

Leadership in Swedish Public Organizations: A Research Review in Education and Care¹

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ABSTRACT

This article is a review of recent Swedish leadership research in two large public-sector areas: education and care. By comparing and contrasting research in these areas, we unveil the specifics and commonalities of research in public-sector leadership. We reviewed research articles from 2018 to 2020 and analyzed theories used, data-gathering methods employed, and topics researched. The results show some fundamental differences between the two areas. Compared to research on education, research on care is to a larger extent non-theoretical and is often focused on change management, quality assurance, and leaders' roles in employee health. Conversely, studies on education are theory driven and mostly focused on leaders' roles in learning and shared leadership. We discuss the state of Swedish public leadership research and make suggestions for mutual learning and moving forward in this research field.

KEYWORDS

Education / health care / higher education / leadership / public sector / review / school / social care

Introduction

The present article is a review of recent Swedish leadership research in two large public-sector areas: education and care. We aim to describe these fields to start answering the question of what is particular about *public sector* leadership research.



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That is, what characteristics and common problems do public sector leaders face, and how are they addressed in leadership research? This undertaking stems from an observation we made in an earlier research review – that leadership research in the Swedish and Nordic contexts is *fragmented* (Rantatalo et al. 2016). By fragmentation, we mean that research is conducted in various disciplines and by various professional bodies with little communication between them. Similarly, as Strannegård and Jönsson (2015) posited, leadership research can in this sense be described as 'kaleidoscopic'. Therefore, it is necessary to consolidate our understanding of the problems public-sector leaders face in the Nordic countries. We must better understand the contextual specifics of public organizations versus shared problems (and solutions to these problems). In other words, by comparing and contrasting leadership research in various public-sector areas, we can unveil the specifics and commonalities of public-sector leadership (Orazi et al. 2013).

We started our investigation of public leadership broadly, conducting searches on public-sector leadership and in specific sectors and areas. However, our initial searches for public-sector leadership in Sweden generated almost no results, and despite the large international public-sector leadership field, we see almost no such efforts in Swedish leadership research. Areas of the public sector are mostly researched by disciplines connected to specific professional bodies, and studies on differences and similarities in leadership in various parts of the public sector are scarce (Orazi et al. 2013). Therefore, we have health care professionals studying leadership in health care, teachers and educational researchers conducting school leadership research, and so on, with few comparisons made among the areas.

Finally, we arrived at two areas of the public sector that we found enabled a fruit-ful comparison. The first area is education, with organizations ranging from preschool to higher-education institutions. The second area is care, with research on hospital and primary care as well as social care encompassing social services and care institutions, such as nursing homes. Compared to other areas of the public sector, we found a sizeable number of articles published in these two areas, which made an overview and a comparison possible. Other important similarities that make comparisons fruitful include the areas' budgets, number of personnel, and societal importance as well as the dependence of professionals and professional practice on them. Finally, the two areas face common challenges: political governance with competing interests as well as public demands for efficiency and quality in the deliverance of education and care. However, these two areas also have important differences. Apart from the different professional practices – educating and caring – these areas are governed by different legislation and different political assemblies.

Therefore, the purpose of the present article is to describe commonalities and specifics of public leadership research in education and care in Sweden. Our contribution is centered on describing the research fields and providing suggestions for paths forward in Swedish public leadership research. With this aim, we also want to determine what can be learned from research in various areas of the public sector. Consequently, we also can discuss what is missing from the respective areas. We believe that researchers in these areas can exchange knowledge and learn from the results of such exchanges. In the article, we suggest that the researchers can learn from how theories and methods are used as well as what topics are researched or 'forgotten'. This also makes our review relevant to practice because research can address problems (we show, for example, 'learning' and 'health') that are common to public-sector leadership but largely ignored in a single





research field. In relation to a Nordic context of leadership research in public organizations, the article presents Sweden as a part and example of this context.

We structure the article as follows. First, we present international reviews of leadership in the studied areas to compare Swedish and international research. Second, we present the present review's method, including our search strategies and inclusion criteria. Third, we turn to the findings, which we organize into three themes: theories, methods, and research topics. We compare and contrast the findings in education and care. Finally, we discuss our results and what can be learned from them.

