"It Was a Light Coming Through": African-American Nurses' Perceptions of a Collaborative Nursing Leadership Program

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Purpose:

The current nursing workforce does not reflect the growing diversity of the U.S. population. In 2016, the U.S. reflects an increased Hispanic and racial diversity, with 61.3% of the population defined as white, non-Hispanic; four states (CA, HI, NM, TX) are now majority-minority (U.S. Census, n.d.). However, the registered nurse (RN) workforce remains overwhelmingly Caucasian at 78.5% (Data USA, n.d.); ethnic and racial minorities represent 19.5% of RN's with 9% identifying as African American or Black (National Council of State Boards of Nursing, 2016). A number of professional nursing organizations have called for an increase in the number of diverse registered nurses (Campaign for Action, n.d.; National League for Nursing, 2016). Research has demonstrated a diverse workforce can improve the quality of care, enhance patient communication and reduce healthcare disparities (Phillips & Malone, 2014; Williams et al., 2014). There is a need for well-educated nurses who are clinically competent, skilled in evidence-based practice, outcome-oriented and focused on delivering quality patient-and family-centered care.

The development of partnerships between healthcare institutions and schools of nursing can facilitate the transition of minority registered nurses into practice and fulfill the demand for a diverse workforce. The purpose of this research was to understand the ongoing experiences of African American registered nurses who participated in a collaborative clinical leadership program, the CLCDN, developed and supported by a hospital system and a university school of nursing.

Methods: A qualitative descriptive design using responsive interviewing and Black feminist theory framework was employed to explore the impact of the program and the nurses transition into practice. Nineteen African American registered nurses who were graduates of the program agreed to participate in the 7 focus groups. A semi-structured interview guide was used to elicit information and guide the discussion. Each focus group was audiotaped and field notes were kept by the research team. Thematic qualitative content analysis method was used to understand the phenomena from the participants’ perspectives. Demographic data was collected and analyzed.

Results: Nineteen African American nurses, ages 25-51 years old, participated in the research study. Three themes emerged from the data that spoke to the importance of a diverse nursing workforce and the challenges of African American nurses in particular. The themes were “this was a light coming through”, challenges of being a person of African descent and “it makes a difference when patients can find that diversity”. The collaborative clinical leadership program provided financial, social and professional support for the students as they transitioned into nursing practice; in turn they believed that their presence and experiences has improved patient care through the provision of culturally competent care to diverse patients and increased awareness among their nursing colleagues.

Conclusion:
Implications for Practice/Research. Although the focus group number is small and results may not be generalizable to all diverse populations, this is the first attempt at exploring the longitudinal effect of a collaborative academic leadership program on the nursing careers of student participants. Did this program build the leadership capacity in the hospital system, specifically creating diverse nurse leaders or an environment which would support the development of diverse nurses into leaders? Additional research on collaborative academic programs that foster nursing leadership among diverse nurses.

Conclusion. As research has demonstrated, building a diverse workforce and delivering culturally competent care is imperative and fundamental to reducing health disparities and poor patient outcomes. This research provides an opportunity to understand the successes and challenges encountered by African American nurses in educational programs and healthcare institutions. Using this knowledge, nursing and healthcare educators and leaders can develop programs that will implement strategies that will facilitate the transition and retention of diverse nurses in the workforce and improve the capacity of the employer to deliver culturally competent care.

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Keywords: African American nurses, nursing diversity and nursing leadership programs

References:


Abstract Summary: A diverse nursing workforce is important for quality care patient care and reducing healthcare disparities. The results of a study that examined the experiences of African American nurses who participated in a collaborative clinical leadership program are presented.

Content Outline:
I. Introduction

1. In the U.S., the population is 61.3% white, non-Hispanic while the nursing workforce is 78.5% Caucasian.

2. African American nurses represent only 9% of the nursing workforce.

II. Background

A. According to research a diverse workforce which reflects the population will improve healthcare quality and reduce health disparities.

1. Highly educated nurses, who are clinical competent, skilled in evidence-based care and deliver quality care are needed.
2. The development of collaborative academic-service programs between healthcare institutions and schools of nursing can facilitate the transition of minority nurses into clinical practice.
3. The purpose of this research was to understand the post-employment experiences of African American nurses who participated in a collaborative academic-service program.

III. Method

1. A qualitative descriptive designed was employed to understand the experiences of African American nurses who participated in the Clinical Leadership Collaborative for Diversity in Nursing (CLCDN), a collaborative clinical leadership and in this study.
2. Black feminist theory was used to understand the experiences of the participants.
3. A semi-structured interview guide was used to elicit information and facilitate 7 focus groups.
4. Thematic qualitative content analysis was used to understand the data from the participants’ perspective.
5. Demographic data was collected and analyzed.

IV. Results

1. Nineteen African American nurses ages 25-51 participated in the study. Additional demographic data will be presented.
2. Three themes emerged from the data: “this was a light coming through”, challenges of being a person of African descent and “it makes a difference when patients can find that diversity”.
3. Limitations and generalizability of research will be discussed.
4. 

V. Conclusion

1. The program facilitated the transition of this group of African American nurses into practice.
2. The participants believed that they provided culturally competent care and their presence improved patient care as well as increased their nursing colleagues’ awareness of the importance of diversity in nursing.
3. Understanding the experiences of diverse nurses is imperative to developing programs that will assist this population’s transition into practice.

First Primary Presenting Author

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**Professional Experience:** I am a RN and WHNP-BC with 32 years of nursing experience. I have conducted nursing research, published and presented nationally on multiple topics including media influences of sexual risk behaviors, contraceptive decision-making, parent child sexual communication.

**Author Summary:** Allyssa L Harris is an associate professor at the Wm. F. Connell School of Nursing at Boston College. She is a qualitative researcher and has published numerous articles on women’s health issues and nursing education. She is president of the Alpha Chi chapter.

Second Secondary Presenting Author
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**Professional Experience:** I am a RN and nurse executive with 37 years of nursing experience. I have conducted nursing research, published and presented nationally and internationally on multiple topics including transition to practice for diverse nursing students, interprofessional collaborative practice and professional practice models.

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**Professional Experience:** I am a RN with close to twenty five years of experience, the past fifteen of which have been in higher education. I have conducted nursing research and presented statewide on the transition to practice of diverse nursing students. I also have extensive experience working with ANA-Mass, as their founding Executive Director and currently as consultant to the Approver Unit which is accredited with distinction.

**Author Summary:** Carmela Townsend recently assumed the position of Director of Nursing at Massachusetts Bay Community College and the MBCC representative to the Department of Higher Education Mass Transfer Associate’s to Bachelor’s Task Force.

Fourth Author
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**Professional Experience:** I have 22 years of critical care nursing and global health nursing experience. In addition I have experience in health administration, nursing education and professional development.

**Author Summary:** Ms. Raymond is currently the research assistant for this research program, and for the CLCDN program. She is currently completing her second year of doctoral studies at the University of Massachusetts-Lowell.

Fifth Author
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**Professional Experience:** I have 39 years of nursing experience in emergency and critical care in the inpatient and air medical transport setting with a clinical focus on neuroscience and 20 years of administrative experience focusing on systems of care, network development & integration.

**Author Summary:** Ms. Masson is currently a member of the research team for the CLCDN program and is beginning her dissertation work with a focus on stroke and TIA.