
Part 3 Findings	Chapter 4 Research Results
Part 4 Conclusion	Chapter 5 Discussion and Conclusions

CHAPTER 4: RESEARCH RESULTS

The researcher completed a wide-ranging review of literature, analyzing and synthesizing an abundant number of articles in the area of leadership styles, decision-making, crisis leadership, county government, and the COVID-19 pandemic. Through this literature review, the researcher determined that there is a need for continuous and ongoing collaboration with leaders in all industries after the COVID-19 pandemic to better understand how it has changed our approach to leadership and decision-making. This qualitative study is an example of research needed to understand leadership and decision-making during the ongoing COVID-19 pandemic.

Interpretation of Findings

Through the analysis of the data that were collected, the researcher found four major themes, with several sub-themes that were important to the answering the two qualitative research questions. The first theme that was presented was “Leadership style pre COVID-19,” which addressed the participant’s leadership style and what was important to them as a leader before the COVID-19 pandemic. The second theme that emerged from the data was “Leadership style after COVID-19,” which represented what was important to the leader at the time of the first year of the COVID-19 pandemic and what challenges they faced as an elected county official.

The third theme that the researcher found beneficial to the study was “Decision-making pre COVID-19,” which addressed the decision-making process of every participant and the factors that were important to them when making decisions. The final major theme that surfaced from the data was “Decision-making after COVID-19,” which truly described the changes if any to the leader’s decision-making process, the important factors to making decisions after the beginning of the COVID-19 pandemic, and if any decision-making process emerged from all of

the participants that could be used as a guide for other county officials or other leaders during a major crisis like COVID-19.

Participant 1

Participant 1 was a Hispanic male who had been an elected official for 4 years. Through the semi-structured interview, he described his motivation for serving the county to “bring to light the discrepancies” and to establish “quality and some accountability.” Participant 1 was steadfast in ensuring that it was important to know that his leadership style included that people in his county understand what the government actually does and that accountability is important.

Participant 1 stated,

I don’t see as beneficial in the long run for the taxpayer or for the county itself, because of the cost and the fact that so many people who were tied to either county legislators or people who worked at the county, were receiving these contract.... I don’t believe we should be helping those who we know get contracts, while overlooking a fair and honest process to find the correct person to take.

After the start of the COVID-19 pandemic, Participant 1 described himself as an “advocate for the truth” and one who would fight for the “aspect of what is the truth.” Participant 1 mentioned,

...taking a step back and learning more about what was actually happening, understanding the roles that governments were having to step into,...to learn and understand the facts that were being given by...excuse me, the CDC, the administration, which was the Trump administration, his CDC, and then the guided administration and his CDC, and understanding what the effects will be here locally on our people.

Participant 1 stated that he saw his position as an elected official as a protector to “...put in place things that can protect the individual and to get us back to a time where we could possibly see some type of familiarity.” Participant 1 mentioned that having a structure in place was important to protect the people of his county. He mentioned that there are several issues that he has had to keep in mind: “How can we combine those two? What can we do to make sure

people still have jobs, can still pay their bills, and to make sure their lives are not too affected by this pandemic?”

Participant 1 informed the researcher that decision-making is an important factor in their ability to serve the community and mentioned,

Talking with the individuals that it was going to affect or change, or if it was negative and positive, to try to understand exactly what they were facing and what type of change did they want to see...then to go back and analyze the legislation itself, to look at notes and to compare about what it will do, what it won't do, those different types of things.

Participant 1 stated that it was important to ask questions when making decisions, such as “Who is this going to help?”, “Who is this going to affect?” and “What is this going to cost?”

After the COVID-19 pandemic, Participant 1 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 1 stated, “Listening to our health director of [the county],” “listen to the healthcare director of [major city in county],” and listen to the “health director of the state.” After listening to the information coming in, the participant had to be aware of concerns of the community. Participant 1 stated, “A lot of conversations with small businesses and a lot of conversations with different community groups, trying to understand what they were facing, what they were seeing and how this pandemic was affecting them.”

Participant 2

Participant 2 was a White male who had been an elected official for 22 years. Through the semi-structured interview, he described his motivation for serving the county because it has been his life-long home where generations have lived. Participant 2 mentioned that, prior to serving the county, he would “point out failures in the system” and knew that he could help those in his community through a “balance between being reactive and proactive.” Participant 2 stated that as a member of the board of supervisors, he was “the complaint department for local

government...and we get checked every day by our constituents.” Due to this scrutiny, Participant 2 created “clear goals for people” and “expects a certain level of accomplishment to meet those standards, that there is a clear and honest attempt.”

After the start of the COVID-19 pandemic, Participant 2 described himself as an “one who leads by example, you got to get out front.” Participant 2 ensured the researcher that being a good example for those in the county was his major focus but found it hard to communicate. Participant 2 stated, “It’s different when you stand in a room and communicate with people and you’re dealing with a problem and trying to craft a solution versus a Zoom call, Teams meeting, or just a conversation over the phone.”

Participant 2 informed the researcher that decision-making is an important factor in their ability to serve the community and mentioned that “Once I’ve formulated my plan, then it’s just motivating, communicating to the rest of the group, ‘Let’s go forward on this.’” Participant 2 stated that they “fell back on a lot of stuff from the (military), it’s like the five-paragraph order who, what, where, when,” and it was important to ask questions when making decisions, such as “Where do we want to go?” “What are we trying to achieve?” and “What are the possibilities of the road bumps?”

After the COVID-19 pandemic, Participant 2 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 2 stated that they need to “understand the problem” by listening to the information of others. After listening to the information coming in, the Participant had to be aware of concerns of the community. Participant 2 stated, “Knowing the major impact that COVID has had on everybody” and “How do you maintain safety and security?” Participant 2 also mentioned that “there wasn’t much change in my process after COVID-19 came,” and said it was important to understand “the

human input to the problem” and that it was important to have “a lot of conversations with different community groups.”

Participant 3

Participant 3 was a White male who had been an elected official for 28 years. Through the semi-structured interview, he described his motivation for serving the county to be a “driver for economic development,” “talk to kids regarding drugs and other things,” and “creating jobs for the people in the area.” Participant 3 stated that it is important to know that his leadership style included “listen to others to find out what people need, want or are interested in.”

After the start of the COVID-19 pandemic, Participant 3 described himself as “optimistic, as I am an optimist” and one who was keen to “protecting the infrastructure.” Participant 3 mentioned, “Try and keep our hospital systems running because they were starting to get overrun with people...which scared the hell out of everybody.” Participant 3 stated that over the course of the first year, “You always make a decision that some people are going to love and other people aren’t necessarily going to like.... Some people loved your decision and that other people hated it.”

Participant 3 stated that he saw his position as an elected official as a provider and fixer:

In the city there was much more pushback on it through, I heard everything from Tuskegee experiment to they don’t trust the government or a number of different reasons. So instead of being the government telling them they should do this, we pushed it out through faith based and through their community, through community leaders within, as an avenue of communication and trust.

Participant 3 informed the researcher that decision-making is an important factor in their ability to serve the community and mentioned, “engaging the public,” and “I have an open-door policy, I talk to everybody, I call everyone back.” Participant 3 stated that it was important to ask questions when making decisions and making sure that a county leader is “engaging the

community” and “engaging the leaders of the different cities.” By doing this, the leader is listening to the public, and they as the leader are being seen and hearing the problems the community is dealing with.

After the COVID-19 pandemic, Participant 3 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 3 stated that they “would have our health department director and even doctors from the different hospitals that would come in and give us updates” and that they “had to digest all those numbers and also hospital admissions.” After listening to the information coming in, the participant had to be aware of concerns of the community. Participant 3 stated, “became much more active in our health department” and “a lot of things that the health department comes out with, they affect your decision on a daily basis.” Participant 3 also mentioned that “after COVID came my decision making for the most part stayed the same, not much changed,” and it was important to understand “after COVID-19 I really looked at the human factor” and “it’s not necessarily what people want to do, but it’s what is the safest for the people to do.”

Participant 4

Participant 4 was a White female who had been an elected official for 4 years. Through the semi-structured interview, she described her motivation for serving the county as “safety is my number one thing...safety for my neighbors, my community, safety in the parks, safety in the roads, basic safety...security and the safety of our constituents.” Participant 4 was steadfast in ensuring that it was important that “parks are maintained, and people look forward to our parks” and that “I had neighbors call me and say, children who were hanging on the rails and they were afraid it was going to fall apart and it was concrete.”

After the start of the COVID-19 pandemic, Participant 4 described herself in the following way:

I went to a community meeting or whatever, I did not mask up, if we didn't have to, I only followed the rules of my municipalities. If I went to the courthouse, I would put on a mask. Business was usual here in my community

and

people in our area felt the same way—I was not out there to scare the people. I had enough documentation from doctors, to say we were okay, and I just wanted to make sure that my community was aware of what was happening in legislation.

