

2022

Leadership Relationships and Advancement Opportunities Among African American Female Nurses

Kendra Pitts
Walden University

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Walden University

College of Health Professions

This is to certify that the doctoral study by

Kendra Pitts

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

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Walden University

2022

Abstract

Leadership Relationships and Advancement Opportunities Among African American

Female Nurses

by

Kendra Pitts

Doctoral Study Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Healthcare Administration

Walden University

February 2022

Abstract

A healthy work environment for nurses is critical to staff recruitment, retention, patient safety, and the financial sustainability and viability of a healthcare organization. The specific research problem under study was whether a lack of advancement opportunity or a lack of good leadership has an impact on African American female nurses leaving the nursing profession. Researchers have investigated the impact of leadership and advancement opportunity on the general population, but there is a dearth of research specific to African American female nurses and their reason for leaving the profession. Secondary quantitative data analysis was performed using survey data from the National Sample Survey of Registered Nurses (n = 50,273 RNs). A statistically significant relationship was found between lack of advancement opportunities and reasons African American female nurses leave the profession, Pearson χ^2 41.536, p = .0001. A statistically significant relationship was found between the lack of leadership and reasons African American female nurses leave the profession, Pearson χ^2 41.536, p = .0001,. A moderate significance was found between the lack of advancement and lack of leadership, Pearson χ^2 22.605, p = .0001 and Cramer's V .274. Increasing positive leader-member relationships with African American female nurses is necessary to retain them and improve their opportunities for advancement within the nursing profession. Further study is needed to understand and identify any additional barriers that may prevent retention and advancement opportunities for this population. This study could lead to positive social change by increasing retention of African American female nurses for greater racial diversity in healthcare delivery and nursing leadership.

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Dedication

I dedicate my capstone work to my family and close friends. I especially thank my husband, Mark Pitts, for his love and support through this process; it has meant the world to me. To my children, Xyasmin, Zakaryah and Zaria Pitts, thank you for sharing your mom with the world; I love you dearly. My parents, James and Dorcas Bishop, thank you for always believing in me and instilling the values in me, which have brought me to this point. I love you both and know that I have made you proud. My sister Kim and my niece Kimani, thank you for your support and love. Thank you to my extended family for being a support system when I needed it. I dedicate this work to my close friends who have supported and encouraged me throughout this process. I hope this is a beacon to you, that you can achieve what you set your mind to.

Acknowledgments

I would like to thank my chair, Dr. Cheryl Cullen, for so graciously giving her time and wisdom. Thank you for the constant encouragement and patience as I worked this process. Thank you to Dr. Seyra Hughes for serving on my committee and the time spent reviewing my work and sharing expertise. I would like to thank the program director for the encouragement and recommendations throughout this process as well.

I would like to give a special acknowledgment to my mentor and cousin, Dr. Sharrieffah S. Bridges and Bridges Consulting and Associates. Her encouragement and assistance throughout this process was invaluable. Thank you for giving of your time freely when I needed an extra set of eyes; you are one in a million.

Finally, I would like to acknowledge my instructors at Walden University who worked to prepare me for this journey. Thank you to my classmates who worked along beside me, providing peer support and mental stimulation.

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Section 1: Introduction to the Study

Introduction

Higher education leadership, whether general education or nursing disciplines, challenges competencies necessitating new forms of leadership (Alonderiene & Majauskaite, 2016). Higher-level leaders must have the ability to demonstrate and incorporate leadership competencies and display qualities in preparedness to lead employees (Giles, 2016). Leadership patterns influence workplace culture, performance, employee effectiveness, retention, organization satisfaction, motivation, and organization outcomes (Chang & Lee, 2007). Academic skills, including communicating and negotiating with others, are essential in higher education leaders (Mrig & Sanaghan, 2017).

Academic credibility and experience in nursing are crucial for effective leadership to augment successful organizational outcomes, such as advanced opportunities for nurses. Organizational outcomes include employees' knowledge, skills, abilities, and motivation. Manning (2017) posited higher education encompassing organizational theory proposes a new lens through which higher education can be analyzed. A complete and thorough assessment of organizational theories, ranging from traditional to current, disclosed many issues are involved in higher-level nurse leadership. In many countries, a lack of advancement opportunities and the milieu of increasing demands inherent to a nursing population present substantial challenges. These challenges are exacerbated by nurse turnover (Hayes et al., 2012). A crucial indicator of prospective nurse turnover,

which may present with enough notice to be addressed by nurse managers, is the nurse's intent to leave for lack of advanced placement opportunities.

Prospective nurse turnover intentions are particularly useful in nursing studies because of their efficacy in forecasting actual turnover (Campbell et al., 2020). There is a recognition across studies indicating nurses vacate viable positions because of influential nursing leadership. This type of faulty leadership relationship often predicts minimal advancement opportunities, which is among the top reasons nurses decide to leave (Hayes et al., 2012). Patterns predict more insight is needed on leader-worker relationships and possible advancement opportunities or lack thereof as impactful on intentions to leave the profession. Simultaneously, nurse leaders, the work environment, and the nurses want to maintain adequate levels of performance. These performance levels include operating in the core of job requirements and maintaining the discretionary behaviors that facilitate the smooth and successful running of the nursing unit or healthcare environment.

