

Barriers to Developing Diverse Nurse Leaders

by Capella Healthcare



WHAT'S COVERED

In this lesson, you will learn about barriers that block minorities from achieving nursing leadership roles. Specifically, this lesson will cover these topics:

- 1. Stereotypes
- 2. Lack of Support and Opportunities
- 3. Tokenism
- 4. Lack of Examples and Mentors

1. Stereotypes

Studies aimed at identifying strategies to develop racial and ethnic minority nurse leaders identify barriers that make pursuing or attaining leadership roles difficult. Many of these barriers are the same across multiple racial and ethnic minorities, while some are unique to individual groups.

In a study focused on Japanese American nursing leadership attainment, stereotypes about Asians as model minority members become negative perceptions of their abilities in the nursing profession. According to the model minority perception, Asians are submissive, quiet high-achievers. While these attributes are generally viewed as favorable, they do not lead to promotions for this minority group because these are not considered desirable characteristics of executive leaders. Asian minorities may also experience what is known as the "bamboo ceiling." The bamboo ceiling refers to racism and stereotypes that Asian Americans may face that prevent them from career advancement. Lack of communication and leadership skills are common stereotypes held about Asians that hinder professional advancement in nursing and other disciplines, according to this study. Stereotypes prevent individuals from being appreciated and respected for their unique personalities and contributions to society.

2. Lack of Support and Opportunities

Other studies report that Latinx and Black or African American persons share similar barriers to professional advancement because of perceived lack of qualifications. This misperception may contribute to missed opportunities to participate in professional growth and development. Opportunities for growth and

professional development in nursing may include the ability to precept or support a new nurse, serve as a charge nurse, serve on scheduling committees, or work with nursing students. In hospital settings, these are often the opportunities that prepare nurses for promotion. Nurses of diverse racial and ethnic backgrounds may serve as preceptors or charge nurses and may participate in different committees. They may, however, be considered for these opportunities later than nurses of a majority race. In some instances, they may receive the opportunity to take on roles when the circumstances are not ideal for learning such as when there is no one else to be in charge or to serve as a preceptor. In these instances, the nurse may not have been trained to be successful in these roles.

3. Tokenism

African American and Latinx nurses also reported that tokenism could serve as a barrier to pursuing nurse leadership roles (Iheduru-Anderson, 2020 & Villarruel, 2017). When someone is thought of as the token minority in a leadership position, people devalue the qualifications of the person holding the position. Especially if this belief is widespread, it may contribute to a lack of respect for the manager and ultimately can lower their ability to be successful in their role by damaging their self-confidence and their subordinates' willingness to deliver the outcomes and metrics by which the leader is evaluated.

4. Lack of Examples and Mentors

Lack of examples and mentors poses further barriers to minority nurse leader development. Only four percent of nurse leaders are from an ethnically diverse background (Persaud, 2020). The studies mentioned previously that examined nursing leadership opportunities and challenges for Asian, African American, and Latinx nurses found that mentorship was critical to the leadership development of the minority nurse. When a nurse leader is also an underrepresented minority, even if they are not a formal mentor, they are an example to other nurses with similar backgrounds. They often represent the promise of what is possible; they may shape and influence other minority nurses' educational and leadership goals. Because there are so few racial and ethnic minority nurse leaders, there are limited examples and few mentors available to formally help develop minority nurse leaders in the future.

This is probably the most significant barrier because mentoring relationships are so important to the mentee, the mentor, and the organization's culture. Mentors listen and give invaluable guidance, they remove obstacles, they seek out opportunities for their mentee to grow and develop, and they provide a safe space to share challenges and successes. Most nurse leaders credit the influence of multiple leaders for their professional success over their careers. The need for mentors to develop the next generation of minority nursing leaders is great.

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Support

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