Exploring the Lived Experience of Underrepresented Minority Nurses Pursuing Leadership in Healthcare

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Purpose:

Despite the increasing diversity in nursing, there is a disparity in the proportion of nurse leaders from underrepresented minority groups (URM). The lack of URM nurses in leadership positions is of increasing concern in today’s complex healthcare climate. Nursing workforce predictions indicate that there could be a shortage of up to 67,000 nurses in mid-level and executive positions (Dyess, Sherman, Pratt, & Chiang, 2016). Nurses from URM groups are in a unique position to fill this shortage as they are equally or more likely than non-minority nurses to pursue advanced degrees in nursing. However, the American Hospital Association’s benchmark study shows that minority representation in leadership positions within healthcare organizations has been reported as only 14% of hospital board members, 12% of executive leadership positions, 10% of Chief Nursing Officers, and 17% of first- and mid-level management positions (American Hospital Association, 2012).

Nurse leaders will be integral in developing innovative strategies in healthcare delivery to meet the evolving needs of our society. Nurse leaders with insight and a specific skill set for addressing these issues through research, practice, education, and policy are needed. While a diverse nursing workforce continues to be a priority, emphasis should also be placed on the development of nurse leaders from URM groups. Underrepresented minority nurses must move into leadership positions in order to influence hiring decisions, policy implementation, and the promotion of diversity within healthcare settings. Leadership positions afford nurses an increased ability to influence resource allocation, recruitment of a diverse workforce, and shape organizational, national, and global policy that could influence the health status of URM populations (Phillips & Malone, 2015).

The purpose of this phenomenological study was to explore how underrepresented minority nurses experience the pursuit of leadership in healthcare organizations. Additionally, the study explored perceived factors that may facilitate or hinder the development of underrepresented minority nurse leaders.

Methods:

To collect data, face-to-face, semi-structured interviews were conducted, transcribed, coded, and analyzed. One-on-one interviews using broad, open-ended questions were conducted. Utilizing the hermeneutic phenomenological approach, data from each interview was analyzed based on the lived experiences of the participant.

Results:

Thematic analysis revealed three themes and nine sub-themes that emerged from the data. These themes included: (1) Doing More and Getting Less; (2) Being Seen yet Feeling Invisible; and (3) Perseverance in Adversity. The data suggest that URM nurses encounter numerous personal, social, and institutional barriers as they pursue leadership opportunities. Little emerged as factors that facilitated leadership development.

Conclusion:
Thematic analysis revealed three themes and nine sub-themes that emerged from the data. These themes included: (1) Doing More and Getting Less; (2) Being Seen yet Feeling Invisible; and (3) Perseverance in Adversity. The data suggest that URM nurses encounter numerous personal, social, and institutional barriers as they pursue leadership opportunities. Little emerged as factors that facilitated leadership development.

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Keywords:
Leadership Development, Nurse Leader and Underrepresented Minority,

References:


Abstract Summary:
This purpose of this presentation is to highlight findings of a phenomenological study that explored how underrepresented minority nurses experience the pursuit of leadership in healthcare. The themes identified in this study provide deepened insight regarding the perceived factors that facilitate or hinder the development of underrepresented minority nurse leaders.

Content Outline:

I. Overview of Underrepresented Minority Nurses (URM) and Nurse Leaders.

1. Summarize current diversity data in nursing and among leaders in health care.
2. Discuss previously identified barriers faced by URM nurses pursuing leadership positions as well as the potential consequences of not addressing these barriers.
3. Identify strategies that have been previously used to address the lack of diversity in nursing and nursing leadership.

II. Description of qualitative study exploring the lived experience of URM nurses pursuing leadership.
1. Describe the methodology used for this study including sampling, data collection, credibility, and trustworthiness.
2. Articulate the findings from in depth semi structured face to face interviews of 12 underrepresented minority nurses.
3. Discuss the three themes that emerged from data analysis and provide supporting data from interviews, (1) Doing More and Getting Less; (2) Being Seen yet Feeling Invisible; and (3) Perseverance in Adversity.

III. Implications for nursing and healthcare

1. Based on findings, provide suggestions for those interested in development of nurse leaders from URM groups.
2. Engage audience in dialogue regarding other potential strategies to support URM nurses as they pursue leadership opportunities in healthcare.
3. Discuss consequences of not intentionally implementing strategies that support the leadership development of URM nurses.

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Author Summary: Dr. Sabita Persaud serves as an Associate Dean at Notre Dame of Maryland University School of Nursing. She specializes in the area of Community/Public Health Nursing education. Her current scholarship centers on preparing underrepresented minority nurse leaders to advance the profession of nursing. She recently completed her term as President, Maryland Board of Nursing and was named one of Maryland’s Top 100 Women of 2018.