These outcomes will prompt additional studies to identify misconceptions of leader-member exchange (LMX) theory relationships and advancement opportunities for African American nurses who have left the nursing profession. These outcomes will also prompt additional studies identifying adverse predispositions impeding the body of knowledge. Section 1 includes an introduction and outline for the study. Also, included in Section 1 is the problem statement, purpose of the study, research questions, and an explanation of how the study advances knowledge and the nature of the study. The

section concludes with definitions of relevant terms, a discussion of assumptions, limitations, and delimitations applicable to the study, and an overall summary.

Problem Statement

Effective nursing leadership in health care organizations is particularly important because nursing personnel subordinates offer critical patient care services. According to the American Hospital Association (AHA, 2016), more than 813 million patients were treated in emergency rooms, inpatient, and outpatient settings in 2010. The U.S. Department of Labor Bureau of Labor Statistics (BLS, 2010) indicated nursing personnel job categories comprised the largest number of those employed in the health care industry.

How LMX theory—emphasizing each leader has a unique relationship with each member—has an effect on advancement opportunities for African American nurses and job resignations is not known. Despite being a dyadic theory, only a limited number of studies have been conducted to consider and study the effect on African American nurses and advancement opportunities and the continuation of employment reference needed. The specific research problem addressed through this study was to examine if a lack of advancement opportunity or the lack good leadership has an impact on African American female nurses' reasons for leaving the nursing profession. There is little or no literature on the effect of advancement opportunities and the effect of leadership on the advancement of African American female nurses and the nurses' reasons for leaving the nursing profession.

Many variables may attribute to effective LMX relationships and advancement opportunities for African American nurses and positive job retention outcomes, including workplace conditions, pay, and job motivation (Griffith, 2004). The general problem of this study is the LMX theory and how African American nurses are affected and advancement opportunities in relation to lowered job resignations. The LMX theory suggests positive leadership relationships with workers (members) yield motivated job environments and minimal job resignations. When leaders approach members with concern for insight, opinions, and representations, members experience feelings of worthiness and respect. When leaders form viable work relationships with members, work systems usually flow without incidence.

Purpose of the Study

The purpose of this quantitative nonexperimental descriptive study was to examine whether a relationship exists between a lack of advancement opportunities and the lack of good leadership of African American female nurses' and the reasons for leaving the nursing profession. Each independent variable, lack of advancement and lack of good leadership, was examined. The impact of both independent variables on the dependent variable and reason for leaving the nursing profession warrant further study to add to the nursing body of literature.

Research Questions and Hypothesis

The research question is the most significant determinant of the research methodology (Manning, 2017). The focus of the research questions is to formulate a clear

issue to study (Shaw & Newton, 2014). Based on the problem and purpose of this study, the research questions and hypotheses were:

RQ1: What is the relationship, if any, between a lack of advancement opportunity and African American female nurses' reason for leaving the nursing profession?

H_{01} : There is no relationship between a lack of advancement opportunity and African American female nurses' reason for leaving the nursing profession.

H_{a1} : There is a relationship between a lack of advancement opportunity and African American female nurses' reason for leaving the nursing profession.

RQ2: What is the relationship, if any, between African American female nurses' reason for leaving the nursing profession and lack of good leadership?

H_{02} : There is no relationship between African American female nurses' reason for leaving the nursing profession and lack of good leadership.

H_{a2} : There is a relationship between African American female nurses' reason for leaving the nursing profession and lack of good leadership.

RQ3: What is the relationship, if any, between African American female nurses' reason for leaving the nursing profession and lack of advancement opportunity and lack of good leadership?

H_{03} : There is no relationship between African American female nurses' reason for leaving the nursing profession and lack of advancement opportunities and lack of good leadership.

H_{a3}: There is a relationship between African American female nurses' reason for leaving the nursing profession and lack of advancement opportunities and lack of good leadership.

Theoretical Framework

Numerous theories have been developed since researchers began studying leadership qualities and benefits: contingency, situational, behavioral theory, transformational, and transactional (Graen & Uhl-Bien, 1995). While many of the early leadership researchers concentrated mainly on monitoring the workforce and creating methods to increase efficiencies, researchers developing modern leadership theories have concentrated less on control and more on creating relationships and using knowledge in relation to organizational improvement. The theories and/or concepts grounding this study include Hoyt and Goethals's (2009) LMX theory theorizing the importance of the interpersonal behavior between leaders and followers. The logical connections between the framework presented and the nature of the study include Hoyt and Goethals's (2009) theoretical work identifying interpersonal skills embedded in LMX theory needed for effective leader–follower dyads. Furthermore, in this study, I focused on exploring the impact of the collaborative relationships of African American female nurses and leadership advancement opportunities.

The value of the work relationship a nurse has with their nurse leader has substantial impact nurses' attitudes toward work and performance (Laschinger et al., 2009) and with the intent to resign (Galletta et al., 2013). The significance of the quality of the relationships at work between subordinates (members) and their supervisor (leader)

was established some time ago (Graen et al., 1972). LMX is centered on the structure known as social exchange theory, consisting of a series of personal connections developing a method of exchange and trust between the people involved (Blau, 1964; Cropanzano et al., 2011). Nurses' observations of LMX relationships and opportunities for advancement have been associated with lower levels of intent to resign or higher levels of intent to remain in quantitative studies (Galletta et al., 2013; Robson & Robson, 2015) and qualitative studies (Tourangeau et al., 2010). However, in contrast, studies with a concentration on more precise facets of the relationship in a nursing environment have found no links between LMX relations, or nurse manager ability, with nurses' turnover intentions (Lansiquot et al., 2012).

