



## Nurse Managers' Roles in Leading a Culturally Diverse Nursing Workforce

Louise Racine RN PhD, Linda Ferguson RN PhD, Sonia Udod, RN PhD, Sithokozile Maposa, RN PhD, Susan Fowler-Kerry, RN PhD

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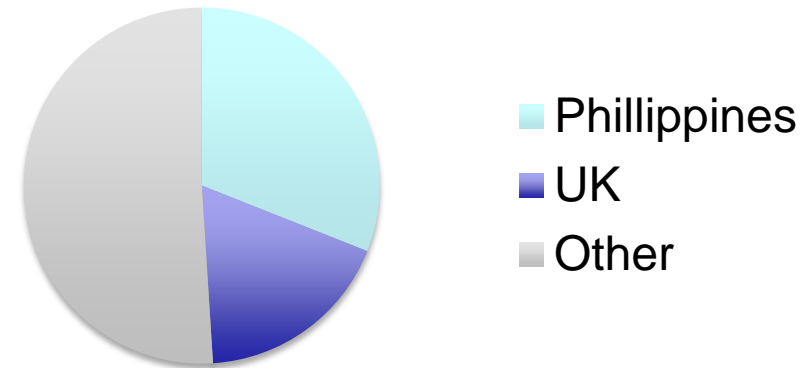
# Purpose of the Study

- Explore the everyday experiences of internationally educated nurses and their Canadian counterparts in Saskatchewan.

# Relevance of the Study

- Globalization of health care labor market
- Ethics of international nurses' recruitment
- Approx. 8.2% of Canadian nurses and 2.6% of Saskatchewan nurses are internationally educated

**IENs working in Canada  
by Country of Education**



# Literature Review

- 3 areas relevant to the study:

Recruitment, retention and integration

**Management of culturally diversity in health and nursing workforce**

Mentoring

# Nursing Leadership

- There is a dearth of evidence-based leadership on Nurse Manager (NM) roles in facilitating the integration of international nurses in Canada;
- NMs are in a position to influence workplace attitudes and behaviors towards greater cultural competency;
- Benefits of integration include better quality patient care, increased job satisfaction and less turnover;
- Barriers to integration that could be addressed by NMs include:
  - Communication challenges
  - Mismatched expectations
  - Misunderstanding leading to mistrust
  - Interpersonal conflict

# Research Questions

- 1) What are the everyday experiences of IENs working in Saskatchewan?
- 2) How do race, gender, and social class impact the professional, social and cultural integration of internationally educated nurses in nursing workplaces in Saskatchewan?

# Methodology

- Ethics approval ( U of S and 4 health regions)
- Postcolonial approach (Reimer-Kirkham & Anderson, 2002; Racine, 2003).
- Critical ethnography (Carspecken, 1996)
- Purposeful sampling and final n = 21
- Data collection: Interviews, participant observations, and fieldnotes
- Thematic inductive analysis (Braun & Clarke, 2008)

# Themes for Nurse Managers

- **Scope of practice**
- **Power (Gender role)**
- **Team work**
- **Patient safety**



# Scope of Practice

- “I do not believe that a nurse is a nurse is a nurse. I think that IENs share common ground with CDN nurses, like compassion, caring, understanding, and that nursing is an art and a science. On the other hand, IENs have different priorities.
- Researcher: Can you tell me more about these priorities?
- “Our demographics play a big role. Teaching and patient education. Reciprocity, team work, an the hierarchy within the health system. How to interact and delegate to LPNs, care aids, and other colleagues.”

## Power (Gender Role)

- “Hierarchy in the Philippines is very direct and submissive. Right? They [IENs] are taking their directions from the physician and they don’t value, hum, expressing concerns and teaching opportunities are left to a colleague, a matron, that kind of thing.”
- “Our [CDN] nurses are used to question authority, to ask questions and to be patient advocates”.

# Team Work

- “They [IENs] don’t think they can be in charge. They cannot assume charge of the team, guide their peers, and assume leadership roles. They lack assertiveness and avoid confrontation with peers.”

# Patient Safety

- “For instance, let’s say they are asked to take a blood sample from a port line. They say: Yes Yes. I know. I know. Yes. Yes.
- “Then the patient comes to my office and tells me: I don’t think the nurse knows how to access the port line. So the patient comes to tell me about that but then why have you not told me that you were uncomfortable doing that technique?”

# Discussion

- **Pivotal role:** Mentor, colleague, role model, cultural broker, integration facilitator, and manager (guide practice), leader. Important of not crossing the fine line between management and mentoring
- Sustaining collegial and professional relations: Sharing ideas with the NM and other RNs.
- IENs' individual practice is good; facilitate team work to integrate IENs
- Assuming leadership roles: Can be problematic in ER

# Strategies for Nurse Managers

- Know the culture of IENs' nurses (cultural assessment);
- Understand IENs nurses' views of nursing practice;
- Know the impact of migration on IENs' personal lives;
- Be ready to assume roles of **mentor, leader, problem-solver, conciliator, role model and cultural broker** especially in rural areas;
- Risks of role burden for nurse managers (mentoring outside working hour -in rural settings).

# Implications for Nurse Managers

- Flex communication styles;
- Valuing differences in attitudes, values and behaviours;
- Need for interdependence among cohorts and striving for cultural competence in interpersonal relations
- Variety of perspectives to enhance workplace balance and productivity

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## List of References

- Can be provided upon request. Please contact the presenter:
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