

Research On The Effects Of Transformational Leadership On Nurse Performance And OCB

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Abstract

This study aims to examine the influence of transformational leadership on nurse performance, both directly and through Organizational Citizenship Behavior (OCB) as a mediating variable, as well as assess the role of work commitment as a moderation variable in the relationship between OCB and performance. The study used an explanatory quantitative approach and was carried out on nurses at Bahteramas Hospital, Kendari City with a total of 179 respondents. Data was collected through surveys using structured questionnaires, measured on a five-point Likert scale from strongly disagree to strongly agree. The instrument was prepared by adapting indicators from previous research and adjusted to the context of health services. Data analysis uses Structural Equation Modeling based on Partial Least Squares because it is able to test the relationship between constructs simultaneously, is flexible to data that does not have to be normally distributed, and is suitable for testing direct influences, mediation, and moderation. The test results showed that transformational leadership had a positive and significant effect on OCB and nurse performance. OCB also has a positive and significant effect on performance, and has been proven to mediate the influence of transformational leadership on nurse performance. In addition, work commitment has been proven to moderate the influence of OCB on performance, so that the impact of OCB becomes stronger when nurses' work commitment is high.

Keywords: Transformational Leadership, Organizational Citizenship Behavior, Nurse Performance, Work Commitment

Abstrak

Penelitian ini bertujuan untuk menguji pengaruh kepemimpinan transformasional terhadap kinerja perawat, baik secara langsung maupun melalui Perilaku Kewarganegaraan Organisasi (Organizational Citizenship Behavior/OCB) sebagai variabel mediasi, serta menilai peran komitmen kerja sebagai variabel moderasi dalam hubungan antara OCB dan kinerja. Penelitian ini menggunakan pendekatan kuantitatif eksploratif dan dilakukan pada perawat di Rumah Sakit Bahteramas, Kota Kendari dengan total 179 responden. Data dikumpulkan melalui survei menggunakan kuesioner terstruktur, diukur pada skala Likert lima poin dari sangat tidak setuju hingga sangat setuju. Instrumen disiapkan dengan mengadaptasi indikator dari penelitian sebelumnya dan disesuaikan dengan konteks pelayanan kesehatan. Analisis data menggunakan Structural Equation Modeling berbasis Partial Least Squares karena mampu menguji hubungan antar konstruk secara simultan, fleksibel terhadap data yang tidak harus berdistribusi normal, dan cocok untuk menguji pengaruh langsung, mediasi, dan moderasi. Hasil pengujian menunjukkan bahwa kepemimpinan transformasional memiliki pengaruh positif dan signifikan terhadap OCB dan kinerja perawat. OCB juga memiliki pengaruh positif dan signifikan terhadap kinerja, dan telah terbukti memediasi pengaruh kepemimpinan transformasional terhadap kinerja perawat. Selain itu, komitmen kerja telah terbukti memoderasi pengaruh OCB terhadap kinerja, sehingga dampak OCB menjadi lebih kuat ketika komitmen kerja perawat tinggi.

Kata kunci: Kepemimpinan Transformasional, Perilaku Kewarganegaraan Organisasional, Kinerja Perawat, Komitmen Kerja

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INTRODUCTION

The influence of transformational leadership on nurse performance has been the focus of increasing research in the field of human resource management (Cahyadi et al., 2023). Transformational leadership is defined as a leadership style that emphasizes the motivation, inspiration, and personal

development of subordinates (Qori, 2013). In the context of health services, this leadership style is considered relevant because nurses are professionals who interact directly with patients and play an important role in determining the quality of hospital services. Leaders who are able to provide inspiration, clear vision, and emotional support will encourage nurses to work optimally and be patient-safety-oriented.