Participant 4 informed the researcher that decision-making is an important factor in their ability to serve the community and mentioned,

Talking with the individuals that it was going to affect or change, or if it was negative and positive, to try to understand exactly what they were facing and what type of change did they want to see...then to go back and analyze the legislation itself, to look at notes and to compare about what it will do, what it won't do, those different types of things.

Participant 4 stated that it was important to ask questions when making decisions, such as “Who is this going to help?” “Who is this going to affect?” and “What is this going to cost?”

After the COVID-19 pandemic, Participant 4 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 4 stated that “there's a lot of different voices out there and we need to make sure that we listen to them and give them credit they deserve, analyze that information, and communicate in a way that is understood within the community.” After listening to the information coming in, the Participant had to be aware of concerns of the community. Participant 4 stated, “Everything from our businesses, our closeness with our neighbors, churches, and schools. Everything changed, and so did what was important as a leader.” Participant 4 also mentioned that their decision-making did not change due to COVID, but it was important to understand “COVID changed the idea of what was important,” and “every decision could and did affect so many people.”

Participant 5

Participant 5 was a White female who had been an elected official for 15 years. Through the semi-structured interview, she described her motivation for serving the county as “wanting to make sure that my constituents were taken care of” and that “as a county leader it was my duty to ensure that those changes were being seen, being heard, so really trying to make sure that my values aligned with those around me.” Participant 5 also noted that she wanted to “create change” and that “the people that voted for me in my area, I wanted them to know that they had a voice and that I was that voice.”

After the start of the COVID-19 pandemic, Participant 5 described herself as a leader where the “information they were receiving from me was true” and one who would fight for the safety and health of their community by “making sure that their safety was taken care of you know through the different measures that was passed down from the federal government from the state and the county.” Participant 5 mentioned, “I changed as a leader, but it was because I viewed my position as a county leader as a servant to my constituents and not so much as a talking head for the county.”

Participant 5 stated that she saw her position as an elected official as a position of trust: “importance was that I was the face of, one of the many faces of the county, but that when they looked at me, they knew that the information that they were receiving was true and authentic” and “the work that I did was with their safety and security in mind in a very authentic way” and that

I knew that others looked to me for guidance because I feel that I am authentic to the people I represent, because I am honest, I do care, I’m compassionate for others and enough self-aware to know that not everyone can process or handle the problems that COVID brought to us.

Participant 5 informed the researcher that decision-making was an important factor in their ability to serve the community and mentioned, “Decision-making as an individual process where if a problem came to me I would try and identify the problem that was at hand,” and

I will get a call from someone saying they need something, that there is a problem, and I will first think of any previous problems that I have dealt with that were the same or similar and have a baseline of what I will do from that. I use that experience in almost every decision I make.

After the COVID-19 pandemic, Participant 5 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 5 stated that the “biggest issue with the mandates was that there were so many different stream of communication coming in that it was really hard for the people of our county to know what they could and could not do” and “I would say that because of the impact that COVID has had on everyone, it felt that every decision that I was making was bigger than ever before.” After listening to the information coming in, the Participant had to be aware of concerns of the community. Participant 5 stated, “There were so many different big and hot topics.” Participant 5 also mentioned,

I will get a call from someone saying they need something, that there is a problem, and I will first think of any previous problems that I have dealt with that were the same or similar and have a baseline of what I will do from that. I use that experience in almost every decision I make

and “I really took a step back and conceptualized that everything that I was deciding on was going to affect people and affect them differently.” Participant 5 stated that they then take that information and communicate with the public: “my availability was to the public in different mediums, was conducted so people could communicate with me and still feel safe, that be in person but social distancing, on the phone, or through Zoom or Teams.”

Participant 6

Participant 6 was a White male who had been an elected official for 7 years. Through the semi-structured interview, he described his motivation for serving the county to “concerned with the overall welfare of people in my county...ensuring that any problems that constituents had that were brought to my attention that I would address trying to maintain a status quo.”

Participant 6 stated, “My leadership style was one more of a manager, someone that was involved in many different programs with the county, and to make sure that those programs were completed,” and “I looked at the problem at hand directly and tried to find a way that would benefit everybody.”

After the start of the COVID-19 pandemic, Participant 6 described himself as one who “looked at the true human level...caring for people, having empathy for what they are going through” and one who would fight “making sure that everyone’s safety and security was viewed at the highest of levels...be as genuine and real as a person to my constituents.” Participant 6 said focus on the people in his community was an important thing to change because, prior to COVID-19, they viewed themselves as a manager but was now “ensuring that everyone is safe” and looking at “the true human level.”

Participant 6 informed the researcher that decision-making was an important factor in their ability to serve the community and mentioned,

I would receive a problem, I would listen to the problem that was coming my way understand the background of the problem...I would interview people...utilize my experience from the past, something that I experienced in the past and I would apply that to what the problem is.

Participant 6 stated that it was important to see the big picture of things: “I would really look at the totality of everything and try to find if there were other solutions.”

After the COVID-19 pandemic, Participant 6 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 6 stated that “at the beginning because there’s so many unknowns,” and “Who’s in charge of putting that as a restriction or lack of restriction to keep everyone’s health and safety in mind?” After listening to the information coming in, the Participant had to be aware of concerns of the community. Participant 6 stated, “Common sense rules we tried to push but it had a lot to do with safety, medical conditions, and medical safety for everybody.” Participant 6 also mentioned that “even though a lot had changed when it came to COVID, still a lot of the influence was based upon previous experience,” and it was important to understand that “the only thing that affected my decision-making process was how was it going to affect everybody” and “who are they going to impact and how can we minimize any error or risk.”

Participant 7

Participant 7 was a White female who had been an elected official for 8 years. Through the semi-structured interview, she described her motivation for serving the county: “so there were things to me that were important. I ran on those ideas. I was elected for those ideas. I took the values of what I find important” and “to finish what I started.” Participant 7 was adamant that her leadership style was “following through on something that you were asked to do.”

After the start of the COVID-19 pandemic, Participant 7 described herself as “I needed to be more empathetic to what people were going through” and “just to be there for everyone because I just knew that as a leader, they were looking at me for guidance...overall security, be availability to everyone, and the need for inclusion within our communities.” Participant 7 mentioned, “Now it’s not so much about the status quo, it’s about making sure how I’m communicating and what I’m communicating with the public is true and accurate.”

Participant 7 informed the researcher that decision-making is an important factor in their ability to serve the community and mentioned,

Previously it was about solving a problem and maintaining a status quo...my decision-making process consisted of receiving a problem...work with other county leaders based upon the category that problem served...use myself as a communication device...if that problem came back to me, I would use prior experience.

Participant 7 doubled down on their previous experience by stating, “I have been making decisions for quite a while, and I’ve found that starting the decision-making process off with prior experiences is a great way to start any decision-making process to get good results.”

After the COVID-19 pandemic, Participant 7 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 7 stated,

When we were in lockdowns, communication wasn’t as easy as it used to be. There was no longer in person sessions, so learning new technology, but then also knowing how to communicate through, you know Teams, Zoom, and then phone calls and not just an in-person way of communicating and then also being open to those new forms of communication.

After listening to the information coming in, the participant had to be aware of concerns of the community. Participant 7 stated, “One hundred percent the people in my community, people in the county that I serve and their safety and their ability to be safe.” Participant 7 said that their decision-making process stayed the same: “Not much has changed during the pandemic” but also mentioned that “looking back COVID-19 made me look at who I serve not so much what I serve,” and it was important to understand “overall security, availability to everyone, and the need for inclusion within our communities...with the emphasis on the human aspect of things” is what is important. Taking that human factor into consideration, then, “making sure how I’m communicating and what I’m communicating with the public is true and accurate.”

Participant 8

Participant 8 was a Black female who had been an elected official for 4 years. Through the semi-structured interview, she described her motivation for serving the county as “I wanted to make sure what was asked of me got done” and to make “sure to be a public figure, be seen, be heard, to fight for the things that I thought were important to our county and to make sure that the population that was not seen or heard had a voice.” Participant 8 was steadfast in ensuring that it was important to know that her leadership style included “a person who really can inspire change in a community...and make sure that the marginalized people in my county were more represented.”

After the start of the COVID-19 pandemic, Participant 8 described herself as one who “took a stance on safety and being empathetic to the needs of everyone in our county because nobody could escape the grasp of COVID” and one who would fight for “ensuring that everyone in the county that their safety was number one,” Participant 8 mentioned,

How I changed as a leader were the focus of looking at humanizing the problems that we had in our county, and whether it be logistics or social justice or laws that were in our county everything was affected, everyone was affected by COVID and it changed how we all look at not only our lives but the lives of other.

Participant 8 also mentioned that their leadership changed because they reviewed how they were viewed by the public: “As a leader in this county it was my job to be that voice to not just be a figurehead” and that it was “important to ensure that everything that I did was viewed by the county as someone who cared about their problems and cared about what was bothering them.”