Nature of the Study

To address the research questions in this quantitative nonexperimental descriptive study, I used a cross-sectional survey of 50,000 nurses from 2018, a power analysis using G*Power 3.1.9.2 for sample analysis, and Statistical Package for Social Science (SPSS) for analysis of study results (Field, 2018). Cronbach's alpha was used to achieve internal consistency of received responses; descriptive analysis of central measures, frequencies and percentages was used to describe sample demographics.

The planned research design used the National Sample Survey of Registered Nurses (NSSRN). All aspects of this data set are available and included the code book, crosswalk, and questionnaire. The data points needed involved reason for leaving the nursing profession, lack of advancement opportunities, and lack of good leadership.

Demographics were used to identify African American female nurses who took the survey for inclusion.

Initially, difficulty was expected in obtaining data specifically related to African American female nurses; this was not a limitation after identification of the data set. Another potential limitation was the interpretation of good leadership and advancement opportunity language to the given survey tool and standing definitions contained within the LMX leadership frame. Clear-cut research is needed regarding the relationship between African American female nurses and LMX theory. Limitations related to advancement opportunities and African American resignations were initially assumed, but this was not a limitation. Any research limitations were addressed for sustainability of the research.

Literature Research Strategy

The reviewed literature was available from the Walden University Library through search engines such as ProQuest, EBSCOhost, ProQuest Digital Dissertations, CINAHL, and ERIC. These databases yielded various journals, newspaper articles, and research materials contributing to this section. Content searches included the following keywords and terms: *leader member exchange, nurse, African American nurses, Black nurses, Black American nurses, nurse staff, nurse turnover, nurse administrator, turnover or retention, intention to leave, intention to stay, quitting, and attrition*. The literature review search was conducted from October 2020 through May 2021. Results for studies related to African American nurse retention were limited. When adding the key term *African American, Black, or Black American* to the other search topics, the results

returned were typically fewer than 50 sources. The limited number of sources identified further supports the need to conduct research about African American nurses related to attrition and turnover.

Literature Review Related to Key Variables

Leader Member Exchange

The LMX theory is a framework of reference for other theories addressing unambiguous details concerning leader–member relationships. This theory was initially founded in the late 1970s by researchers George B. Graen and Mary Uhl-Bien. Graen and Uhl-Bien (1995) established the idea that member inspiration can be advanced by valuable working relationships with leaders. However, this theory can also be used in educational establishments to stimulate an ideal balanced working environment (Graen & Uhl-Bien, 1995). The LMX theory is also used to reference how the relationship between leaders and members could possibly add or interfere with job implementation, purpose, and/or efficiency. The theory is also used to reference how relationships must include three important components: (a) role taking, (b) role making, and (c) routinization.

Role Taking

Leaders use their time to evaluate members' proficiencies and capabilities in role taking. According to Cropanzano et al. (2016), role taking can last from a short period of time, a few hours, to several weeks. In this stage, the leader is in control and can offer a high-quality working relationship with the member. This stage is sometimes labeled the *initial interaction* stage. In the study conducted by Cropanzano et al. (2016), numerous

emotion scholars contended emotional expressions from leaders are important to leader effectiveness.

During emotional expression, information is provided to the member concerning the leader and the future relationship (Cropanzano, et al., 2016). When members read into leaders' expressions, there may be misinterpretations producing unnecessary stressors in the LMX relationship. Negative preconceived thoughts may inhibit high-quality relationships between the leader and member (Mahsud et al., 2010). According to Cropanzano et al. (2016), establishing interactive empathy is important to promote positive work relationships. In situations where interactive empathy is not shared, there are chances the LMX relationship will not grow (Mahsud et al., 2010).

Role Making

Role making occurs when members begin to work as a team on objectives and assignments. According to Dienesch and Liden (1986), in this stage, leaders determine whether the performance of members is beneficial for each job. If member performance is strong, a leader may opt to delegate more responsibilities. Over time, if a member satisfies the challenges and responsibilities presented, a high-quality LMX relationship is the result (Cropanzano et al., 2016). The member is fully active in building the LMX relationship.

At this point of role making, leaders and members know little about each other and could struggle forming LMX relationships (Goldberg & McKay, 2015). The partnerships created by instilling the LMX theory are most effective in terms of mutual influence, trust, respect, and commitment (Cropanzano et al., 2016). Leaders and

members will actively engage in learning requirements of job descriptions and accountabilities. Many projects are not as successful without leader and member working together. Executives agree, without substantiated relationships, there may be losses (Goldberg & McKay, 2015).

Routinization

Routinization is when relationships are formed between members and leaders. In this stage, routines are established, and persistence, patience, trust, and empathy are easily identified throughout the LMX relationship (Posecion & Posecion, 2019). Routines are often viewed as acceptance of job demands and willingness to fulfill work obligations. Routinization can be either negative or positive. According to Posecion and Posecion (2019), when members are satisfied in job placement and trust their leader, they are more apt to adequately achieve positive organizational outcomes.

