**Lewin’s theory of democratic leadership**

**Introduction**

Kurt Lewin has introduced new dynamics into the field of management. From managing the very small dynamics in an organizational structure, to enshrining social groups with the true spirit of democracy; Lewin has brought up a whole new approach to strengthen Institutions. A thorough study of Lewin’s theory about the democratic leadership makes one to opine that

*Thesis statement “the transition of democratic norms from the upper hierarchy ensures participation and then the triumph in healthcare sector which remains in transition”*

This is how Lewin has underpinned democracy with the fate of healthcare sector. For him a true intuitional approach is when there are democratic norms been practiced in it.

***Body Paragraph 1: Transition is the primary requisite everywhere***

The management hierarchy in an organizational setup never comes to hold the things permanently, neither any organization aims are static. If any one of these two conditions become static, the institutional growth comes to halt. This is how the primary question is addressed to some extent, that absence of a static concept can lower disruptions to much extent.

Healthcare never has seen a kind of static environment, every time and everywhere health sector is experiencing new growths, which is infect transition.

Healthcare sector also employs transitions in thoughts and ideas, which increases the possibilities of new cures in healthcare.

***Body Paragraph 2: Democracy substitutes organizational hierarchy and ensures participation****.*

Wherever an institution or an organization gets stuck with a personality or a thought, it ends participation. Healthcare has many dynamics, such is the pre-requisite for an individual’s holding a position at a healthcare institute. To conform with the ideas of providing timely and in a mannerly way the facilities of healthcare, an inspiration from the democratic institutions can serve the purpose.

In healthcare, democracy is to let everyone be open.

Allow everyone to come up with newer ideas to make the chances of disease spread minimum.

An evolution in healthcare, reflects the spirit of democracy.

***Body Paragraph 3: Transition from upper hierarchy sets the course for future***

It is not in any single model of management where transitions are pre- requisite. It happens everywhere and is not new. People come and go, they share ideas and views and they make space for others to grow. This is what the evolution is called. If the upper hierarchy slows down the process of transition, it halts the growth of the newcomers. Such is the case in the health sector. No new practice will ensure the success of new methods of curing diseases.

As according to Lewin, transition sets the pattern of future discoveries.

Transition is the discovery of new methodologies in health sector.

Transition is the sharing of ideas and views with the next one in the rows.

***Body Paragraph 4: Triumph is in transition****.*

This is simply movement. A movement not just on the grounds, but in the minds, ways and different methodology- ensures triumph. This is the rejection of the static state. In such a state, ideas become stuck and things become static too. that is how also ideas comes to stop and evolution becomes a secondary choice which gradually becomes an option to opt.

Success is when there is motion.

The healthcare is evolutionary, this needs a transition in thoughts.

Lewin mentions that static disrupts evolution, which is right.

**Conclusion**

Every supporting argument mentioned above comes to the point that if one stuck somewhere and ideas seems to not come timely, happens when there is no participation. No participation is the stoppage of transition and accumulation of everything in just some hands. This is disastrous in the health sector where every second comes with a new discovery. Hence, the transition in democratic norms from upper hierarchy is everything but to stop one from expressing his imaginations. Lewin has therefore accumulated very differently the democratic concepts into the sector of health.

**References**

Bakari, H., Hujra, A. I., & Nazi, G. S. K. (2017). How does authentic leadership influence plan organizational change? The role of employees' perceptions: Integration of Theory of Planned Behavior and Lewin's three-step model. Journal of Change Management, 17(2), 155-187.

Batra’s, D., Duff, C., & Smith, B. J. (2016). Organizational change theory: implications for health promotion practice. Health Promotion International, 31(1), 231-241.

Bender, M. (2016). Clinical nurse leader integration into practice: developing the theory to guide best practice. *Journal of Professional Nursing*, *32*(1), 32-40.

Live, C. M., & Zhang, L. (2017). How can collective leadership influence the implementation of change in health care? *Chinese Nursing Research*, *4*(4), 182-185.

McFarlan, S., O’Brien, D., & Simmons, E. (2018). Nurse-Leader Collaborative Improvement Project: Improving Patient Experience in the Emergency Department. Journal of Emergency Nursing.

Weber, N. M. (2018). When Disaster Strikes: A Training Intervention to Improve Nurses' Confidence and Preparedness for the Surge.