Does your boss listen to you? They predict employee health even after adjustment for socioeconomic status.

**Background**
Socioeconomic factors are mostly considered to be confounders in analyses of the relationship between psychosocial working conditions and employee health. However, the way in which leadership is experienced in different socioeconomic strata is of interest in its own right.

**Methods**
Data from SLOSH (Swedish Longitudinal Occupational Survey of Health, approximately representative of the Swedish working population) in the three waves 2006, 2008 and 2010 were used.

Proxies for socioeconomic factors were education (five-graded scale, self-reported in the questionnaire, high score corresponds to low education) and yearly income (from tax registry, because the distribution was markedly skewed with a right sided tail if log transformation was used). Age and gender were also included as explanatory variables.

The leadership variables were:

- "Non-listening leadership": Does your boss listen to you? There were four response categories ranging from "to a very high extent" to "very often".
- "Self-centered leadership": This factor was calculated from three questions (non-participating, associating and being onerous). For each question, there were five response categories ranging from "very infrequently" to "very often".

**Work environment and health status variables**: Psychological demands and decision latitude were measured by means of the Swedish shortened version (DCQ) which comprises five demand and six decision latitude four-graded questions. Standardized measures of emotional exhaustion (Maslach et al), SCL-CD depressive symptoms (Bech et al) and self-rated health were used.

**Results**
MANOVA:s using the three assessments of "self-centered" and "non-listening" leadership respectively in 2006, 2008 and 2010 (repeated measures) as dependent variables and age, income (e log transformed) and education as explanatory variables showed stable effects on the leadership variables:

Education was statistically significant for both perceived leadership styles, whereas income was significant only for perceived "non-listening" manager style. Self-centered manager scores were unchanged 2006-2010 whereas listening manager scores significantly deteriorated in 2010 - which coincided with the last phase of the international financial crisis.

A series of prospective analyses were performed on the effect of the leadership variables on employee depressive mood as dependent variable (n=2359).

**Decision latitude**
- F=2.38 df=1/2351 p=0.093
- B coefficients
  - Intercept 7.09 8.79 13.34
  - Gender (m=1, f=2) 1.24 0.77 0.91
  - Age 0.00 0.00 -0.05
  - Elog income -0.58 -0.67 -0.93
  - Education 0.13 0.22 0.01
  - Non-listening leader 1.27 0.83 0.69
  - Demands 0.47 0.40 0.43
  - Decision latitude -0.20 -0.12 -0.11

**Mean depressive score**
- 2006 5.64 5.42 5.14
- 2008 5.64 5.42 5.14
- 2010 5.64 5.42 5.14
- B coefficients
  - Intercept 7.09 8.79 13.34
  - Gender (m=1, f=2) 1.24 0.77 0.91
  - Age 0.00 0.00 -0.05
  - Elog income -0.58 -0.67 -0.93
  - Education 0.13 0.22 0.01
  - Non-listening leader 1.27 0.83 0.69
  - Demands 0.47 0.40 0.43
  - Decision latitude -0.20 -0.12 -0.11

**Non-listening manager score dependent variable in MANOVA, n=2330**
- B coefficients
  - Intercept 2.87 2.69 3.28
  - Gender 0.02 -0.05 -0.06
  - Age 0.00 0.00 0.00
  - Elog income -0.10 -0.09 -0.19
  - Education -0.05 -0.03 -0.04
  - Means 2.15 2.14 2.40

**Within subjects variance and interactions:**
Significant main effect of study year (successively less depressive mood, p=0.0004).
Significant interaction effects for age (some effect in 2010 and no effects in 2006 and 2008, p=0.0001, however no significant main effect of age), education (lower effect in 2010, p=0.035), non-listening manager and decision latitude (smaller effects for both variables in 2010, p=0.0002 and 0.045 respectively).

No interactions with time for other variables.

Our results show that the leadership variables are associated with socioeconomic status but also that they predict employee health even after adjustment for socioeconomic status.