Often, an understood rule of thumb is the more positive the reward, the more motivated members will be. Conversely, the more negative the reward, the less likely to attain motivation (Posecion & Posecion, 2019). Leaders must be aware of management function to create environments and conditions for surviving and flourishing. Leaders are responsible for the process of planning how to optimize the LMX relationship, organizing job placements, and establishing work guidelines as necessary (Yukl, 2011).

Routinization is predetermined to make businesses thrive at a high pace and optimizes growth (Posecion & Posecion, 2019).

With all components implemented, LMX depicts promoting positive work environments, leaders are required to confirm profitable work relationships (Graen &

Uhl-Brien, 1995). The LMX theory directly connects with the problem statement of this study by offering supportive assistance in identifying sustainable leader–member work relationships. Many organizational theories assume only one leadership approach should be adopted across organizations (Duyan & Yildiz, 2018). The assumption is behavioral and trait theories are the preferred leadership approach (Winkler, 2010).

Hayes et al. (2007) asserted that behavioral theories are focused on changing problematic behavior and emotional and cognitive responses. These theories are not relevant to this study, as LMX is concentrated on relationships formed regardless of problematic behavior between the leader and the member. Although LMX asserts relationships should be established between the leader and member, the relationship dictates trust and belief in each other, not behavior characteristics (Duyan & Yildiz, 2018). LMX suggests leaders and members form beneficial relationships to enhance the work environment and promote satisfaction in job responsibility. Behavior traits give credence to why people behave; LMX gives credence to establishing positive work relationships.

Trait theories are focused on the characteristics of the leader (Hayes et al., 2007). These characteristics range from social, physical, or personality. This theory does not determine specific traits leaders should possess to promote successful working relationships. This theory does not suggest relationship-building strategies of high-quality work relationships. The trait theory does identify the strengths and weaknesses of individuals that can be improved throughout time (Hayes, et al., 2007).

According to Hoyt and Goethals (2009), highly valued relationships between leaders and members are precursors associated with a vast array of positive outcomes, including optimum organizational skills, job fulfillment, and career progression. The next phase of the LMX has changed the focus from descriptive to prescriptive approaches. This approach emphasizes the effectiveness of the LMX model and insights on how leaders differentiate among the members to highlight how these leaders can create effective relationships with all members (Hoyt & Goethals, 2009).

When individuals resign from an establishment, they are considered *alumni*. The strength of the LMX–alumni goodwill rapport depends on whether leaders produced strong retention attempts after employees talked about the choice to resign (Raghuram et al., 2017). Although most companies try to build leader–member relationships through an array of strategies, each member of establishments should feel the value in their job performance, ability to progress, and input on growth (Duyan & Yildiz, 2018). Opportunities for progression in the workplace should be made available for any member meeting qualifications.

African American Nurses

Although the United States is experiencing changing demographics, the change is not always evident in the field of nursing. A long-standing problem is the underrepresentation of racial and ethnic minorities in nursing and opportunities for advancement. This results in derelict culturally sensitive care that nurtures optimal patient care (Banister et al., 2020). The Affordable Care Act was endorsed to mandate all

individuals would have access to healthcare. This assertion expanded the racial, ethnic, and social diversity of the patient care population.

According to the National Nurses Workforce Study, 83% Caucasian, non-Hispanic nurses make up the workforce compared to 62.1% of the U.S. population (Budden et al., 2018). African American nurses are underrepresented, creating a great disparity in traditional nursing leadership positions. A recent national survey revealed African American nurses reported only 3.4% of office holders in nursing leadership positions, revealing the paucity of diverse role models and mentors for future African American healthcare leaders (American Organization of Nurse Executives [AONE], 2018). African American nurses desire opportunities for nursing career leadership and advancement; however, they encounter barriers in fulfilling these roles (Fowler, 2020).

Attrition and Retention of Nurses

According to Hall (2004), one of the key factors responsible for nurse attrition is unsatisfactory working conditions. Inability to transfer to high-level nursing positions also plays a major role in nurses' decision to resign. Poor performance in duties poses potential effects in the job environment (Hall, 2004). Successful retention of nurses can be attributed to successful relationships with nurse leaders. When nurses feel valued and are offered higher-level positions according to education levels, they are more apt to remain at a job, and work environments will improve (Hall, 2004).

Turnover among nurses is usually the result of dissatisfaction in the work environment and job-related stressors (Hall, 2004). The retention of nurses is related to initial job satisfaction, low stress levels, and knowledge of job requirements (Hall, 2004).

Nurses experiencing burnout who are provided time off often stay on nursing jobs, thus lowering the attrition rates (Hall, 2004). According to Cullen (1995), job satisfaction does not always lower attrition rates. Often an individual may experience life tragedies, military relocation, or loss of skills, preventing retention on the job.

Nurse Turnover

High nurse turnover can have a negative impact on organizations. In the nursing field, this will impede patient care and provision of quality healthcare (Shields & Ward, 2001). Nurse turnover predictors are job satisfaction, age, potential job offers, and leadership behavior (Hayes et al., 2012). Also, nurse turnover can be attributed to supervisory relationships, internal environmental factors, and inflexible work schedules (Hayes et al., 2007). Nurse turnover has a negative impact on the organization, but potential gains are cost reduction, decreased salaries, and benefit costs (Shields & Ward, 2001).