A number of studies show that transformational leadership has a significant effect on improving nurse performance. Oktaviany et al. (2023) state that transformational leaders are able to create a work environment that supports and motivates nurses in carrying out their duties. Wang et al. (2021) also found that transformational leadership improves employee motivation and performance, including in the health sector. Thus, the urgency of research on transformational leadership is getting stronger, especially in an effort to improve the quality of services in regional hospitals such as Bahteramas Kendari Hospital.

Transformational leadership has an important role in improving nurse performance both from clinical and psychological aspects. Listiana and Dwiantoro (2018) state that nurses led by transformational leaders tend to have higher job satisfaction, feel valued, and are more involved in decision-making. Juniarta et al. (2017) found that transformational leadership not only has a direct effect on performance, but also through the mediation of trust in superiors and job satisfaction. This shows that this leadership style helps create a positive relationship between management and nurses so that it has an impact on performance improvement.

In addition, Organizational Citizenship Behavior (OCB) is also an important variable in healthcare organizations. OCB refers to voluntary behaviors that individuals engage in outside of their formal duties, such as assisting colleagues and actively participating in team activities (Data & Rifai, 2023). Wibowo and Mochklas (2020) and Sa'adah and Rijanti (2022) stated that OCB has a significant effect on performance. Rizaie et al. (2023) and Earlyanti and Hamid (2023) also confirmed that OCB improves work effectiveness and service quality. Thus, OCB serves as a behavioral mechanism that strengthens the individual's contribution to the organization, particularly in improving nurse performance. Although many studies have proven that transformational leadership has an effect on nurse performance, the results show that there is variation in the power of this influence. Some studies have found significant direct influences (Wang et al., 2021), while other studies show that the influence becomes stronger when mediated by other variables such as job satisfaction and trust (Juniarta et al., 2017). This shows that there is a theoretical gap regarding the mechanisms by which transformational leadership can improve performance more comprehensively.

In addition, although the relationship between transformational leadership and OCB has been extensively researched (Putra et al., 2023; Nurjanah et al., 2020; Fitriani & Muttaqiyathun, 2023; Salma & Ramli, 2023; Srour et al., 2020), research integrating OCB as a mediating variable in the relationship between transformational leadership and nurse performance is still relatively limited, especially in the context of regional hospitals in Indonesia. On the other hand, the role of work commitment as a

moderation variable in strengthening the relationship between OCB and performance has also not been explored simultaneously in one research model. This study proposes that transformational leadership influences nurse performance indirectly through Organizational Citizenship Behavior. Suartama (2023) states that transformational leaders encourage nurses to engage in voluntary actions outside of their formal duties. Siahaan (2017) also explained that emotional support and personal development from leaders can increase the motivation of nurses to make extra contributions. Thus, OCB becomes an important mechanism that explains how transformational leadership translates into performance improvement.

In addition, this study places work commitment as a moderation variable in the relationship between OCB and nurse performance. Novelia et al. (2016) stated that OCB and work commitment are two important factors that affect performance. Susijawati et al. (2017) found that work commitment has a significant effect on performance, while Fanani and Djati (2016) show that commitment also affects OCB. This means that nurses with a high level of work commitment will be more motivated to display OCB which ultimately strengthens their performance. This model is expected to be able to explain the relationship between variables more comprehensively.

This study was conducted on nurses at Bahteramas Kendari Hospital with a total of 179 respondents. As the main referral hospital in Southeast Sulawesi Province, Bahteramas Hospital has a strategic role in providing health services for the community. The high workload, accreditation demands, and the need for fast and quality services make nurse performance a key factor in the success of the organization. Effective leadership is needed to maintain the motivation and commitment of nurses. A complex and dynamic work environment demands a leadership style that encourages extra-role behavior and strengthens work commitment. Therefore, this study becomes relevant to examine the relationship model between transformational leadership, OCB, work commitment, and nurse performance in government hospital settings.