Approaching the public-sector-leadership research field

The Nordic public sector and the work and leadership occurring therein may be described largely as a reflection of contemporary and shifting societal developments given the sector's societal function. These developments have concrete implications for leaders (Hartley 2018; Murphy et al. 2016). However, leadership research in the public sector is fragmented across subjects and professional disciplines (Rantatalo et al. 2016). This fragmentation is apparent in recent leadership research in the Nordic context, in which studies focus on diverging aspects of leadership, such as how managers and leaders can and should support various interventions and change processes (Andreasson et al. 2018; Rønningstad 2019), managers and leaders' ability to build trust among employees to implement changes effectively (Øystein Saksvik et al. 2020), and concerns surrounding gender equality to ensure a sustainable and healthy work environment (Denise 2020; Håkansson et al. 2017).

Additionally, scholars have described a Nordic specificity in public leadership of being more democratic and egalitarian than other regions. For example, Nordic leadership is based on trust, equality, and a strong focus on democratic decision making (Döös & Waldenström 2008). Further, a proposed Nordic leadership style is described to build on motivation to avoid conflict and reach consensus (Eggen Børve 2010; Holmberg & Åkerblom 2006).

To examine whether – and, if so, in what ways – Swedish public leadership research contributes to other kinds of leadership research in the studied areas, in the following sections, we present international reviews of leadership in education and care. This insight into international research allows us to discuss similarities and differences between Swedish and international research.

From an overview in which we scanned examples of research reviews in leadership in education and care, we conclude that each field in some way claims uniqueness of leadership based on the nature of work that is carried out. For example, Anthony and Antony (2017) found that academic leadership's main uniqueness lies in the culture and politics of higher-education institutions. Similarly, reviews in care tend to target specific aspects of leaders' work in the care sector. For example, in a review, Peters (2018) proposed a new definition of leadership in the context of social care: 'a collection of organizational, relational, and individual behaviors that effect positive change in order to address client and societal challenges through emotional competence and the full acceptance, validation, and trust of all individuals as capable human beings' (p. 40). In a similar vein, Smith et al. (2018) argued that social care must be viewed differently than other sectors and practices.





Despite these claimed fragmentations, we can also detect several overlaps and similarities between the research fields, such as the interest in distributed leadership and leadership carried out by people other than formally appointed managers. The interest in specific leadership behaviors is also present in all areas, although behaviors' importance is a contested subject. For example, in social care, Smith et al. (2018) argued that focus must shift from individualistic heroic accounts of leadership in favor of an increased focus on shared or distributed leadership. In their review, they identified 12 factors that contribute to effective leadership practice. In this review, we note that teams' interprofessional nature has a significant impact on the type of leadership they require. Similarly, in school leadership research, the importance of personal characteristics seems to be changing. Daniëls et al. (2019) claimed that the research focus in school leadership has turned from instructional leadership and leadership behavior to perspectives favoring situated, transformational, distributed, and bottom-up leadership. Although a large part of the international field of school leadership research has focused on the work and development of principals, it is also evident that leadership in schools regarding teaching and learning is shared on various levels between principals and teachers (Daniëls et al. 2019; Neumerski 2013). This observation has led to a substantial body of research on the increased number of leadership positions in schools, such as teacher leadership (e.g., Nguyen et al. 2019; Wenner & Campbell 2017).

Partly deviating from this perspective in health care, leadership styles are still very much in vogue. In a review of various leadership styles and their effects in the workplace, Sfantou et al. (2017) found that various leadership styles were correlated with outcomes such as patient safety, quality of care, and organizational culture. However, different styles (such as consensus, resonant, authentic, and transformational leadership) affected very different measures, whereas none, with the exception of transactional leadership, showed any negative effects on the studied measures. When researchers single out a certain style in a review, as Alilyyani et al. (2018) did in their review of authentic leadership, researchers have concluded that there is support for authentic leadership theory because they can point to positive results. Additionally, in a descriptive literature review of leadership in higher education, Žydžiūnaitė (2018) highlighted the importance of personal characteristics and academic achievements when connecting academic leadership with intellectual leadership.