Participant 8 informed the researcher that decision-making was an important factor in their ability to serve the community and mentioned that their process is “pretty systematic” and

that “most people are looking for guidance and for a bigger picture.” Participant 8 stated that they

make sure that any problem that comes on my desk that I review it, I hear the voices of the people who are making the complaint to understand why they’re making a complaint or there is a problem, I then look for additional assistance in other elected officials that I work with to gain from their previous experience, I also look at my previous experience and what I have done in the past what has worked well for me, and use that as a guide going forward while making the decision.

After the COVID-19 pandemic, Participant 8 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 8 stated that there were “different avenues of information to decipher.” After listening to the information coming in, the participant had to be aware of concerns of the community. Participant 8 stated,

Previously, it was a group of people coming to me, they’re asking me for something, well now that has changed simply because we have an entire community, entire county who is coming to me and to my fellow elected officials demanding their safety.

Participant 8 also mentioned that “I really took a step back and conceptualized that everything that I was deciding on was going to affect people and affect them differently,” and it was important to understand “decision-making steps that I was doing were the same as before” and that communication is important:

I needed to communicate as honestly as I possibly could to assist them to make them feel a sense of security to feel as if what we were doing was making a difference even though some of those times maybe we weren’t making a difference.

Participant 9

Participant 9 was a White male who had been an elected official for 8 years. Through the semi-structured interview, he described his motivation for serving the county to be “understanding” a “vision” and to establish “a vision for the county when you’re elected to a leadership role.” Participant 9 stated that his leadership style included that people in his county understand what the government actually does. Participant 9 stated, “I would say I don’t want to

say passive, but the limited majority of the office County of Commissions, the legislative department, I would say that my leadership position actually came from being elected chairman of our county commission.”

After the start of the COVID-19 pandemic, Participant 9 described himself: “So when the pandemic hit, I organized a weekly meeting by our health department director, our medical director, and a resident executive vice president of our healthcare provider,” and the “best advice we had that the spread of the disease could be lessened somewhat by obviously limited exposure to the virus and to keep employees healthy and working and perform government services.”

Participant 9 stated that he saw his position as an elected official as one who viewed the public’s health as the most important factor: “my emphasis was to those older people and to be able to deliver services to them without particularly infected them. So there’s not a lot we can do obviously, but our health department manages arrangements for COVID testing them.”

Participant 9 mentioned that the psychological effect on the community was one of the bigger concerns for him as a leader: “One of the major concerns that I have was the psychological effect on the population. We did quite a bit of work running all the while attempting to keep that in a positive way instead of based on fear.”

Participant 9 informed the researcher that decision-making was an important factor in their ability to serve the community and mentioned,

I try to look at every decision that comes to me independent from everything else but in my decision-making process which does vary, I would say that the beginning of the process is usually started by me referring back to my previous experience, knowledge, and education.

After the COVID-19 pandemic, Participant 9 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 9 stated, “More towards the beginning there were so many unknowns, the best medical help was still a

guess” and that “as the governor issued mandates or issued executive orders, we would review them...priorities changed, but our goals and vision did not.” After listening to the information coming in, the participant had to be aware of concerns of the community. Participant 9 stated, “Competitive economically with our surrounding counties by following the executive orders of the Governor, and we did, and we obviously tried to keep the spread of the disease down.” Participant 9 also mentioned that it was important to understand “to do no harm was probably our guiding principle.”

Participant 10

Participant 10 was a White male who had been an elected official for 42 years. Through the semi-structured interview, he described his motivation for serving the county: “I take on topics that are important to the people who voted, the people who care about who I am and what I stand for” and to establish “I am exactly who I state who I am at all times.” Participant 10 stated that his leadership style is very straightforward. Participant 10 stated, “As a leader you should be the voice of the people, you should be there for the people that need you” and that “I am who I am, I stand for what I stand for, and those that want to follow me in my quest to better this county continue to vote for me for those reasons.”

After the start of the COVID-19 pandemic, Participant 10 described his major concerns for his leadership as “making changes to who I’ve been this entire time was a little difficult for me but knowing the major impact that a COVID has had on everybody” and that “big or small the health factor, the safety factor, and being empathetic to everyone needs was a portion of a decision at all times.” In addition,

People asking for help asking for guidance...the major change to anything that I did leadership wise was I took the time to look at the big picture of our safety and our health conscious especially to those in our county who were more vulnerable.

Participant 10 stated that ensuring that the populations who were affected by COVID-19 the most was another major factor:

It started to be a little more well known that the elderly, the ones who were a little more sickly than others, they were the ones having problems with COVID, and not as much with the healthy people here in our county, so once that started to be seen think we really started to go towards some more common sense laws or mandates here in the county and really wanted to put some emphasis on those who were being affected by COVID more.

Participant 10 informed the researcher that decision-making was an important factor in their ability to serve the community and mentioned, “I would use my experience to my advantage” and that they would “focus on the needs of the people that were asking questions.”

Participant 10 stated that it was important to have process in place and described their process:

If I was to make a decision, I would try to gather as much information on the problem that I could, I would try to find different voices or different alternatives to how I was viewing the problem, I would set a small committee if it was a bit topic or a big problem to gauge the ideas that were at hand, but I would also look at my previous experience if it was something that I was familiar with or if I had handled in the past.

After the COVID-19 pandemic, Participant 10 mentioned that it was difficult making decisions because there were so many avenues of information coming in:

Any decision-making steps that I was doing were the same as before it was just a matter of could I do it, you know with lockdowns it was more of after those lockdowns were eased or when we decided to ease those lockdowns and those restrictions, we had some ability to make a decision.

After listening to the information coming in, the Participant had to be aware of concerns of the community. Participant 10 stated, “Big or small the health factor, the safety factor, and being empathetic to everyone’s needs was a portion of a decision at all times.” Participant 10 also mentioned, “Well, there wasn’t much change in my process after COVID-19 came,” and it was important to understand “how would any of these decisions affect those in the community, those in our county, so we had to keep that in mind at all times?” In addition, “any decision after

COVID-19, regardless of what the problem was, we had to take a look and make sure that there was an underlying health factor in there.”

Participant 11

Participant 11 was a Black male who had been an elected official for 3 years. Through the semi-structured interview, he described his motivation for serving the county: “prior to COVID the most important thing to me was the transformation of our county” and “as a leader that was my duty to provide for the community, to impact the community where even beyond my tenure here, there would be the changes that instilled would still be there.” Participant 11 stated that his leadership style included that his voice be heard, goals are aligned with the population, and that problems get fixed. Participant 11 stated, “You have to make sure that not only are your values aligned with the goals of the county, but your goals are aligned with the people who voted for you,” and an

important factors to me as a leader is ensuring the problems that come to me get fixed, that the people of the county see that I am engaged with them...I think about allowing my voice to be heard, my face to be seen, and that the changes that I do make to the county our lasting changes that lasts beyond my tenure.

After the start of the COVID-19 pandemic, Participant 11 described himself interested in “the needs, the wants, the desires, the problems that COVID-19 has had and it’s created for the people in my community that has been the biggest impact” and one who would fight for “making sure that everyone in the community is safe, have equal access to healthcare, the health needs, and the logistics are important.” Participant 11 mentioned,

Unlike problems before COVID the problems of the county were just to a certain minority or majority of the people. COVID affected everyone so as a leader you had to take a step back and be empathetic to the needs of the people in your county.

In addition, “after COVID my leadership changed as I did not look at my legacy as much.”

Participant 11 informed the researcher that decision-making was an important factor in their ability to serve the community and mentioned that their specific process was as follows:

I would write it down, I would address the problem in comparison to other problems that were happening at the same time and see which problem had a higher priority. The concern that was chosen would result in me researching the problem, researching the history of the problem, looking to others that I work with for their insight their experience handling a problem of similar nature, speaking with people in the community to get their version of the problem, and then coming to an answer coming with alternatives to what I found to be the answer and then addressing the public who brought the problem to hand and let them know where we were coming from and how we were going to handle the problem.

After the COVID-19 pandemic, Participant 11 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 11 stated that they

take all this different information that was being passed to us and be able to pass that on to the people of our county, but to be able to do it in a way where they believed us, they trusted us.

After listening to the information coming in, the participant had to be aware of concerns of the community. Participant 11 stated, “The communication part was really difficult mainly because as a leader you need to pass information and people need to look up to someone for guidance and as a leader you need to influence people to make different changes.”

Participant 11 also mentioned that “after COVID-19 came, my decision-making process didn’t really change, the human input to the problem was what changed,” and it was important to understand “after COVID-19 I really looked at the human factor.” In addition, “when I would make a decision, I think beforehand I got the understanding or the qualitative reasoning behind any kind of problem.” Participant 11 stated that after processing the problem, that communication to the public was the final step, and after COVID-19 communication has to be done in a way that reaches everyone. Participant 11 stated, “You have to listen, communication

after COVID was extremely difficult, simply because it was different, and we were forced to listen and communicate differently than we had done before COVID.”