This study aims to analyze the influence of transformational leadership on nurse performance, examine the influence of transformational leadership on OCB, and analyze the influence of OCB on nurse performance. In addition, this study aims to examine the role of OCB mediation in the relationship between transformational leadership and nurse performance, as well as examine the role of work commitment moderation in strengthening the relationship between OCB and nurse performance. Theoretically, this research contributes to enriching the literature on organizational behavior by integrating mediation and moderation models in a single conceptual framework. Practically, the results of this research are expected to be the basis for the management of Bahteramas Kendari Hospital in formulating leadership policies and strategies to increase work commitment to improve nurse performance and overall health service quality.

METHODS

This study uses an explanatory quantitative approach to test the causal relationship between constructs in the model, namely Transformational Leadership as an independent variable, Organizational Citizenship Behavior as a mediating variable, Nurse Performance as a dependent variable, and work commitment as a moderation variable. The study was conducted on nurses at Bahteramas Hospital, Kendari City with a sample of 179 respondents. Data collection was carried out through a survey using a structured questionnaire that was distributed to respondents to obtain data on nurses' perceptions of transformational leadership, OCB levels, work commitment, and performance. Each statement item was measured using a five-point Likert scale ranging from 1 strongly disagree to 5 strongly agree so that respondents' perceptions can be objectively quantified. The measurement instrument was prepared by adapting the indicators that had been used in relevant previous research, then adjusted to the context of health services and the characteristics of the nurse's work. Data were analyzed using Structural Equation Modeling based on Partial Least Squares because this method is able to test the model simultaneously, is flexible to data that does not have to be normally distributed, and is suitable for testing the direct influence, the influence of OCB mediation on transformational leadership relationships on nurse performance, and the effect of work commitment moderation in strengthening the tested relationship. The analysis process was carried out through the evaluation of the outer model to assess the validity and reliability of the construct, then continued with the evaluation of the inner model to test the path coefficient, significance of the influence, and mediation and moderation testing according to the research hypothesis.

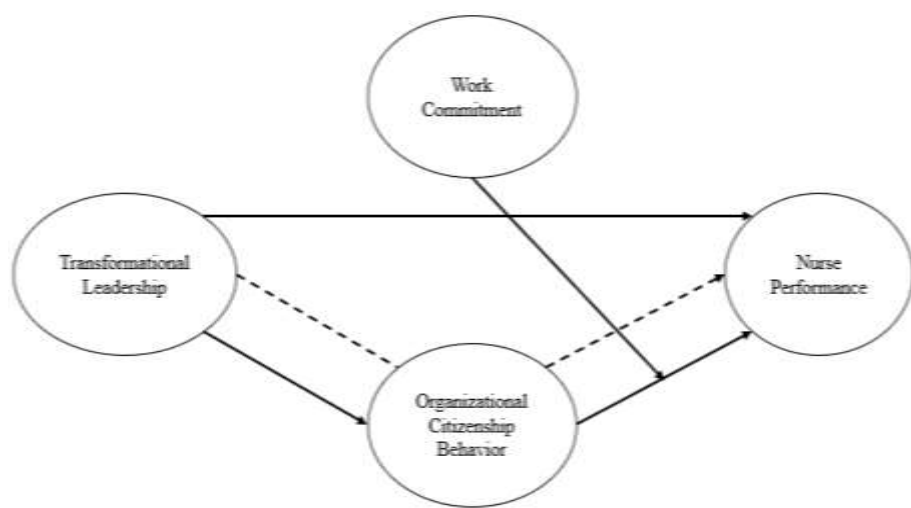


Figure.1. Conceptual Framework

RESULTS AND DISCUSSION

Results

Based on gender, out of a total of 179 nurse respondents at Bahteramas Hospital, Kendari City, respondents were dominated by women by 56.54 percent, while men by 43.46 percent. In terms of age, the majority of respondents are assumed to be in the range of 33 to 44 years old at 62.62 percent, followed by respondents under 33 years old at 17.29 percent, 45 to 56 years old at 19.16 percent, and

only a small number over 56 years old at 0.93 percent. Judging from the level of education, most of the respondents are assumed to have an S1 education of 86.45 percent, while the rest have a S2 education of 13.55 percent. Based on work experience, respondents are assumed to have the most 5 to 8 years of service at 42.06 percent, followed by 9 to 12 years of 31.78 percent, and 13 to 16 years of 26.17 percent. In addition, marital status shows that the majority of respondents are assumed to be married by 77.10 percent, while those who are unmarried are 22.90 percent.