According to Hayes et al. (2012), demographics can be a reason for turnover. Nurses often accept sign-on bonuses offered by other organizations; thus, higher pay can be a stimulant to leave. Nurses' perceptions of job requirements can often be swayed by the creation of LMX relationships (Campbell et al., 2020). Nurse leaders have effects on nurse members. This effect can influence nurses to stay at current jobs because of the positive impact of the leader–member relationship; negative relationships will contribute to the movement of nurses from one job to another (Campbell et al., 2020).

Nurse Administrator (Leader)

According to Wei et al. (2019), leader role modeling is an effective approach to positive work relationships. Additionally, when promoting a positive work environment, nurse leaders become socially aware. They provide avenues for the workforce to meet and enjoy each other outside of work. Facilitating social connections improved nurse morale and engagement at work (Campbell et al., 2020). The nurse leader incorporates positive relationship strategies which not only build relationships between the leader and member but builds relationships among coworkers.

Practicing gratitude is another approach nurse leaders can use to promote positive relationships (Wei et al., 2019). When nurse leaders capitalize on nurse's strengths, they recognize job potential and skill. This not only satisfies the job production from the nurse leaders' viewpoint, it can inspire nurse's creativity in the work environment (Wei et al., 2019). Nurturing nurses is an integral approach to trust and belief in the nurse leader. Trust and respect are attained when nurse leaders represent the desired responses from the members (Campbell et al., 2020).

Quantitative Nonexperimental Descriptive Study

This quantitative nonexperimental descriptive study employed secondary data obtained from the NSSRN survey in validating nurses' trends and resources. The NSSRN is a sample survey of the nursing workforce; the data in this study is used to provide the government and the public information regarding the nursing workforce (NSSRN, 2018). The NSSRN (2018) also provides information concerning the characteristics of nurses, such as training and education, income, employment, race identification and

demographics. According to Burns (2013), the purpose of descriptive research is to describe the phenomenon of interest and its component variables within one single subject group. This is accomplished with descriptive statistics. This design also employs data collection from all nurses with the same survey questions. In this study the nonexperimental description methodology was implemented to identify the cause, or the independent variable, also named the predictor, and the effect, or dependent variable, can be simply stated as the outcome (Fields, 2013).

According to Qader (2019), skilled nursing care is based on thorough and comprehensive documents. This should be completed by every nurse to prove competency and job knowledge. Job responsibility awareness is essential for nurses seeking higher job position vacancy (Qader, 2019). Each answer given in the NSSRN should be thorough in thought process and represent the exact intents of each participant to validate sustainable results (Rhodes, 2015). The answers gained from survey instruments will yield information to create systems to eradicate any unwarranted behavior within the nursing behavior (Sarkar et al., 2019).

Definitions

Cooper et al. (2012) emphasized the need for researchers to communicate and interpret details in order for readers to have a clear understanding of the literature. Providing definitions of specific terms helped to convey the literature effectively by creating clarity and simplicity (Van Knippenburg & Sitkin, 2013). The definitions below are specific to this study, and the meaning and intent are clarified to alleviate incoherent or unclear meanings.

Attrition: The steady but intentional decrease in staff numbers arising as employees retire or resign and are not replaced. Attrition data is essential for workforce planning and retention strategy (Castro Lopes et al., 2017).

Leadership Member Exchange (LMX): The unique relationship-based social exchange between leaders and members from a role theory perspective (Gooty et al., 2019).

Nurse: According to the International Council of Nurses (2017), a nurse is a person who is “skilled in caring for the young or the sick, usually under the supervision of a physician” (para. 1). A registered nurse (RN) is someone who holds a license from the state after passing the prescribed examinations.

Nurse Administrators (Leader): A nurse administrator supervises the nursing staff at any institution that hires nurses. Nurse administrators are licensed and have field experience and advanced degrees. While RNs and nurse practitioners (NP) are held liable for the primary care of the patient, a NP oversees the work of the nurses and nurse administrators. Because of the vast variety of job responsibilities and titles in this career field, academic qualifications vary greatly (Manning, 2017).

Nurse turnover: The practice where nursing staff, involuntarily or voluntarily, leave their positions or transfer within the hospital environment (Kovner et al., 2017). Nurse turnover is indicative of the job market; high turnover can indicate poor working conditions for an organization (Kovner et al., 2017).

Retention: The continued possession, use and need of a particular object, individual or system (Urwin et al., 2010).

Assumptions

Every study is guided by assumptions, limitations, and delimitations refining the thought process of the researcher. Throughout this study and data collection procedures, there were occurrences where assumptions, limitations, and delimitations of the research study were reconsidered and amended to replicate legitimacy and pragmatism within the overall study. According to Manning (2017), Ivankova and Plano-Clark (2018), assumptions serve as the conditions determining if research questions are valid and sufficient to assist in directing data collection and analysis.

Several assumptions were in this research study. They were as follows:

It was assumed the responses from the NSSRN survey in the research study were completely factual and accurate without misleading information amended. It is imperative within the study nurses were completely honest and genuine with their responses to survey questions. Not only did this help to bring more credibility to the study, but it also helped to sustain the results of the research study as a door of access for future research in the field of nursing. Without authentic and truthful responses, the secondary data set from the study could be invalid or inconclusive in its results and findings.