Another similarity concerns descriptions of leadership and the organization as complex. In research in higher education, Dopson et al. (2019) argued that leadership development is important in supporting the changing and highly complex higher-education context. They also concluded that the current literature on the topic is small-scale, fragmented, and often theoretically weak. Moreover, they found academic leadership development literature on many different and coexisting models and methods and little consensus on what may be suitable and effective in the higher-education context. Similarly, health care organizations' complexity and their consequently complex leadership have been the focus of two recent reviews. Figueroa et al. (2019) found that complexity for health care managers has been studied at three structural levels. The macro level concerns societal, demographic, and cultural factors, whereas the meso level concerns human resource management challenges, structural change, performance measures, and intensified management (increasing workload). At the micro level, complexity arises from shifting roles and expectations. Additionally, in their review, Belrhiti et al. (2018) focused on how complexity is described and analyzed in leadership studies in health care.





We also see bodies of research in both areas with a critical focus, examining social justice, the hegemony of Western culture, and the influence of military and corporate leadership on the way leadership is understood. For example, international research on school leadership has focused on normative dimensions of what school leadership is, ought to be, or is missing (Gümüş et al. 2021; Khalifa et al. 2019). In a review of research on traditional school leadership and indigenous-school-leadership research, Khalifa et al. (2019) reflected on the broader aspects of schooling and school leadership. Comparing the traditional and indigenous perspectives, the authors suggest that school leaders have an active role in promoting culture, history, and indigenous knowledge forms - rather than colonizing them - through utilization of self-reflection, community empowerment, communication, altruism, and spirituality connected to various indigenous cultures (Khalifa et al. 2019). Social justice has also been a normative base of international school-leadership research, where Gümüş et al. (2021), in a bibliographic review, traced the roots of social justice leadership to the 1980s in the US and determined that it began to increase in volume during the 1990s before spreading to non-Western countries around the 2000s. In social care, Peters (2018) argued that leadership theories and research have been modeled on military and corporate insights.

To sum up, international research on leadership in education and care seems to have several overlaps and similarities. We now turn to our review of research on Swedish public-sector leadership. During the discussion, we will return to the comparison to the international field.

Methods

To compare and contrast recent leadership research in various areas of the public sector in Sweden, we conducted a scoping review. As Arksey and O'Malley (2005) stated, this type of review is suitable when the objective is to map relevant literature in the field of interest and create a comprehensive and thematic synthesis of a topic. The process of conducting scoping reviews is often characterized by identifying research gaps in the existing literature and drawing conclusions regarding the overall state of research activity. After defining the topic and exploring and analyzing the literature, the researchers conducting the scoping review may also summarize and disseminate research findings.

In our case, the process of finding relevant areas for comparison went through a few iterations. As described in the Introduction, we started our work by conducting database searches of 'public-sector leadership' in general in the Swedish context. These searches yielded very few search results and did not include what we were seeking. With guidance from bibliometric experts at the university library, we extended our search to other areas of the public sector. Finally, we arrived at two major public-sector areas that we felt were fruitful to compare and contrast: education and care. The final search string used to form our review's basis was as follows: leadership* OR leader* OR manager* (subject term/keyword) AND Sweden* OR Swedish* (subject term/keyword) AND university* OR universities* OR higher education* OR academia* OR academy* OR academic* OR healthcare* OR care* OR hospital* OR medical* OR social service* OR social care* OR school* OR education* (subject term/keyword) AND years 2018–2020.

As this search strategy indicates, the scope of this review was broad, and we wanted to examine various concurrent perspectives on leadership rather than defining specific





aspects of leadership research (such as styles, roles, or specific theories) to focus on in advance.

The narrow three-year window corresponds to our aim specifically to find recent research on public leadership in Sweden rather than, for example, historical or longitudinal trends in research. Hallinger (2013) points out that research reviews must always include methodological demarcations (e.g., time spans) and that they ought to correspond to a review's aim.