Participant 12

Participant 12 was a Black male who had been an elected official for 4 years. Through the semi-structured interview, he described his motivation for serving the county as “leadership is all about accountability, it’s about showing up being the example and making sure that you create a vision...accountability...and advocate for reduction in crime and making sure everyone is safe protected.” Participant 12 stated that his leadership style was similar to

someone that is steering the ship and everyone else works with the person steering the ship to ensure you get to where you need to go...leadership has always been a position of power...and being a stand-up person someone that everyone looks to.

After the start of the COVID-19 pandemic, Participant 12 described the pandemic: “COVID-19 has been devastating,” and “in my community not a lot of people have a lot of money, they don’t have a lot of resources, they don’t have a lot of tools to make them immune to COVID.” Participant 12 mentioned this changed his leadership style and what he viewed as important:

When I started to put myself in the place of those who were struggling, who were fearful that at any time they could get COVID-19 and get sick, and possibly die, that’s when my leadership changed.... [COVID-19] gave me a new perspective in how a community comes together, how a leader becomes a part of that community, and really pulls for that community not just because they are in charge, but because they remember that community.

Participant 12 informed the researcher that decision-making was an important factor in their ability to serve the community and mentioned, “Decision-making is a part of my everyday life, not only as a county leader but as a human being, as a parent, as a spouse.” Participant 12 stated,

I do make a decision or at least a larger decision that has a larger impact here in the county, I really try to research the problem, take my time or take the time that I'm given to really understand the problem.

In addition,

I also like to get the opinion or the view from other people that are experts here in the county, have their input be heard...and then apply it to the totality of the circumstance and then address that by communication what the next steps are to the people in the county that it will affect.

After the COVID-19 pandemic, Participant 12 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 12 stated, "Some of the problems that we were facing had never happened before we had never had a pandemic or an outbreak to this magnitude." After listening to the information coming in, the Participant had to be aware of concerns of the community. Participant 12 stated, "I really try to research the problem, take my time or take the time that I'm given to really understand the problem." Participant 12 also mentioned,

After COVID came my decision-making for the most part stayed the same, not much changed I'll say that just like before COVID a lot of the decisions that we make at the county level they are things that have happened before.

In addition, "looking at new ways to make change in decisions while utilizing old processes from pre-COVID," and it was important to communicate "apply it to the totality of the circumstance and then address that by communicating what the next steps are to the people in the county that it will affect."

Participant 13

Participant 13 was a White female who had been an elected official for 8 years. Through the semi-structured interview, she described her motivation for serving the county as "equal rights, equality, and the actions that I take would inspire others to do the same" and to establish "social justice platforms back in the day and really try to address things that matter to me."

Participant 13 described her leadership style as one where what is important to the community are important to her. Participant 13 stated, “The most important thing for leadership is establishing to your followers what it is that you want to change, and how you’re going to change it” because “followers looking up to someone in the belief that they can make change.”

After the start of the COVID-19 pandemic, Participant 13 described the major issues that changed her leadership: “the biggest thing that happened with COVID was it really gave everyone the perspective that were human. We are open to the effects of COVID, and no one is immune to it,” and “COVID changed the idea of what was important...a lot of the conversations that I had with people over that first year really changed me as a leader.” Participant 13 mentioned, “The biggest change after COVID was everything was different. Everything from our businesses, our closeness with our neighbors, churches, and schools. Everything changed and so did what was important as a leader.”

Participant 13 informed the researcher that decision-making was an important factor in their ability to serve the community and mentioned,

I would really take the time to listen to the people, listen to the desires that they had the wants that they had, and do research on it to where I would come up with alternative solutions to these problems, communicate the different solutions, get feedback from the community and then bring it to a vote within the county.

After the COVID-19 pandemic, Participant 13 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 13 stated,

Overall, there’s a lot of different voices out there and we need to make sure that we listen to them and give them the credit that they deserve, analyze that information, and communicate that in a way that is understood within the community.

After listening to the information coming in, the Participant had to be aware of concerns of the community. Participant 13 stated,

Needed to allow our business owners in our community to provide for their families, and a lot of them had to close over the first year but we did keep a lot of them open and I think today a lot of them are open now because we didn't force them to stay closed.

Participant 13 also mentioned that “with COVID my decision-making stayed the same. I would also say that COVID changed the idea of what was important, but not in the actual decision-making process,” and it was important to understand “communicate the different solutions, get feedback from the community and then bring it to a vote within the county.”

Participant 14

Participant 14 was a White female who had been an elected official for 7 years. Through the semi-structured interview, she described her motivation for serving the county to “focused and have always focused on getting the job done” and added,

I think it's important to do what you say, follow that up with communication back to those that are looking for the answer...and holding people accountable for their actions so people that come to me with problems they are expecting me to finish those and vice versa.

Participant 14 stated that her leadership style included listening to people, understanding what was important to the community, and finishing the problem at hand.

Participant 14 stated,

I went about my business very transactional, I listen to what people have to say and I find a way to complete what they're asking for, find a way to make something work based upon what they're asking me for...I need them to come to me and they need me to respond to that by completing the projects that they asked me to...I go to somebody with a problem I'm expecting them to finish that problem.

After the start of the COVID-19 pandemic, Participant 14 described the concerns to leadership because of COVID-19 as “they we were frightened, they were scared and they were looking for us for guidance” and understood that change was needed:

As a leader, I needed to listen, I needed to be empathetic to their concerns and their questions, and I needed to communicate as honestly as I possibly could to assist them to

make them feel a sense of security to feel as if what we were doing was making a difference.

Participant 14 mentioned,

I listen to what people have to say and I find a way to complete what they're asking for, find a way to make something work based upon what they're asking me for, but after COVID the emphasis on what was important has changed. Previously, it was a group of people coming to me, they're asking me for something; well now that has changed simply because we have an entire community, entire county who is coming to me and to my fellow elected officials demanding their safety.

Participant 14 informed the researcher that decision-making was an important factor in their ability to serve the community and mentioned, "I really like to take time making decisions.... If it's a decision that doesn't need to be made on the spot, as a leader you should really take the time to make a well-informed decision." Participant 14 stated that it was important to research, corroborate, and listen to feedback. Participant 14 stated that, when making decisions,

researching the problem, I'd like to get the input of subject matter experts that are in the county at many different levels and the input of other county elected officials, and to listen to their feedback once that is done, that's when I'm in a position to make a well-informed decision.

After the COVID-19 pandemic, Participant 14 mentioned that it was difficult making decisions because there were so many avenues of information coming in. Participant 14 stated that "it just seemed that it was growing and we were hearing about things we saw on the news it just seemed like it was encompassing everyone and it was growing and as a leader that wasn't easy to manage." After listening to the information coming in, the participant had to be aware of concerns of the community. Participant 14 asked,

How is this going to affect the health and safety of that population because of COVID, and the things that were changing during that time was I putting someone in a position that they would be more susceptible to catching COVID if I was making this decision?

Participant 14 also mentioned,

The major factor—or should I say the equal factor—to solving a problem or making that decision to solve a problem was the human factor of how this was going to affect who it was going to affect.... Those were the important human factors into my decision-making process.

Participant 14 stated that the final step in the decision-making process was to communicate, “then communicate in different means that we weren’t used to.”

Synthesis of Findings

Leadership Styles before COVID-19

After analyzing the data that were collected, the researcher found that before the COVID-19 pandemic, all the participants interviewed were either a transactional or transformational leader. Analyzing through the data, the researcher does not believe that any of the elected officials interviewed was a laissez-faire leader, and every participant was actively engaged with the citizens in their respective counties. There were small amounts of data that indicated that some of the transformational leaders were also servant leaders due to their caring about their community’s wants and desires.

Transformational Leadership

A lasting impression was an important factor to a couple of participants regarding their leadership style. One participant stated, “As a leader, that was my duty to provide for the community, to impact the community where even beyond my tenure here, there would be the changes that I instilled would still be there.” Another participant mentioned, “I think about allowing my voice to be heard, my face to be seen, and that the changes that I do make to the county are lasting changes that lasts beyond my time.”

The participants of the study also mentioned that alignment with their community was important as a transformational leader. One participant mentioned, “You have to make sure that not only are your values aligned with the goals of the county, but your goals are aligned with the

people who voted for you.” Another candidate stated, “There were things to me that were important. I ran on those ideas, I was elected for those ideas, I took the values of what I find important.... How are those values aligned”?

Change was another factor that several participants mentioned was a reason for their desire to be an elected official. One participant said, “I like to view myself as a person who cares about those around me while also trying to make simple change across my community and those who are involved,” where another participant stated, “The most important thing for leadership is establishing to your followers what it is that you want to change, and how you’re going to change it.”