The quantitative method was assumed pertinent and sufficient for this study (Chang & Lee, 2007). The quantitative method is used by researchers who want to identify numeric findings telling the story of a precise populace of individuals. During this method of research, information amassed was for the lone purpose of identifying LMX relationships and advancement opportunities, brought acumen to the phenomenon

guiding the study. Data gathered through the NSSRN survey within quantitative research was viewed on a representational viewpoint as opposed to biased or established environments.

It is assumed the nonexperimental descriptive quantitative design was the appropriate design of the study (Clandinin & Connelly, 2004). The nonexperimental descriptive quantitative design is typically applied by researchers to gain knowledge yielded from the secondary data, which will connect with outstanding phenomena within the nursing care field of study.

Limitations

Limitations are considered contributors the researcher has no influence over, such as bias. In contrast, *delimitations* are things over which the researcher has jurisdiction, such as the specificity of the research study. Limitations in research are facets of the study that may have a bearing on the results of the study but are not regulated by the researcher (Hancock & Algozzine, 2017). The limitations of the study were as follows:

The first limitation of the study was the lack of quantitative nonexperimental descriptive research on this topic. The rationale for this limitation was the lack of resources about the working relationships between nurse leaders and advancement opportunities for nurses and the reasoning's for resignations. This limitation might have averted a general view of survey administered, because of varying nurse criteria (length of time on job, job assignment, type of nurse, work department etc.).

While there were, in fact, many nurses who took the NSSRN survey within the general population, this does not suffice for a completely generalizable conclusion for other hospitals or healthcare facilities.

Delimitations and Scope

Delimitations in research are borderlines and impediments the researcher has created based on the predictable desires of the research, narrowing the scope (Hancock & Algozzine, 2017; Leedy & Ormrod, 2010). The delimitations of the study were as follows:

The delimitation of the research study indicated data gathered was from secondary data sources.

The research study was comprised of only nurses selected to take the survey for the study. To assuage an extensive amount of time to finalize data collection, the researcher chose one survey to utilize for study purposes. The findings and conclusions at the end of the study cannot be generalized to all nurses and nurse leaders.

While there were, in fact, more nurses and nurse leaders within the general population, this does not suffice for a completely generalizable conclusion for other nurse places of employment.

Significance, Summary, and Conclusions

The significance of this study informs hospital administrators, of the impact of leadership and advancement opportunities on the retention of African American female nurses and the LMX theory. The contribution to social change is to ensure African American female nurses have the same advancement opportunities and training as their

counterparts to ensure diversity in the field of healthcare. Health disparities among the general population relating to the lack of diversity can be improved if African American nurses were retained and represented in leadership roles. The research may also contribute to current and future nursing research study on LMX and African American nurse leaders. A final contribution to scientific knowledge is to publish this capstone and add to peer-reviewed articles, as well as present at doctoral education conferences.

This research also contributes to current and future nursing research study on LMX, retention of African American female nurses, opportunities for advancement and job resignations. This study also identifies barriers or restrictions in the LMX relationship related to inability to create viable work relationships. Motivation, or the lack thereof, can also be a derivative of poor leadership skills over members. Advancement opportunities for African American nurses were explored and validated through research and analysis.

Effective leadership work relationships play a crucial position in the achievement of the corporation and has become a vital differentiation drive (Kezar & Holcombe, 2017). Challenges in nurse leadership necessitate new forms of leadership. While transformational leadership is a standard acceptable style of leadership in any leadership role at any establishment, LMX adds to the current style. As the LMX relationships develop meaningful relationships with employees, this will enhance advancement opportunities ultimately granting profitable organizational outcomes and nurse retention.

The purpose of this nonexperimental descriptive quantitative study was to examine if a relationship exists between a lack of advancement opportunities and lack of good leadership on African American female nurses' and reasons for leaving the nursing

profession. The remainder of this study is sectioned into three sections. Section 2 consists of a literature review on relevant literature on leadership theories, higher education leaders, LMX, and organization outcome. Section 3 includes a discussion on the methods selected to collect and analyze data. The section also consists of the appropriateness of the quantitative method and nonexperimental descriptive inquiry design. Other topics discussed in Section 3 include the importance consists of results of the NSSRN survey used to collect and analyze data. Section 4 concludes the study with a discussion on the findings, implications, and recommendations for future research.

Section 2: Research Design and Data Collection

Introduction

The purpose of this quantitative nonexperimental descriptive study was to examine the relationship, if any, between a lack of advancement opportunities and lack of good leadership for African American female nurses and their reasons for leaving the nursing profession. Each independent variable—lack of advancement and lack of good leadership—was examined. The impact of both independent variables on the dependent variable—reason for leaving the nursing profession—warrant further study to add to the body of literature on the nursing profession. Section 2 includes the research design and rationale, why I chose this design and its components, and the methodology. I explain why a quantitative descriptive study was the optimal method used for this study, discuss the threats to the validity, and finalize with the summary.

Research Design and Rationale

De Vaus (2001) stated that research design refers to the structure of an investigation proposed to decrease the chance of making wrong contributing explanations resulting from data. De Vaus (2001) asserted, “the function of the research design is to make sure that the evidence attained enables us to answer the initial question as unambiguously as possible” (p. 9). In this study, I used a descriptive research design to explore the relationship between a lack of advancement opportunities and the lack of good leadership and African American female nurses’ reasons for leaving the nursing profession.