Table 1. Measurement Model

Variables	Items	Factor Loadings	Cronbach's Alpha	Composite Reliability	Average Variance Extracted
Transformational Leadership	X.1	0,931	0,929	0,955	0,875
	X.2	0,947			
	X.3	0,928			
Organizational Citizenship Behavior	Y1.1	0,912	0,963	0,971	0,871
	Y1.2	0,931			
	Y1.3	0,955			
	Y1.4	0,927			
	Y1.5	0,941			
Nurse Performance	Y2.1	0,948	0,934	0,958	0,883
	Y2.2	0,938			
	Y2.3	0,933			
Work Commitment	M.1	0,901	0,944	0,957	0,818
	M.2	0,897			
	M.3	0,919			
	M.4	0,887			
	M.5	0,916			

Table 1 shows that the measurement model in this study has met the criteria of validity and reliability very well based on the value of factor loadings, Cronbach's alpha, composite reliability, and average variance extracted in each construct. All indicators in the transformational leadership variable have high loading in the range of 0.928 to 0.947, with Cronbach's alpha 0.929 and composite reliability 0.955, so that the internal consistency is very strong, and AVE 0.875 which confirms the fulfillment of convergent validity. The Organizational Citizenship Behavior variable also showed a very superior measurement quality, characterized by loading 0.912 to 0.955, Cronbach's alpha 0.963, composite reliability 0.971, and AVE 0.871, which means that the OCB indicator really represents the construct in a strong and stable manner. In the nurse performance variable, the loading value was in the range of 0.933 to 0.948, with Cronbach's alpha 0.934, composite reliability 0.958, and AVE 0.883, so that the nurse performance construct was measured very reliably and had high convergent validity. Similarly, work commitment has a loading of 0.887 to 0.919, Cronbach's alpha 0.944, composite reliability 0.957, and AVE 0.818, which indicates that the work commitment indicator is also strong and consistent in measuring the construct. Overall, these results confirm that all constructs in the study have very adequate instrument quality, so that the measurement model is declared feasible and can be continued for testing the relationships between variables in the structural model.

Table 2. Discriminant validity of constructs

	1	2	3	4
Transformational Leadership				
Organizational Citizenship Behavior	0,397			
Nurse Performance	0,364	0,792		
Work Commitment	0,438	0,833	0,832	

Table 2 shows that the discriminant validity between constructs in the model has been well met, because the correlation between variables is still at a lower level than the measurement power of each construct. The relationship between Transformational Leadership and Organizational Citizenship Behavior showed a correlation of 0.397, which indicates a positive but not excessive correlation so that the two constructs remain conceptually different. The correlation of Transformational Leadership and Nurse Performance of 0.364 also shows a positive relationship, but still illustrates that nurse performance is not solely attached to leadership, but is influenced by other factors in the model. Furthermore, the correlation of Organizational Citizenship Behavior with Nurse Performance of 0.792 indicates a strong relationship, which can be interpreted that extra-role behavior is closely related to performance improvement, but still does not show construct overlap because it is still at acceptable limits in discriminatory testing. Work Commitment also has a fairly high correlation with Organizational Citizenship Behavior of 0.833 and with Nurse Performance of 0.832, thus showing that work commitment is closely related to extra role and performance behavior, but still represents a different construct because theoretically commitment is an attachment of attitudes, while OCB is behavior, and performance is work output. Overall, this correlation pattern shows that the constructs in the study are logically interrelated according to the model, but still have clear differences, so that the instrument is declared feasible to continue the analysis on the structural model.