Change in the community was a major concern previous to COVID-19. A participant mentioned, “Followers looking up to someone in the belief that they can make change, that they can answer the questions that they have in their community,” where another participant stated, “Have the goals and the wants of my community.... As a county leader, it’s my duty to ensure that those changes were being seen, being heard so really trying to make sure that my values aligned with those around me,” and finally a participant stated, “I view myself as a person who really can inspire change in a community.”

Transactional Leadership

Many participants who the researcher identified as transactional leaders looked at a lot of the problems facing the county as being on them; one participant stated, “I am who I am, I stand for what I stand for, and those that want to follow me in my quest to better this county continue to vote for me for those reasons” and “my leadership style was one more of a manager, someone that was involved in many different programs with the county, and to make sure that those programs were completed,” with another participant stating, “I felt it was important and how I

went about my business has been very transactional” and finally, “leadership has always been a position of power...someone that is steering the ship and everyone else works with the person steering the ship to ensure you get to where you need to go.”

Some leaders viewed their transactional leadership style as one of a “fixer.” Many of the participants mentioned that fixing problems was the main purpose for them being an elected official, with one participant stating, “To me as a leader is ensuring the problems that come to me get fixed, that the people of the county see that I am engaged with them,” with another participant mentioning, “I had neighbors call me and say, children who were hanging on the rails and they were afraid it was going to fall apart and it was concrete.” Another stated,

Ensuring that any problems that constituents had, that were brought to my attention that I would address trying to maintain a status quo...and what was expected of me, my constituents could see that I was performing that I was trying to fix the problems that I ran and was elected on.

A few other participants mentioned that accountability was an important factor of being a transactional leader. A participant stated, “Leadership is all about accountability, it’s about showing up being the example and making sure that you create a vision,” where another participant stated,

How do we make government more attainable for folks to understand what their government actually does?... I don’t see as beneficial in the long run for the taxpayer or for the county itself, because of the cost and the fact that so many people who were tied to either county legislators or people who worked at the county, were receiving these contracts.

Leadership Styles after COVID-19

After the start of the COVID-19 pandemic, the researcher noticed that there was a large shift from transactional and transformational leadership style to a servant, an authentic, or a mixture of both leadership styles. There was an overwhelming shift in these leaders’ desire to be seen as a truthful and real leader, one who was primarily focused on the citizens of their county’s

health, safety, and ability to be heard. Through the interviews, the researcher noticed that the participants were empathetic to the concerns happening in their county and wanted to make sure that everyone was represented.

Servant Leadership

After the COVID-19 pandemic started, the major leadership style that the researcher found the participants used was that of a servant leader. A lot of the participants mentioned that empathy toward the situation that COVID-19 had created was important to what was important to them as a leader. One participant stated, “Big or small the health factor, the safety factor, and being empathetic to everyone’s needs.” Another stated, “As a leader you have to take a step back and be empathetic to the needs of the people in your county,” with another participating mentioning “empathy for those who were fighting COVID-19, sympathy for those who were not winning the fight with COVID-19” and another participant stating, “COVID affected everyone so as a leader you have to take a step back and be empathetic to the needs of the people in your county.” Empathy continued with the participants; one participant stated, “Throughout that first year it was being empathetic, understanding and truly caring about the people in our community,” and “as a leader, I needed to listen, I needed to be empathetic to their concerns.” Another participant stated, “I needed to be more empathetic to what people were going through.... I really took a stance on safety and being empathetic to the needs of everyone in our county because nobody could escape the grasp of COVID.”

The human factor was another repeating theme with the participants when they described their leadership during the COVID-19 pandemic. One of the participants stated, “The only major impact has been the human impact,” with another stating,

...find other ways to be that community, that group, so as a leader and someone who has spent my entire life protecting others I had to find new ways to protect people in my community and so I viewed myself as a servant to the community.

In addition, “there was always a human aspect but after COVID I view every concern or problem with a ‘how is this going to affect everyone, are they going to be safe?’ viewpoint.” Others mentioned “the attention to the people of our county, the human aspect of making sure everyone was healthy, safe, and anything and everything we could do to minimize COVID-19.”

This empathy and the human factor were connected to the participants’ desire to ensure that the people of their counties were safe and healthy. One participant stated, “I took the time to look at the big picture of our safety and our health conscious especially to those in our county who were more vulnerable than others,” with another participant stating, “COVID is a big unknown in that we are doing everything we could to make sure that everyone is safe, healthy, and has the support of the county that they need.” Another mentioned, “When I started to put myself in the place of those who were struggling, who were fearful that at any time they could get COVID-19 and get sick, and possibly die, that’s when my leadership changed.”

Authentic Leadership

Along with the servant leadership style, authentic leadership was a leadership style that was used heavily by the participants after the COVID-19 pandemic. One participant stated, “The impact that you have in the legacy that you end up, with how you treat people, how you care about people, and not just for political gain but to really do it because you care,” with another participant stating, “[It] gave me a new perspective in how a community comes together, how a leader becomes a part of that community, and really pulls for that community not just because they are in charge but because they remember that community.”

Many of the authentic leadership leaders who were participants in this study mentioned that communicating truthfully was important to them and their relationship with their community. One participant stated,

I needed to communicate as honestly as I possibly could to assist them to make them feel a sense of security to feel as if what we were doing was making a difference even though some of those times maybe we weren't making a difference.

In addition, "I was the face of, one of the many faces of the county, but that when they looked at me, they knew that the information that they were receiving was true and authentic," and finally,

I knew that others looked to me for guidance because I feel that I am authentic to the people I represent, because I am honest, I do care, I'm compassionate for others and enough self-awareness to know that not everyone can process or handle the problems that COVID brought to us.

Another major concern for the participants who were identified as authentic leaders was being self-aware of the situations around them. One participant stated,

I think some of the level of treatment that we give to our citizens is based upon a lot of the fear that we dealt with as humans and knowing how afraid we were and then realizing that all of our population was going through the same thing, so that brought us together but they were dependent upon us to guide them through this.

Another participant stated,

In the city there was much more pushback on it through, I heard everything from Tuskegee experiment to, they don't trust the government or a number of different reasons. So instead of being the government telling them they should do this, we pushed it out through faith based and through their community, through community leaders within, as an avenue of communication and trust.

Finally, a participant said it was "important to be self-aware to what I knew what I believed in, what I could attest to was real in some of these more difficult and trying times."

Leadership Style Overview

The changes in leadership style from pre-COVID-19 to during COVID-19 are documented in Table 2 to help navigate the reader from the COVID timing to the leadership style used and then factors that were important for the leadership style.

Table 2 – Description of leadership style changes and factors that were important during that leadership style timing

Time	Leadership Styles	Factors
Pre Covid-19	A. Transformational	a. Vision
		b. Goals
		c. Alignment
		d. Lasting Change
		e. Provide
		f. Bigger Picture
	B. Transactional	a. Accountability
		b. Personal Quest
		c. Fixer
		d. Positional Power
		e. Manager
		f. Reactive
		g. Short Sighted

Table 2 (cont.)

Time	Leadership Styles	Factors
During Covid-19	A. Servant	a. Service to Others
		b. Empathetic
		c. Personal Safety
		d. Health Concerns
		e. Sympathy
		f. Attention
		g. Community Needs
		h. Protection
	B. Authentic	a. Truthful
		b. Honest
		c. Public Perception
		d. Listening
		e. Advocate
		f. Selfless
		g. Equality

Decision-Making before COVID-19

After analyzing the data that were collected, the researcher found that, before the COVID-19 pandemic, the participants interviewed all had different decision-making styles, different decision-making processes. Analyzing through the data, the researcher found patterns to the decision-making before the COVID-19 pandemic that can be described as taking the time

needed, researching and analyzing information, using previous experience, and finding assistance from other elected officials.

Throughout the interviews, the decision-making process was similar but different.

Participant 1 mentioned,

I talk with the individuals that it was going to affect or change, or if it was negative and positive, to try to understand exactly what they were facing and what type of change did they want to see, then go back and analyze the legislation itself, to look at notes and to compare about what it will do, what it won't do, those different types of things. Third the next aspect of this was to see if the program would be fiscally responsible and "What would the cost be? How long will this program let's say, take place? And did we need to invest more now to make sure that the program would be more effective?"

Participant 1's process was similar to what Participant 10 stated:

I was to make a decision I would try to gather as much information on the problem that I could, I would try to find different voices or different alternatives to how I was viewing the problem, I would set a small committee if it was a big topic or a big problem to gauge the ideas that were at hand, but I would also look at my previous experience if it was something that I was familiar with or if I had handled in the past.

The participants in this study mentioned that they would use their time making decisions if they could. Participant 12 stated, "Take my time or take the time that I'm given to really understand the problem," and Participant 14 mentioned, "I really like to take time making decisions...if it's a decision that doesn't need to be made on the spot, as a leader you should really take the time to make a well-informed decision." The decision-making process continues with research and analyzing information, as Participant 4 stated: "First, I do my research," where Participant 11 stated, "The concern that was chosen would result in me researching the problem, researching the history of the problem," and Participant 14 stated, "Researching the problem, I'd like to get the input of subject matter experts that are in the county at many different levels and the input of other county elected officials."