We used the EBSCOhost (Academic Search Elite, APA PsycInfo, Education Source, ERIC, SocINDEX, and Business Source Premier) and Scopus databases. We decided to exclude the Web of Science (WoS) from our search because the WoS search tool did not allow for searches, including only titles and keywords. Because the term *leadership* is a buzzword used in numerous articles that are not necessarily focused on leadership, the WoS search returned an unmanageable number of items. However, the differences between databases are significant (see Harzing & Alakangas 2016), and the choice of database would affect any review study. This decision could have caused us to miss some relevant articles, but we believe we would have found most articles in the other databases and that this therefore should not have affected our review's main findings. The search yielded 298 articles, 169 from Scopus and 129 from EBSCOhost (most of which were from ERIC).

To prepare this text corpus for analysis, the first author excluded all articles that were duplicates or clearly, at first sight, irrelevant to the review's aim. For inclusion in the further review process, we used the following criteria: empirical, peer-reviewed research in English on leadership/leaders in the educational area and in care in which Sweden was the sole research context or one of the researched contexts. The research also had to be published as articles in scientific journals from 2018 to 2020.

After using these overall inclusion criteria, we had 108 articles left to analyze, which we divided evenly among the authors, who read the abstracts or larger parts of articles when necessary to determine which of the articles fully met the inclusion criteria. After reading and discussing the articles in relation to the inclusion criteria, we excluded 34 more articles. Thus, we identified 74 relevant articles, 34 from the education area and 40 from the care sector.

In the next step, we divided the 74 articles among us and read and coded our observations in a shared Excel spreadsheet. After this coding, each author was responsible for categorizing one or more of the following three themes: (a) the theories used, (b) the data gathering methods employed, and (c) the leadership topics researched. For validation and adjustments of this categorization, at least two of us read and discussed the pertinent coding and categorization until we reached a consensus.

We categorized the theories used by deduction according to Merton's (1949) distinction between 'grand' (or fundamental) social theory and more conceptual 'theories of the middle range', both of which are exemplified by concrete theories. 'No theory' was a third necessary category for this aspect. For the methods used and researched leadership topics, we categorized the articles inductively by content analysis, and we briefly summarized the research results in relation to the various leadership research topics found (Graneheim & Lundman 2004). When categorizing the leadership topics, the first author constructed the categories by reading the summarized articles in the Excel sheet and suggested labels for the topics to describe the articles. In the next step, we discussed and validated the categories. The result of this discussion brought some changes





to the categorization, as well as new sub-categories. Some of the articles contributed to more than one topic, but we have categorized each article as what we assessed as the main leadership-research topic. We also found that this phase of categorization was rather unambiguous because most articles had a clear main topic to which they aimed to contribute.

In the final step of the analysis, we divided the categorization into the two reviewed areas of public-sector leadership research, education and care. We compared the areas and discussed similarities, differences, and what can be learned from each area. In the Results section, we will therefore create result tables elaborating the contrasts that arose from this comparison. We cited the articles found in the review using numbers in square brackets [1–74]. See Appendix A for full references to the numbered articles, where no. 1–34 are from the area of education and no. 35–74 are from the care sector.

Findings

We present the results from this review of recent Swedish leadership research in education and care under three sections: theories, data collection methods, and leadership-research topics.

Theories

We categorized the results regarding theory in recent public leadership research into two broad categories inspired by Merton's (1949) distinction between 'grand' (fundamental) social theory and 'theories of the middle range' (conceptual theories). A third category was non-theoretical studies, which were rather common (see Table 1).

| Table | Theories | used |
|-------|----------|------|
| | | |

| | | No. of articles | |
|----------------|-----------|-----------------|-------|
| Type of theory | Education | Care | Total |
| Foundational | 13 | 2 | 15 |
| Conceptual | 17 | 20 | 37 |
| No theory | 4 | 18 | 22 |
| Total | 34 | 40 | 74 |

The first of these perspectives presents theory in terms of foundational (all-inclusive) approaches to understanding the social world. This foundational—theoretical theme consists of studies that draw on systems theory [1, 24], action research [31, 33, 50], critical gender theory [2, 7], and activity theory [12, 21], among others. The second theme is meso-theoretical, or conceptual—theoretical. As Merton (1949, p. 39) put it, a theory of the middle range 'deals with delimited aspects of social phenomena', and although these theories involve abstraction, this is close to observed data from which sets of propositions can be derived. In this review, theories of the middle range are denoted as revolving





on a concept level, therefore including theories such as distributed [9, 20, 22, 30], caritative [40, 48], and transformative leadership [61]. Moreover, this theme also consists of research that rather than directly focusing on concept leadership, focuses on other concepts, such as implementation frameworks (CFIR) [41, 55, 62]; learning theories [10, 51]; frame factors, policies, and boundaries for leadership [14, 16, 27]; and identity development in leadership practices [15].

