

Leader-Member Exchange Theory Applied to Physician-Patient Relationships



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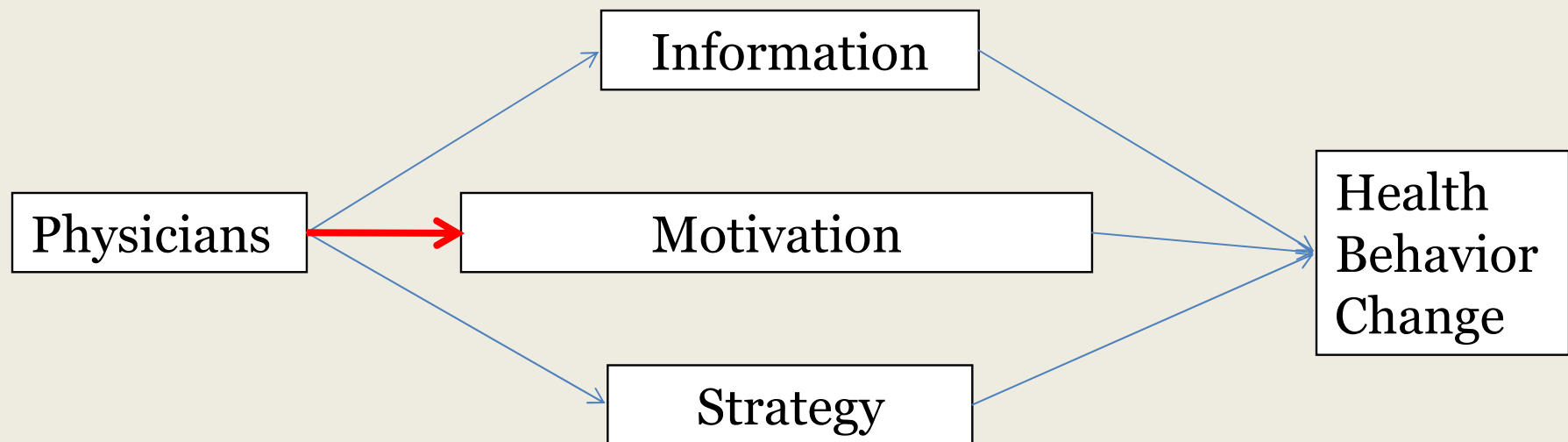
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Health Research



Why Leadership?



- Parallels between leader-follower and physician-patient relationships
 - Power, information, influence asymmetry¹
- Identifies ways that a person can motivate another person towards the completion of a desired goal^{2,3}
- Traits, styles, specific behaviors
 - Relationship between leaders and followers⁴

Leader-Member Exchange (LMX)



- Focused on unique dyadic relationship between leader and follower¹
 - ✦ Trust, respect, and mutual obligation
- Positive and significant relationships with² :
 - ✦ Job performance, satisfaction with job and leader, commitment, turnover intentions (-)
- High quality physician-patient relationships
 - ✦ Overall health, satisfaction with care and physician, adherence

Study 1: An Initial Test of LMX in Patient Care



- Goals:
 - To measure patient perceptions of their relationship with their physician by adapting the LMX7 Scale^{1, 2}
 - To explore potential correlates of LMX

Methods



- Recruited healthcare recipients ($N = 147$) to complete an online questionnaire; paid \$5 to Amazon.com
- Completed the LMX
 - Adapted to reflect physician-patient relationship
- Rated:
 - Physician's effectiveness
 - Satisfaction with physician
 - Overall health
 - Liking
 - Adherence behavior following the visit (5 items; $\alpha = .83$)¹

Descriptives



- Age:
 - 18-25 Years old: 36%
 - 26-35: 21%
 - 36-45: 8%
 - 46-55: 11%
 - 56-65: 18%
 - 66-75: 5%
 - 76-85: <1%
 - 86 or older: <1%
- Sex:
 - Male: 35%
 - Female: 65%
- Race/Ethnicity
 - Hispanic/Latino: 14%
 - Asian: 12%
 - White/Caucasian: 54%
 - Black/African American Native: 14%
 - Middle Eastern: 5%
 - Other: <1%

Correlations Between LMX and Patient Outcomes

Outcomes	LMX (7 items; $\alpha = .89$)
Satisfaction	.69**
Liking	.71**
Improved health	.28**
Influenced by physician	.74**
Physician Effectiveness	.68**
Adherence	.06

** $p < .01$; * $p < .05$; 2-tailed

Study 2: LMX in Clinical Setting



- Goals:
 - To examine LMX and their correlates in a clinical setting
 - To apply LMX to the context of chronic care (asthma and allergy)

Methods



- Trained research assistants on site at local asthma and allergy clinic.
- Flyers and clinic staff directed interested patients to our research assistants; paid \$5 to Amazon.com
- Completed the adapted LMX scale
- Rated:
 - Physician's effectiveness
 - Liking
 - Satisfaction with physician and care
 - Adherence behavior following the visit (5 items; $\alpha = .74$)¹

Descriptives



- $N=80$
- Race/Ethnicity
 - Black/African American: 2.5%
 - Asian: 7.5%
 - Hispanic/Latino: 20%
 - White/Caucasian: 61%
 - Mix: 9%
- Sex
 - Male: 34%
 - Female: 66%
- Age: $M=40.14$, $SD = 16.16$, *Range: 18-72*

Correlations Between LMX and Patient Outcomes

Outcomes	LMX (6 items; $\alpha = .85$)
Satisfaction	.36**
Liking	.72**
Influenced by physician	.50**
Physician Effectiveness	.74**
Adherence	.19
** $p < .01$; * $p < .05$; 2-tailed	

Summary of Findings



- People who perceive themselves as having high quality LMX with their physicians...
 - Are satisfied with their physicians and care
 - Like their physicians
 - Think their physicians are effective
 - Report that they are likely to be influenced by their physicians
- BUT: LMX does not predict adherence

Future Directions



- Measure LMX from both sides of the interaction (i.e., physicians and patients)
 - LMX agreement
- What does predict adherence?
- How do physicians motivate patients?
 - “Doctorship styles”¹
 - ✦ Active, transformational styles

Thank you!



- Questions?



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