The next major theme to the decision-making process before the COVID-19 pandemic was the use of previous experience as an aid to help the decision maker make a better decision.

Participant 5 stated,

I will get a call from someone saying they need something, that there is a problem, and I will first think of any previous problems that I have dealt with that were the same or similar and have a baseline of what I will do from that. I use that experience in almost every decision I make.

Participant 6 mentioned, “[I] utilize my experience from the past, something that I experienced in the past and I would apply that to what the problem is,” and finally Participant 7 stated, “I have been making decision for quite a while, and I’ve found that starting the decision-making process off with prior experiences, is a great way to start any decision-making process to get good results.”

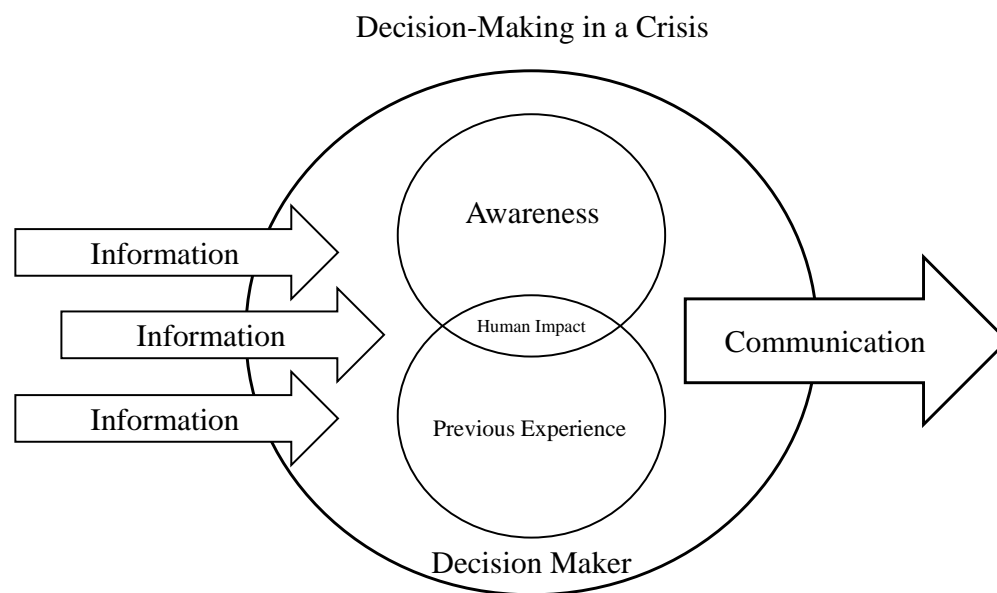
The final major theme to pre COVID-19 decision-making was finding assistance from other elected officials in their county. Participant 11 noted “looking to others that I work with for their insight, their experience handling a problem of similar nature,” while Participant 14 stated, “I’d like to get the input of subject matter experts that are in the county at many different levels and the input of other county elected officials.” Participant 3 mentioned something similar: “engaging the leaders of the different cities,” where Participant 4 stated, “I would meet up with the department heads or the particular person in that department and discuss the best way to solve the issue,” and Participant 7 stated, “I would work with other county leaders based upon the category that, that problem served.”

Decision-Making after COVID-19

During the analysis of the data, the researcher pulled several major themes that were instrumental in noticing a decision-making process that was different than the decision-making process before the COVID-19 pandemic. The analysis of the data revealed that, collectively, the

14 participants created a sequential five-step process that the researcher visualized in the model seen in Figure 1 to help the reader understand the post COVID-19 decision-making process that was described by the fourteen participants.

Figure 1 – Post COVID-19 decision-making model developed from the data collected



Information

The first phase in decision-making after the COVID-19 pandemic is the information phase. This is the phase where the decision maker is receiving information from other regarding the crisis that they are deciding on. In the above the model, there are multiple arrows depicting multiple streams of information that the decision maker is taking in. One participant stated, “There’s a lot of different voices out there and we need to make sure that we listen to them and give them the credit they deserve,” where another participant mentioned, “Our health department director and even doctors from the different hospitals would come in and give us updates,” and “There were so many different streams of communication coming in that it was really hard for the people of our county to know what they could and could not do.” Other participants stated, “At the beginning there was so many unknowns.... The best medical help was still a guess,”

while another stated, “Different avenues of information to decipher” and “Different information that has come our way.”

The multiple pieces of information that were coming into the decision makers was hard to process, as one participant mentioned,

It just seemed that it was growing and growing, and we were hearing about things we saw on the news it just seemed like it was encompassing everyone, and it was growing and as a leader that wasn't easy to manage.

Another problem the participants faced was ensuring that the information was accurate, as one participant asked, “How do we make sure what information that we are receiving is true?” and another mentioned,

Take all this different information that was being passed to us and be able to pass that on to the people of our county, but to be able to do it in a way where they believed us, they trusted us.

Awareness

The second phase in decision-making after the COVID-19 pandemic is the awareness phase. In this phase, the decision maker uses their awareness to understand what those in their community are experiencing and wanting from those in a position of leadership. One participant stated, “When you have something this big you really need to understand and be self-aware of the surroundings as a leader when it comes to COVID-19 and its impact.” Awareness is not just limited to one problem or the big problem such as COVID-19, but awareness of all the things happening in their community. The 14 participants provided several different scenarios that were directly related to their county, but the overall theme was that they acknowledged that they needed to be aware of the problems. One participant mentioned, “The impact that COVID had to everyone not only to their health but also their mental health with not knowing what was coming

next” or “Some of the problems that we were facing had never happened before we had never had a pandemic or an outbreak to this magnitude,” with one participant stating,

Previously, it was a group of people coming to me, they’re asking me for something, well now that has changed simply because we have an entire community, entire county who is coming to me and to my fellow elected officials demanding their safety.

During the first year of COVID-19, “priorities changed, but our goals and vision did not” was a common theme. There was a push to combat the spread of COVID-19, but the decision maker still needed to address secondary factors that came from the COVID-19 pandemic. One participant stated that the elderly population was important in their county, “Having an older population after March is very significant in our deaths. If you were 65 years older and you contracted COVID, you got a 30% chance of dying,” where others were concerned with the youth: “The exception was that we probably were totally aware of the effect on our children by getting them out of their daily routines and the insecurities that developed because of that.” Others were focused on the economy and how their community could pay their bills: “What can we do to make sure people still have jobs, can still pay their bills, and to make sure their lives are not too affected by this pandemic?” Another stated,

We needed to allow our business owners in our community to provide for their families and a lot of them had to close over the first year, but we did keep a lot of them open, and I think today a lot of them are open now because we didn’t force them to stay closed.

Previous Experience

The third phase in decision-making after the COVID-19 pandemic is the previous experience phase. In this phase, the decision maker utilizes previous experience that they have gained during their time as a county leader and as a decision maker. This phase is similar to the pre COVID-19 phase where the decision maker makes current decisions based on personal experience. One participant stated, “I found myself really relying on my previous experience that

I had received in smaller crisis from my past because I've never dealt with anything like COVID," where another participant mentioned

relying on the same decision-making process but trying to look at how things are done before you have some of the experiences that I had dealt with before really came into play when I was in the process of finding out how or solutions to the problem while making a decision.

Human Impact

The fourth phase in decision-making after the COVID-19 pandemic is the human impact phase. In this phase, the decision maker blends awareness and past experience to focus on the human impact their decision is going to have. The decision maker is aware of the problems facing their county, and they are also conscious of how previous experiences help them in decision-making. When there is a crisis like the COVID-19 pandemic that reaches everyone, the human impact is a factor in every decision. One participant stated, "How would any of these decisions affect those in the community, those in our county, so we had to keep that in mind at all times?" or "making that decision to solve a problem was the human factor of how this was going to affect who it was going to affect."

When making decisions, other participants asked, "Was I putting someone in a position that they would be more susceptible to catching COVID if I was making this decision?" and "How was it going to affect everybody?" and finally, "Make sure that we're not crumbling our economy, but also making sure everybody was safe." Other participants mentioned they "put the human factor into everything that I did, decisions that I made, and how I communicated with everyone" and "I had an extra step in my decision-making process where I focused on thinking about how this decision was going to impact people in my county and how that impact is going to be related to the pandemic."

Communication

The fifth phase in decision-making after the COVID-19 pandemic is the communication phase. In this final phase, the decision maker must take the previous phases of information—awareness, previous experience, and human impact—make their decision based on those factors, and then communicate with the people in their community. In the above model, there is only one arrow for communication, which represents that, even though there are multiple streams of information coming in, the communication coming from the elected official must be singular, authentic, and trustworthy to the people in their community. A participant stated, “It’s about making sure how I’m communicating and what I’m communicating with the public is true and accurate.”