In addition, we identified several studies that did not mention or refer to theory at all in both reviewed sectors but much more frequently in care (18 studies) than in education (four studies). The articles that do not employ theory have a variety of aims and foci, and the two reviewed areas seem not to have much in common. What seems important to note, however, is that many of the studies on care that did not employ theory had aims and purposes focused on describing professionals' perceptions and experiences (e.g., through interviews) [35, 36, 42, 44, 53, 60, 66]. In the tradition of education, professionals' descriptions and perceptions often require the employment of theory for scientific publication because researchers assume that below the discursive surface of talk are various shared constructions at play that are important to understand.

Although the results showing foundational–theoretical and conceptual–theoretical research are in accordance with previous research regarding theory in leadership (Rantatalo et al. 2016) and are therefore not new, two new insights may be discernible, as Table 1 shows. The first is that a substantive portion of recent public leadership research in these areas is non-theoretical. The second is that there are considerable differences between the educational area and the care area. Leadership in educational practice is often researched with foundational–theoretical and conceptual–theoretical foci, whereas leadership research in care practices is conceptual–theoretical and focused on leadership, conceptual–theoretical, and not directly focused on leadership or non-theoretical.

Data collection methods

The 74 articles feature a range of data collection methods. In 17 articles, the authors mainly used quantitative data collection methods, and 47 articles reported on research in which the researchers used mainly qualitative collection methods. Ten articles reported on research using mixed methods (a combination of quantitative and qualitative data collection methods).

Of the 17 articles for which the researchers used mainly quantitative methods, surveys were the most common data collection method. Of the 47 articles in which the researchers mainly used qualitative methods, interviewing was the most common method.

As Table 2 shows, qualitative methods are most common in both research areas, in which 47 of 74 articles employ one of the listed qualitative methods. In the education area, the researchers behind 12 out of 34 articles used interviews as the sole data collection method. A similar proportion of articles in care, 17 of 40, involved the use of interviews, making interviews the most popular method in both areas. We found only small differences between the two studied public-sector areas in data collection methods; for example, surveys seem more popular in the care area, whereas mixed methods are more common in the education area.





Table 2 Data collection methods employed

| Methods used | No. of articles | | |
|--------------------------|-----------------|------|-------|
| | Education | Care | Total |
| Quantitative methods | 6 | П | 17 |
| Survey | 5 | 9 | 14 |
| Database | 1 | 0 | 1 |
| Combination of the above | 0 | 2 | 2 |
| Mixed methods | 7 | 3 | 10 |
| Qualitative methods | 21 | 26 | 47 |
| Interview | 12 | 17 | 29 |
| Focus group | 1 | 2 | 3 |
| Document | 3 | 0 | 3 |
| Observation | 0 | 1 | 1 |
| Combination of the above | 5 | 6 | 11 |
| Total | 34 | 40 | 74 |

Leadership-research topics

In the 74 articles, we identified eight categories of leadership-related research topics. In Table 3, we show these topics and how many articles are categorized into each of them. For two of the large categories of leadership topics, we also present a number of subcategories.