Table 3. R Square and Q2

	R Square	Q2
Work Commitment	0,600	
Nurse Performance	0,689	0,8756

Table 3 shows the R-Square and Q2 values used to assess the model's explanatory strength as well as its predictive ability. The R-Square value for Work Commitment of 0.600 indicates that work commitment can be explained by 60.0 percent by predictive variables in the model, while the rest is influenced by other factors outside the study. Meanwhile, the R Square value for Nurse Performance of 0.689 shows that 68.9 percent of the variation in nurse performance can be explained by the construct construct that affects it in the model, so that the model's apparent power on performance is relatively strong. In addition, the Q2 value for Work Commitment of 0.8756 indicates a very high predictive relevance, which means that the model has excellent predictive ability of work commitments and does not simply explain the relationship theoretically. Overall, this combination of high R Square values and excellent Q2 confirms that the structural model has a strong ability to explain endogenous variables and has sufficient predictive quality to be used as the basis for drawing research conclusions.

Table 4. Results of Hypothesis Test

Connection	Original Sample	P Values
Transformational Leadership-> Organizational Citizenship Behavior	0,775	0,000
Transformational Leadership -> Nurse Performance	0,304	0,002
Organizational Citizenship Behavior -> Nurse Performance	0,470	0,000
Transformational Leadership -> Organizational Citizenship Behavior -> Nurse Performance	0,364	0,000
Work Commitment x Organizational Citizenship Behavior -> Nurse Performance	0,143	0,001

Based on Table 4, the results of the hypothesis test show that most of the relationships in the research model are proven to be significant, thus providing a clear picture of the role of transformational leadership, Organizational Citizenship Behavior, and work commitment in improving nurse performance. The path coefficient value in the original sample indicates the direction and magnitude of the influence, while the p value indicates the level of significance of the relationship being tested. First, the influence of Transformational Leadership on Organizational Citizenship Behavior has a coefficient of 0.775 with a p value of 0.000, so this relationship is stated to be positive and very significant. These findings indicate that the stronger the nurse's perceived transformational leadership practices, the more likely they are to display extra-role behaviors such as helping colleagues, being proactive, and supporting the organization outside of their formal duties. Second, the direct influence of Transformational Leadership on Nurse Performance showed a coefficient of 0.304 with a p value of 0.002, which means that this relationship is positive and significant. These results confirm that transformational leadership not only shapes positive work behaviors, but is also able to improve nurses' performance directly through direction, inspiration, support, and strengthening the meaning of work provided by leaders.

Third, the influence of Organizational Citizenship Behavior on Nurse Performance has a coefficient of 0.470 with a p value of 0.000, so it can be declared positive and significant. This means that the higher the OCB behavior shown by nurses, the more performance of nurses also tends to increase because extra role behavior helps to facilitate coordination, strengthen teamwork, reduce work barriers, and support service quality. Fourth, the results of the indirect influence test showed that Transformational Leadership had a significant effect on Nurse Performance through Organizational Citizenship Behavior, with a mediation coefficient of 0.364 and a p value of 0.000. These findings confirm the mediating role of OCB, which means transformational leadership improves nurse performance not only through direct influence, but also by encouraging nurses to display OCB which then contributes to improved performance.

Fifth, the results of the moderation test showed that the interaction of Work Commitment and Organizational Citizenship Behavior with Nurse Performance was significant, with a coefficient of 0.143 and a p value of 0.001. This means that work commitment strengthens the influence of OCB on

performance, so that the positive impact of OCB in improving performance will be stronger when nurses have a higher work commitment. This means that these findings reinforce that transformational leadership is an important factor in improving nurse performance, both directly and indirectly through improving Organizational Citizenship Behavior, and that OCB's effect on performance will be more optimal when supported by high work commitment. Implicitly, hospitals need to encourage transformational leadership practices and build a work culture that fosters OCB and commitment so that nurse performance improvement can be more consistent and sustainable.