During the COVID-19 pandemic, communication was not easy like it was before COVID-19: “Most of the things we’ve done in the past were things done in person, but COVID-19 made that near impossible.” Another participant stated, “One of the things that I focused on was learning new technology and learning different ways to communicate with everyone in the county.” Even though communication was difficult because of the problems COVID-19 created, the participants still needed to communicate, as one participant mentioned: “The communication part was really difficult mainly because as a leader you need to pass information and people need to look up to someone for guidance and as a leader you need to influence people to make different changes” and

I needed to communicate as honestly as I possibly could to assist them to make them feel a sense of security to feel as if what we were doing was making a difference even though some of those times maybe we weren’t making a difference.

Decision-Making Overview

The changes in decision-making from pre COVID-19 to during COVID-19 are documented in Table 3 to help navigate the reader from the COVID timing to the decision-making used, and then factors that were important for the decision-making.

Table 3 – Description of decision-making changes and factors that were important during that decision-making timing

Time	Decision-Making	Factors
Pre Covid-19	Multiple Processes	a. Listening
		b. Researching
		c. Using Past Experiences
		d. Voting on Decision
		e. Personal Process
During Covid-19	Information	a. Rely on Data
		b. Listen to Experts
		c. Federal/State Data
		d. Multi-Streams of Information
		e. Research
		f. Impact of Data
	Awareness	a. Accepting Change
		b. Synthesizing Information
		c. Understanding Who/What is Affected
		d. Self-Aware of Problems
		e. Developing a Plan

Table 3 (cont.)

Time	Decision-Making	Factors
	Previous Experience	<ul style="list-style-type: none"> a. Learning from Prior Crisis b. Remembering how to Decide c. Old but New Process for decisions
	Human Factors	<ul style="list-style-type: none"> a. Who is Affected by the Decision? b. Health and Safety c. Other Factors Not Specific to the Crisis d. Emotional Effects e. Inclusion
	Communication	<ul style="list-style-type: none"> a. Communicating Decision b. Communication should Reach Everyone c. Understanding New Technology d. Using Multiple Methods to Reach the Population e. Authentic

Relationship to Theoretical Framework

In this study, the researcher focused on the crisis leadership theoretical framework to frame the purpose of this study, which was to identify leadership styles and decision-making processes of elected county supervisors. The framework assisted the researcher by identifying the change in leadership styles pre and during COVID-19 as transformational and transactional to servant and authentic leadership styles.

Crisis leadership successfully works when leadership approaches and styles are applied (Fink, 1986), and it is integral when looking at the results of this study. The researcher found that, during the crisis of COVID-19, the participants stated they applied the servant and authentic leadership styles and collectively described a decision-making process that added a human impact to their decision-making. These results imply that the crisis leadership theoretical framework was correct for this study, as both leadership styles and decision-making are major factors in crisis leadership (Darmody & Smyth, 2016).

Part 1 The Nature of the Research Problem	Chapter 1 Introduction
	Chapter 2 Literature Review
Part 2 Research Methodology and Procedures	Chapter 3 Research Methodology
Part 3 Findings	Chapter 4 Research Results
Part 4 Conclusion	Chapter 5 Discussion and Conclusions

CHAPTER 5: DISCUSSIONS AND CONCLUSIONS

As mentioned in chapter 1 and synthesized from the readings in the literature review in chapter 2, both leadership and decision-making studies are focused on studies from before the COVID-19 pandemic. Even though, at the time of writing, the pandemic is 2 years old, and there are emerging studies being done regarding leadership and decision-making, they are not focused on the county level of government leadership.

Leadership is a highly studied topic that has not been around for long but has been addressed in several different situations—its approaches, its styles, and how it is used in organizations, and even the relationships leadership holds with its followers. Sorenson and Goethals (2007) wrote that, when we study leadership as a phenomenon, we look for features of it that span different contexts. These different contexts are the part that makes generalizing any part of leadership difficult. Crisis leadership is an important theory in today's environment, with most organizations and governments going through one or more crises on an ongoing basis. Crisis leadership is an application of leadership approaches and styles during a crisis (Fink, 1986).

Like leadership theories, there are several different theories to making decisions. Rational choice theory is based on the idea that human beings make decisions that bring them the most benefit with the least amount of cost (McCormick, 2011). To do this, the decision maker must be able to calculate the benefits and weigh them against possible losses in the decision-making process. Rational choice theory states that decisions are made based on costs and benefits and that the decision maker collects information to weigh the two before a decision can be made (Paternoster, 1989).

The researcher believes that the discussion needs to be started about how county government leaders use leadership styles and decision-making models to ensure their followers are healthy as the COVID-19 pandemic continues with new variants every few months. County leaders need to know that there may be a change to leadership styles and decision-making models due to the COVID-19 pandemic, and this study has focused on and identified leadership styles and a decision-making model that county-level government elected officials can use during a major crisis like the COVID-19 pandemic.

In chapter 3, the researcher discussed the research methods used to conduct this study. The purpose of this study was to understand what leadership styles and decision-making theories worked best for county leaders in their attempt to minimize the spread of COVID-19. This qualitative research study utilized both quantitative and qualitative methods, where the quantitative methods were used to help the researcher identify the counties that outperformed in minimizing the spread of COVID-19 and act as the sample for the study.

After creating a plan to conduct this study, from the quantitative phase and through the transition into the qualitative phase, the researcher discussed in chapter 4 how all the data that were collected, analyzed, and presented; what major themes were found; and how that answers the researcher's research questions and the contributions to the literature. Through the analyzing of the quantitative data, the researcher identified six counties that outperformed all other counties, identified 81 elected county commissioners that represent those six counties, and conducted qualitative semi-structured interviews with 14 of the elected county officials, which is where the qualitative data for this study come from. Between the quantitative and qualitative analysis, the researcher answered the two research questions.

Limitations of the Study

The researcher understands that there are limitations to both quantitative and qualitative research (Creswell, 2013). Tracy (2013) wrote that, even though the limitations to qualitative researcher are noted, it does not decrease the benefits and the advantages to learning from the lived experiences that come from qualitative research. The following are the limitations the researcher encountered during the study.

Quantitative Data Sets

The only limitation the researcher faced during the quantitative phase of the study was that not all the secondary data sets aligned for the data. This was only evident during the 2020 presidential election data, which were reported by every county, but in the state of Alaska the data was for the reporting region, which does not match exactly with a county-by-county dataset like all other counties. Another factor to the quantitative data was that the researcher removed the independent cities from the study because their naming is equal to a county, but they have the demographic overall make-up of a city, which is different from counties, parishes, and boroughs that make up both cities and rural areas, which is significantly different than just one city.

Qualitative Interviews

During the quantitative analysis, the researcher identified six counties that outperformed due to the variables that were used, and with the target audience of those six counties being the elected county commissioners, that left the researcher's sample population of elected county commissioners total at 81. During the recruitment process, the researcher was able to gather 14 participants—two participants from all six counties, with two counties having three participants.

According to Schoch (2020), sample sizes in case studies are typically small, which is common in most qualitative research studies. Schoch (2020) used Scheib's (2003) study as an

example of small numbers used as their sample. In the study, Scheib (2003) stated that, in his collective case study about the role of stress on high school music teachers, he first selected the site since he had access to it, it had well-established music programs, and the music department offered band, choir, and orchestra, a variety of musical programs. After selecting the site, the researcher focused on the four music teachers who taught there; the four teachers constituted the sample.

Vasileiou et al. (2018) found in their research that choosing a suitable sample size in qualitative research is in conceptual debate and practical uncertainty and that sample size sufficiency is often poor and absent across a range of disciplinary fields. In Vasileiou et al.'s (2018) research, their results found that sample size justifications in qualitative health research is limited, is not contingent on the number of interviews, and relates to the journal of publication. Their research found that saturation of data was more important to the research than the number in the sample.

Saturation has also been shown to be an effective approach to sampling guidelines in qualitative research (Sim et al., 2018). In their research, Sim et al. (2018) focused on several previous studies that found different lower numbers due to a saturation point in their data collection and analysis. The first case they reference is Guest et al. (2006), who initially interviewed 60 West African women, which represented an unknown population, and, during analysis, they found that saturation occurred within 12 interviews. The second study was Guest et al. (2016), who found that 80% of all themes emerge within two study groups and 90% within three groups. Finally, Francis et al. (2010) found in one study that with 10 interviews there was a stopping criterion for saturation at three interviews where no new themes emerged, and in a second study all 14 interviews were needed to achieve saturation.

Another limitation to the study is the fact that the target population was only those who hold the title of elected county commissioner, but every county is different and has a multitude of elected and non-elected officials who are in positions of leadership and who are entrusted by the people who reside in their county to make decisions that affect their safety, security, and health decisions. This study could have expanded to all county officials who make decisions on behalf of the county to gather additional data about leadership and decision-making.