Table 3 Leadership research topics

| Categories of topics | No. of articles | | |
|--|-----------------|------|-------|
| | Education | Care | Total |
| Change management | 4 | 19 | 23 |
| Leadership in implementation | 2 | 12 | 14 |
| Leadership in quality assurance | 2 | 7 | 9 |
| Leadership's role in employee/workplace health | 1 | 11 | 12 |
| Leadership and learning | 11 | 1 | 12 |
| Leader development | 5 | 0 | 5 |
| Leaders' role in workplace learning | 3 | 1 | 4 |
| Leaders' digital competence | 3 | 0 | 3 |
| Shared leadership | 6 | 1 | 7 |
| Leadership in turbulence/crisis | 3 | 3 | 6 |
| Leadership styles/skills | 4 | 2 | 6 |
| Leaders' well-being | 2 | 3 | 5 |
| Management or leadership | 3 | 0 | 3 |
| Total | 34 | 40 | 74 |





Below, we present each leadership-research topic and its main findings under eight subheadings: change management, leadership's role in employee health, leadership and learning, shared leadership, leadership in turbulence/crisis, leadership styles/skills, leaders' well-being, and management or leadership.

Change management

The *change management* category, with 23 articles, consists of two subtopics, leadership in quality assurance work (nine articles), and leadership in implementation work (14 articles). Most of those articles (19 out of 23) are in the area of care.

In the *leadership in implementation work* subcategory, several studies showed that implementation work and change are complex and difficult to steer in desired directions [39, 44, 55, 62]. The studies also pinpointed aspects that are important to success, such as development-oriented leaders as well as extensive knowledge about learning and change processes, engagement, delegation, resources and specific tools [41, 51, 57, 58, 60, 70]. Some studies employed critical perspectives in the study of policy changes and implementation, with a critical view of new public management and market logic in public enterprise. They showed that these phenomena decrease trust and the value of important aspects, such as ethical dimensions in work [13, 16, 56]. For instance, the two articles from the educational area fall into this last group of critical studies [13, 16].

The articles about *leadership in quality assurance work* concern leaders' assessment of quality [6], their work on successfully achieving person-centered care [35], or their efforts to increase participation and inclusion [63]. Some of the articles describe problems in improvement and quality work [46, 47], and some show that three factors are of specific importance in quality insurance work: teamwork, a preventive process, and a supportive organizational structure or infrastructure [14, 66, 68, 69].

Leadership's role in employee health

A total of 12 articles concern leadership in relation to and its impact on employee or workplace health. Notably, 11 of these articles focused on leadership in the care area. Overall, these articles establish that leaders and leadership styles influence employee (or pupils') health. Whereas a number of these articles conclude that leadership affects employee or workplace health in general [59, 64, 65, 28, 73], others are meant to explain what types of leadership are beneficial to health in the workplace. On the one hand, three articles covered transformational leadership's effects, concluded that this leadership type is suitable for countering bullying in the workplace [38], and contributed to an optimal effort–reward balance [61]. One study, on the other hand, showed that transformational leadership hampers productivity [45]. Finally, the leader being present [48], employee autonomy [52, 54], and leader knowledge of relevant stressors at work [71] are seen as promoting healthy workplaces.





Leadership and learning

The 12 articles on leadership and learning come, with one exception, from the area of education. We identified three subcategories in this topic. One subcategory concerns *leader development*, and its articles were investigations of leader development programs [7, 26, 33] and informal learning [10, 21]. The second subcategory is investigations into *leaders' roles in workplace learning* – that is, how leaders can lead to facilitate employees' learning. Here, we learn that leader behaviors seem to affect learning in the workplace [12, 25, 31] and that leaders tend to say one thing and do the other [42]. The last subcategory is *leaders' digital competence*, and the articles in this category concern digitalization in schools [11, 17, 32], where the articles identify school digitalization as a complex phenomenon and posit that school leaders need professional development and help from other networks to meet this challenge.

Shared leadership

Seven of the analyzed articles focus on *shared leadership*, of which all but one is in the educational context [1, 2, 5, 9, 20, 22, 36]. These articles concern aspects of horizontal, collegial, collaborative, team-focused, and distributed leadership. What is common across all these studies is that leadership is seen as something that does not rely on an individual but instead is created socially in an overarching collective or work group. Some of the results show that involving the whole management team in leadership development programs is more effective than relying on a sole leader's professional development [1] and that the often complex and lone leadership role is better if distributed or handled more collectively [9, 22]. One of the studies also highlights that collaborative ways of leading promote a leadership ideal that suit women better than the current ideal [2].