A quantitative descriptive design aims to attempt to collect measurable information for statistical analysis of the population sample (Lambert & Lambert, 2012). In this quantitative nonexperimental descriptive study, the approach included the use of a cross-sectional survey of 50,000 nurses from 2018, a power analysis using Field's G*Power 3.1.9.2 for sample analysis, SPSS for analysis of study results, Cronbach's alpha to achieve internal consistency of received responses, descriptive analysis of central measures and frequencies, and percentages to describe sample demographics.

A quantitative descriptive methodology was the best design for this study because I sought to identify frequencies, characteristics, categories, and trends (Rossen et al., 2017). In contrast to using other designs, such as ethnography, grounded theory, or case study, the purpose of a quantitative descriptive study is to analytically and correctly define a phenomenon, situation, or population. It has components that answer how, when, what, and where questions, excluding why (Rossen et al., 2017).

Methodology

The purpose of this quantitative nonexperimental descriptive study was to examine if a relationship exists between a lack of advancement opportunities and lack of good leadership and African American female nurses' reasons for leaving the nursing profession. Each independent variable, lack of advancement and lack of good management or leadership, was examined. The impact of both independent variables on the dependent variable and reason for leaving the nursing profession warrant further study to add to the body of literature on the nursing profession.

The value of the work relationship a nurse has with their nurse leader has substantial impact on the nurse's attitudes toward work and performance (Laschinger et al., 2009) and with the intent to resign (Galletta et al., 2013). The significance of the quality of the relationships at work between subordinates (members) and their supervisor (leader) was established some time ago (Graen, et al., 1972). LMX is centered on the structure known as *social exchange theory*, which consists of a series of personal connections that develops a method of exchange and trust between the people involved (Blau, 1964; Cropanzano et al., 2011).

Nurses' observations of LMX relationships and opportunities for advancement have been associated with lower levels of intent to resign or higher levels of intent to remain in both quantitative studies (Galletta et al., 2013; Robson & Robson, 2015) and qualitative studies (Tourangeau et al., 2010). However, studies with a concentration on more precise facets of the relationship in a nursing environment have found no links between LMX relations or nurse manager ability and nurses' turnover intention (Lansiquot et al., 2012).

In this quantitative nonexperimental descriptive study, my approach included the use of a cross-sectional survey of 50,000 nurses from 2018, which is the target population for the study, a power analysis using Field's G*Power 3.1.9.2 for sample analysis, SPSS for analysis of study results, Cronbach's alpha to achieve internal consistency of received responses, descriptive analysis of central measures, and frequencies and percentages to describe sample demographics.

A sample of 102,520 RNs was selected from a sampling frame compiled from files provided by the National Council of the State Boards of Nursing and individual state boards of nursing. The sample was stratified by licensing state. Within each state, there were two strata: one for RNs holding a NP license and another for all other RNs. To ensure reliable state estimates for RNs and NPs at the state level, different sampling rates were used across states and for RNs and NPs within each state.

According to NSSRN (2018), data collection began on April 30, 2018, and extended to October 12, 2018. Survey invitations were mailed to potential respondents to participate via a web instrument or a paper questionnaire. Moreover, sampled RNs gained access to a staffed questionnaire assistance telephone line. This line allowed them to receive language support, login assistance, or to complete the interview with a census telephone interview agent. Prospective participants were delivered up to eight invitations and reminders.

For this study, the NSSRN was used. All aspects of this data set are available and include the code book, crosswalk, and questionnaire. The data points needed were reason for leaving the nursing profession, lack of advancement opportunities, and lack of good leadership. Demographics to identify African American female nurses who took the survey were included. The sampling dynamics for this study and restatement of the research questions are included. The research questions and hypotheses are:

RQ1: What is the relationship, if any, between a lack of advancement opportunity and African American female nurses' reason for leaving the nursing profession?

H_01 : There is no relationship between a lack of advancement opportunity and African American female nurses' reason for leaving the nursing profession.

H_a1 : There is a relationship between a lack of advancement opportunity and African American female nurses' reason for leaving the nursing profession.

RQ2: What is the relationship, if any, between African American female nurses' reason for leaving the nursing profession and lack of good leadership?

H_02 : There is no relationship between African American female nurses' reason for leaving the nursing profession and lack of good leadership.

H_a2 : There is a relationship between African American female nurses' reason for leaving the nursing profession and lack of good leadership.

RQ3: What is the relationship, if any, between African American female nurses' reason for leaving the nursing profession and lack of advancement opportunity and lack of good leadership?

H_03 : There is no relationship between African American female nurses' reason for leaving the nursing profession and lack of advancement opportunities and lack of good leadership.

H_a3 : There is a relationship between African American female nurses' reason for leaving the nursing profession and lack of advancement opportunities and lack of good leadership.

Sampling

According to the NSSRN (2018), there have been some key revamps. One major change is within the health care system and a new component that focuses on nurse

practitioners that was based on the 2012 National Sample Survey of Nurse Practitioners. Also, the sampling frame was improved using the Census Person Identification Validation System; by doing this it makes the demographic information in the frames available for the sample and adjustments to the weight (NSSRN, 2018). The state where the licensing was attained is where the sample was selected. The sampling frame was sorted by sex, race, ethnicity, age, and zip code before sample selection. Expansion occurred by oversampling NPs to help sustain state level evaluation (NSSRN, 2018). Current licensure lists in each state are where the samples are selected. Each state's sampling weights have been calculated and added to nurses' records in the purposed data files. Adjustments to the files occurred in these weights for nurses who have multiple licenses. Although nurses may be sampled in other surveys, no attempt is made to track these nurses' career over time.