Suggestions for Future Research

Further research on leadership styles and decision-making during the first year of the COVID-19 pandemic is needed to better understand what county leaders were dealing with during this timeframe. This study was focused on counties that performed better than all the other counties based on the used variables. Yet there are different stories that occurred during the first year of COVID-19 that will provide additional rich data to the bigger picture of leadership and decision-making during a global crisis.

During the qualitative section of this study, the researcher was able to answer the two research questions. The first was to identify leadership styles that worked the best during the first year of the COVID-19 pandemic, which was found to be servant leadership, authentic leadership, and a mixture of both leadership styles. Second was to know what changes county leaders made to their decision-making during the first year of the COVID-19 pandemic, which was an individual process before COVID-19, and then a fairly systematic approach that was focused on the human impact that their decisions would have on the population. The researcher understands that this study is bounded by the two research questions asked in chapter 1, but there is more that can be explored. For this reason, the researcher believes that the following recommendations for study could come from this study:

1. A mirrored study can be conducted that focuses on the counties whose deaths per 100,000 were over the mean. This study could focus on the counties that did not outperform and find what leadership styles they used during the first year of COVID-19 and compare the results of this study to the current study and find differences and similarities in the two.
2. Future research should focus on leadership and decision-making during the first 2 years of the COVID-19 pandemic. By doing this, it will incorporate the pandemic but will include the vaccines and boosters and the decision-making during those times.
3. Future research should apply this same research approach but look outside of local government and focus on private-sector businesses and research the leadership styles of “C-suite” officers during the COVID-19 pandemic and other crises.
4. Future research should examine if the decision-making process the research identified in this study can be used in a practical application in crisis outside of the COVID-19 pandemic.

Contribution to the Literature

This study has been important and will contribute to both leadership and decision-making literature because it has captured the change that happened during the COVID-19 pandemic. In both research questions, the researcher asked what leadership styles county leaders used and what decision-making processes were used during the first year of COVID-19. These are questions that have not been asked of county-level elected leaders. Even though we are 2 years into the pandemic and many things have changed since the timing of this case study, such as different variants, vaccines, and their boosters being widely available, the researcher was still able to capture what leadership styles and what decision-making processes worked best during

the first year of the COVID-19 pandemic when things seemed bleak, there were so many unknowns, and there were no vaccines or real preventative measures in place.

With so many different theories and models for leadership and decision-making out there, the researcher feels that this study will act as a foundation for more research in regard to decision-making in a crisis. The decision-making information gathered and used as the data for the aforementioned decision-making model will help both scholars and practical leaders to take information, process the information, and communicate the information during a crisis. The developed decision-making model consists of five major steps: 1) *Information* as shown by three arrows pointed to represent several streams of incoming information a decision maker must take in. This information comes to the decision maker, who then has three important filters to keep in mind while making a decision; 2) *Awareness*, which is understanding the problem and its complexities; 3) *Previous Experience*, which is relying on previous situations, 4) *Human Impact*, which focuses on how this decision is going to affect those it effects; and the last section in the decision-making model is 5) *Communication*, which is when the decision maker communicates their decision and in this model is represented by a single arrow pointed away from the decision maker as it shows the flow of information. As mentioned in the “Suggestions for Future Research” section, this model should be tested by elected leaders, but also by leaders in all industries. If this crisis decision-making model is used in control studies, those using it can redefine the model to specific crises and to certain types of “leaders.” The researcher hopes that this model will help decision makers during any crisis that comes to them.

Implications for Leadership Research and Practices

Goddard and Melville (2004) wrote that research is not just a process of information gathering but is about answering unanswered questions that that do not currently exist. This is

true, but every research needs to draw from existing literature, like this researcher has done in the literature review. This literature creates a basis of knowledge, and what the researcher has found in this study has set a basis of knowledge for government county elected leaders and documented their transitioning leadership styles and decision-making processes that can be practically used by leaders who are making decisions post COVID-19. This research can be used by scholars and researchers to use in their own research in leadership, decision-making, transitional leadership, crisis leadership, county government, and the COVID-19 pandemic. The leadership studies field is growing, and with a global problem like COVID-19 that has shown to affect everyone in the world, the studies into leadership and the effects of COVID-19 will be continuous, and this study will aid not only this researcher in future research but also others in this field.

Conclusion

In this study, the researcher was interested in the impact the COVID-19 pandemic had on elected county commissioners' leadership and decision-making. Knowing how large of an impact the pandemic has had on everyone, the researcher felt that this topic would be helpful for government leaders and leadership researchers alike. This study started while the researcher was experiencing COVID-19 for themselves and while conducting their literature review for their dissertation and other doctor of philosophy courses, and the researcher felt that the need to know, understand, and explain why certain leadership styles are important in different situations is important theoretically and practically.

As this study evolved and the researcher found more and more information about leadership, decision-making, crisis leadership, county government, and COVID-19, the researcher developed a research plan to answer the research questions. In chapter 4 of this study, the researcher explained the analysis of the quantitative and qualitative data that were collected.

In the three secondary data sets used for which counties outperformed all others and, the researcher can state that there were six counties that outperformed all the other counties. Within those six counties, there were 81 elected county commissioners, of which 14 agreed to the data collection interviews. From those qualitative semi-structured interviews, the researcher was able to find that, before the COVID-19 pandemic, the two major leadership styles used by the elected officials were transformational and transactional leadership, but after the COVID-19 pandemic started and during the first year of the pandemic, their leadership style changed to that of a servant leader, an authentic leader, or a combination of both. The research also found that the decision-making processes before the COVID-19 pandemic were not aligned and that there was no distinct process, but after the pandemic, decision-making was described by five major themes: information, awareness, previous experience, human impact, and communication. The researcher found that one of the major changes in leadership styles and decision-making processes was the “human impact” that every leader was aware of and that shaped their leadership style and their decision-making process. Before the pandemic, government leaders were focused on a portion of the population, but after the start of the COVID-19 pandemic, the focus was on all the population and their health and safety.

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Appendix A

IRB Approval Letter

RE: IRB Review

IRB No.: 050-2122 EXP

Project: Government Leadership During the First Year of the COVID-19 Pandemic

Date Complete Application Received: 12/04/2021

Date Final Revision Received: 01/07/2122

Principle Investigator: Brian Hempel

Co-PI: N/A

Faculty Advisor: Dr. Chris McHorney

College/Department: Leadership Institute

IRB Determination: Expedited Application **Approved** – Faculty research using anonymous survey questionnaires; no minor participants; no more than minimal risk/risk appropriately mitigated; no deception utilized; acceptable consent procedures and documentation; acceptable data protection procedures. Data collection may begin, in accordance with the final submitted documents and approved protocol.

Future Correspondence: All future correspondence about this project must include all PIs, Co-PIs, and Faculty Advisors (as relevant) and reference the assigned IRB number.

Approval Information: (Expiration: Full Review Only) Approval is granted for one year from date below. If you would like to continue research activities beyond that date, you are responsible for submitting a Research Renewal Request with enough time for that request to be reviewed and approved prior to the expiration of the project. In the case of an unforeseen risk/adverse experience, please report this to the IRB immediately using the appropriate forms. Requests for a change to protocol must be submitted for IRB review and approved prior to implementation. At the completion of the project, you are to submit a Research Closure Form.

Researcher Responsibilities: The researcher is responsible for ensuring that the research is conducted in the manner outlined in the IRB application and that all reporting requirements are met. Please refer to this approval and to the IRB handbook for more information.

Date: 01/12/2122

Appendix B

Recruitment Letter

Date

Dear -----,

My name is Brian Hempel, and I am a PhD candidate at California Baptist University conducting a dissertation study on government leadership and best practices during the first year of the COVID-19 pandemic. I am requesting government county leaders who outperformed other counties during the first year of COVID-19 based upon an analysis of the Senate's Joint Economic Committee and Massachusetts Institute of Technology Election Lab data.

I hope that you are willing to complete a brief 3-minute demographic survey and participate in a 30-minute semi-structured virtual interview to understand different leadership approaches and behaviors during the first year of the COVID-19 pandemic. Your participation is voluntary, and your responses will remain confidential.

Your participation is appreciated. By clicking [HERE](#) you will be taken to the informed consent document and initial survey. I will initiate the request for a 30-minute virtual meeting with those of who completed the survey.

Please contact me or my dissertation chair Dr. Chris McHorney, PhD If you have any questions about the study you are welcome to contact me or my dissertation chair, Dr. Chris McHorney, PhD at (951) 343-4757 or at cmchorney@calbaptist.edu.

Thank you for your consideration,

Brian Hempel, M.S. Ed, Ph.D. Candidate
Brianal.hempel@calbaptist.edu
(909) 957-1041

Chris McHorney, Ph.D., Dissertation Chair
cmchorney@calbaptist.edu
(951) 343-4757