Leadership in turbulence/crisis

This category of articles covered leadership in turbulence and crisis. We organized six articles into this category, three from education and three from care. In the area of education, researchers have investigated how school leaders handled the refugees from Syria in 2015 [23, 24] and the COVID-19 crisis [19]. In care, leadership approaches to risk, security, and violence at work are investigated [50, 53] as well as leaders' handling of technostress [43].

Leadership styles/skills

The category *leadership styles/skills*, with six articles, describes research involving sets of behaviors that are identified in leaders in education and in care. Here, we learn that principals' mindsets affect how inclusive the school is [34], that they can be more involved





in instructional leadership [27], and that they prefer what is called 'heroic' leadership concerning leadership support [30]. Some articles targeted teachers' [29, 72] and nurses' [67] leadership skills and roles, particularly in relation to not having formal management positions.

Leaders' well-being

Five articles focused on *leaders' well-being*, represented in both areas. These articles describe leaders' emotional work and the importance of organizational and personal support and trust for surviving in, coping with, or thriving in the leadership role [3, 15, 40, 49, 74]. For example, one of the articles from the educational area presents the argument that the professional, situated, and personal dimensions of leadership affect principals' emotional identity [15].

Management or leadership

The *management or leadership* category consists of three articles from the educational area that compare leadership to management and ask why each of them is important [4, 8, 18]. For instance, two of the articles show the importance of balancing formal structures and power (management) with more informal and leadership-based strategies of professional support, attention, and motivation (leadership) [8, 18].

Discussion and conclusions

The present article's purpose has been to describe commonalities and specifics of public leadership research in education and care in Sweden. In the following, we conclude and discuss how these important and challenging areas have been addressed in recent public leadership research and what can be learned from research in various areas of the public sector.

Concerning the use of theory, we can see clear differences between the studied areas. Leadership in educational practices is more often researched with foundational and conceptual theories, whereas leadership research in care is conceptual—theoretical and focused on leadership, conceptual—theoretical, and not directly focused on leadership or nontheoretical. As Boudon (1991) put forth, this might be because middle-range theories are what most scientific disciplines outside sociology (and related research fields) simply refer to as *theory*. However, a rather large proportion of care research has, in our analysis, been categorized as nontheoretical (18 out of 40 articles).

Our analysis of the methods used in the research did not show as many clear differences between the areas. We conclude that a range of methods have been used in research on both areas, but qualitative methods are favored over quantitative methods. Researchers have noted the preference for qualitative methods in leadership research in earlier studies (Rantatalo et al. 2016), and it reflects an international trend in which qualitative leadership studies are becoming increasingly common.

Furthermore, our review shows that the leadership topics researchers have studied are unevenly distributed between the two public sector areas. Studies on care more often





focus on change management in implementation phases, quality assurance, and leaders' roles in employee health. Conversely, studies on education mostly focus on leaders' roles in learning and shared leadership. We conclude that these differences in leadership-research topics are substantial, and only in a couple of the smaller categories are both areas evenly represented (such as leadership in turbulence/crisis and leaders' well-being). We find it notable that researchers conduct studies on leadership's role in employee health almost exclusively in the area of care (11 studies on care and one on education). In contrast, studies on leadership and learning are almost exclusively conducted by researchers in the education area (11 in education and one in care).

How can we understand these fundamental differences between the two areas? It seems that the overarching goals for each public sector area determine which research topics and aims researchers focus on. In the education area, pupils' learning is the overarching goal, so educational researchers mostly focus on leadership and learning, either in the form of leaders' learning or their role in workplace learning for colleagues (not pupils). Conversely, the main goal for care is public health, and the conclusion is that many studies in this public sector area focus on leadership's role in employee health (not public health). Therefore, larger societal goals for these two public sectors seem to be translated to internal questions in which the public is replaced with the leaders or employees/colleagues.

This article has also presented international reviews in the studied areas, and we wanted to relate the topics researched in Sweden to the larger trends in international research. This comparison shows some similarities and clear differences. The research topics covered in our study do, in many respects, reflect the current agendas that seem to be pressing in society at large, including a focus on health in the workplace, new public management, organizational change, digitalization, and crisis management (e.g., that of the COVID-19 pandemic). Similarities include a focus on leadership styles, but whereas the international research has this as a specific focus (e.g., Sfantou et al. 2017), Swedish researchers more often examine leadership styles in relation to specific variables, such as employee health. Another similarity between Swedish and international leadership research is the interest in shared or distributed leadership or leadership carried out by individuals or groups other than the formally appointed manager (Daniëls et al. 2019; Elliott et al. 2016; Neumerski 2013).