Discussion

The results of this study confirm that transformational leadership plays an important role in improving nurse performance. Transformational leadership is understood as a leadership style that emphasizes the inspiration, motivation, and development of subordinate individuals, so that nurses not only receive work directions, but also feel psychological support and clarity of purpose in carrying out tasks. This condition is in line with the literature that affirms that transformational leadership is able to create a work environment that supports and strengthens the orientation of quality service. (Cahyadi et al., 2023; Qori, 2013) In addition to influencing performance, transformational leadership has also been proven to encourage the emergence of Organizational Citizenship Behavior in nurses. Transformational leaders generally build a collaborative and growth-oriented work climate, so nurses are more encouraged to perform extra-role behaviors such as helping colleagues, proactively solving problems, and maintaining team harmony. This is in line with the view that transformational leadership practices can drive voluntary behaviors that support organizational effectiveness, especially in work contexts that demand high coordination such as hospitals (Mulyono, 2021). This study also shows that Organizational Citizenship Behavior is closely related to improving nurse performance. OCB as a voluntary behavior outside of formal obligations helps to smooth workflows, strengthen coordination, and improve service quality. When nurses are willing to share knowledge, help colleagues, and actively support team activities, the efficiency and consistency of service tend to increase so that performance is more optimal. (Data & Rifai, 2023)

The mediation findings confirm that transformational leadership improves nurse performance through OCB, so that OCB becomes a behavioral mechanism that bridges the influence of leadership on work outcomes. This means that transformational leadership not only drives performance directly, but also reinforces extra-role behaviors that ultimately strengthen performance achievements. This pattern is consistent with previous research findings that show the role of OCB as an important pathway in connecting transformational leadership to performance. (Qalati et al., 2022)

Finally, this study confirms that work commitment strengthens the influence of OCB on performance. Nurses with high work commitments tend to display OCB more consistently and oriented towards organizational goals, so that OCB's contribution to performance becomes more real. Thus, performance improvement will be more optimal if the hospital not only encourages OCB through the

right leadership, but also strengthens work commitments so that extra-role behaviors are truly converted into sustainable work outcomes. (Novelia et al., 2016)

CONCLUSION

Based on the results of the study, it can be concluded that transformational leadership has a significant effect on improving Organizational Citizenship Behavior and nurse performance. OCB has also been shown to have a significant effect on performance, so extra-role behavior is one of the important pathways that explains how transformational leadership can produce improved performance. In addition to direct influence, OCB has been shown to mediate the influence of transformational leadership on nurse performance, which means performance improvement occurs not only because of leadership direction and inspiration, but also because leadership encourages nurses to demonstrate voluntary behaviors that support the effectiveness of teamwork. Other findings show that work commitment moderates the influence of OCB on performance, so that the impact of OCB will be stronger when nurses have a high work commitment and are more consistent in actualizing extra-role behaviors into work performance.

The practical implications of these findings confirm that hospitals need to strengthen the quality of transformational leadership through managerial coaching, leadership training, and strengthening a work culture that supports collaboration and initiative. Organizations also need to create systems that encourage OCB, for example through a fair work climate, adequate work support, recognition of contributions, and open communication mechanisms so that extra-role behaviors can grow naturally. However, this study has limitations because it uses a cross-sectional design and a perception questionnaire-based data source, so that the findings better describe conditions at one time and have the potential to be influenced by response bias. In addition, the scope of research focused on one hospital makes generalizing findings to the context of other hospitals need to be done with caution. For further research, it is recommended to expand the location and characteristics of respondents so that the findings are stronger to generalize, as well as consider the addition of other variables such as workload, work stress, job satisfaction, or organizational culture. Advanced research can also use a mixed approach or longitudinal design to be able to capture the dynamics of changes in OCB, commitment, and nurse performance over time and provide a deeper understanding of the mechanisms of leadership influence in the context of health services.

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