We see three main ways in which the Swedish public leadership research deviates from the topics recently addressed in international research (here exemplified by the education and care areas). First, *complexity* as an issue in public-sector leadership (e.g., Belrhiti et al. 2018; Figueroa et al. 2019) does not seem to be addressed in the Swedish research. Although many of the articles' results conclude that the issue of, for instance, change leadership is complex, the conducted studies rarely draw on international research and theory that specifically addresses the issue of complexity. Second, another approach that is absent from recent Swedish public leadership research is *critical perspectives* on leadership. Internationally, we see studies focusing on social justice, the hegemony of Western thought and ideology, and the influence of military and corporate ideals on leadership practice (Gümüş et al. 2021; Khalifa et al. 2019; Peters 2018). These perspectives are largely absent in the research we examined. Considering the strong tradition of critical research in Sweden, particularly in the social sciences, this result is rather surprising. Third, we also see some evidence of the specificity of a proposed Nordic leadership culture of *democratic and egalitarian ideals* of leadership (Döös & Waldenström 2008; Eggen Børve 2010; Holmberg





& Åkerblom 2006). The studies on change and implementation leadership, in particular, emphasize the need for democratic anchorage and ensuring employees engage and understand the need for change. Similarly, studies on shared and distributed leadership indicate that egalitarian ideals are still held in high regard.

Taking stock and moving forward

Based on our review, we will conclude this article with some suggestions on how Swedish public research can improve by including theories, issues, and perspectives that are missing in each research area. The contribution that we want to make is that research strands within (isolated) fields can learn from how others have approached public-sector leadership.

Research in care can be improved by utilizing and considering theory to a greater extent than was done to produce the articles we studied. We do not suggest that all studies must include theory or that theoretically founded studies are automatically better, but the proportion of articles that are non-theoretical is unusually high in the area of care. Furthermore, we also see several examples, particularly when individuals' perceptions and experiences are sought, where the use of foundational or middle-range theory would have substantially added to the analysis conducted in those studies. This use can, for example, bring to the surface shared constructions that influence how individuals perceive and experience practice, as well as organizational contradictions that condition public leaders' work. This particularly pertains to the results' transferability and building knowledge across disciplines.

Concerning the topics researched, we believe that each area's specialty (education's focus on learning and care's focus on well-being) does not need to steer the area's research topics. Thus, we encourage more studies of employee health and well-being in leadership studies in the educational area and the similarly important study of learning within leadership in care. Pertaining to both areas, we also suggest looking into international streams of research that are missing in Swedish public leadership research. Here, general leadership theory and research could strengthen results' impact and usefulness as well as their transferability. Particularly, theories and research into the complexity of public-sector leadership, as well as critical perspectives, are largely missing in the current Swedish research landscape.

The present review includes research from 2018 to 2020. Our ambition to present an inclusive and broad representation of leadership research prevented us from looking at a longer time span. This is, of course, also limiting in that it is more of a snapshot and a cross-sectional view of research conducted. Because of our limited time span, we had few possibilities to analyze how the fields have evolved over time. We can, however, make some modest predictions about the future based on what has happened in the world. A few articles in this sample have studied the effects of COVID-19. Naturally, we expect to see a lot more of these types of studies in recent and upcoming leadership research publications. We predict that the war in Ukraine, large groups of refugees in Europe, and the looming threat of climate change will also have an effect on the issues taken up in future public-sector leadership research in Sweden.

Finally, we conclude that the two areas of the public sector that we have studied share more similarities than differences. We would therefore like to challenge both the





Swedish and international research communities to move away from a singular focus on the uniqueness of these practices and professional arenas. Instead, we believe that there is much to be learned across the public sector areas that would strengthen the field of public-sector leadership, and our review is an example of such efforts.

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Appendix

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