In 2008, the survey design was modified to welcome stratified systematic sampling pertinent to each state. Additional strategy was created for employment commuting effects, age level, and dual license. This design conflicted with the sample design used 1977 to 2004, which included a convoluted, nestled sample frame, with equivalent possibilities of choosing nurses sampled in each state. The possibilities of selection were created for each record. Each state's samples were chosen from current licensure lists.

According to NSSRN (2018), the 2008 questionnaire was modified and analyzed to minimize respondent reply time burden and includes questions for nurse practitioners and new healthcare delivery patterns. A sample of 102,690 RNs were randomly selected

from over 4.6 million licensure records provided by the National Council of the State Boards of Nursing and individual state nursing boards. The licensure records were sorted by state, license type (RN or NP), and demographic variables. Sampling rates from each state were then determined to set a baseline for representation (NSSRN, 2018).

Operationalization

The data collection for NSSRN covered 24 weeks. The participants could take part virtually or with a paper questionnaire after being contacted via mail. Participants were also granted access to an assistance phone line. There were 50,273 eligible participants who completed this survey with an unweighted response rate of 50.1% (49.1%, weighted; NSSRN, 2018). Advanced practice RNs make up nearly 11.5% of the nursing workforce (NSSRN, 2018).

Data Analysis Plan

In partnership with the U.S. Census Bureau, the National Center for Health Workforce Analysis governed the 10th NSSRN data collection in 2018. From April 2018 to October 2018, a total of 50,273 registered nurses finished the survey via a web instrument or a paper questionnaire with an unweighted response rate of 50.1% (49.1%, weighted). This instrument collected data from participants with active RN licenses from all U.S. states, disclosing a thorough look into the RN workforce.

Threats to Validity

The concerns around external validity can be relatively complex. Campbell and Stanley (1963) argued that “the question of external validity, like the question of

inductive inferences, is never completely answerable” (p. 5) and that “problems of external validity are not logically solvable in any neat, conclusive way” (p. 17).

External Validity

One threat to external validity may be the reactive or interaction effect of testing. There were no pretests offered to nurses prior to taking the NSSRN survey. The interaction effects of selection biases and the experimental variable were minimal in that the requirements for participation were outlined and enforced. Participating nurses had to possess adequate educational certification.

Internal Validity

The threats that may occur for the next testing is the manipulation of participants in accordance with requirements. There were nurses who were currently in school that would have graduated and presumably became a part of the nursing workforce. The nurse participants who started the survey did finish the survey contributing to lowered experimental mortality and statistical regression rates. History was altered by the types of degrees in nursing. Some participants held associate degrees and others held bachelor’s degrees. Also, nurses could relocate or change educational statuses. Instrumentation should not be altered as the survey questions are created to solicit vital information from all nurses. There were no multiple treatment interferences given to nurses who participated.

Statistical regression can also mean regression toward the mean. Time reversed control analysis and direct examinations for changes in population variabilities are useful precautions against misinterpretations. There were no scores that were high and appeared

to lower nor any lower participants that completed the survey appearing higher.

Researchers could reverse any misinterpretations by presenting a pretest or posttest, but this survey did not present itself.

Ethical Procedures

NSSRN data is accessible to the public to be used for research purposes only and may not be used to identify individual respondents (NSSRN, 2018). Consequently, the 2018 NSSRN, only the state-based public use files were created due to disclosure concerns, and documentation for any of the NSSRN surveys may be downloaded from the HRSA Data Warehouse. More detailed geographic information is available in the restricted-use data file (Data HRSA Home Page, 2021). Access to the NSSRN survey was attained through the internet with no penalty or procedural guidelines. If there were interests to access the restricted use data, one would have to apply for access to the restricted use data webpage with pertinent hyperlinks. The user may not merge the state and county data files into one aggregated database involving all characteristics together with extensive geographic information (Data HRSA Home Page, 2021). There is no standard, unique identifiers for each surveyed nurse across these two database files.

The treatment of all participants that took the NSSRN exercised ethical and noninvasive standards. According to NSSRN (2018), the recruitment of participating nurses made up the “sample of 102,690 registered nurses randomly chosen from over 4.6 million licensure records given by the National Council of the State Boards of Nursing and individual state nursing boards”. The licensure data were disaggregated by state, license type (RN or NP), and demographic variables (NSSRN, 2018). Sampling times

from each state were then determined to set a baseline for representation. The data collection lasted for 24 weeks without notation of refusals to participate or any early withdrawals prior to survey completion.

Summary

Section 2 provided an overview of the research design and research methodology used in this quantitative descriptive study. In this quantitative descriptive study, I examined if a relationship exists between a lack of advancement opportunities or the lack of good leadership on African American female nurses' reasons for leaving the nursing profession. Each independent variable, lack of advancement, and lack of good leadership were examined, along with the impact of independent variables on the dependent variable and reason for leaving the nursing profession. The theory that grounds this study is Hoyt & Goethals' LMX theory which posits the importance of the interpersonal behavior between leaders and followers.

The nonexperimental descriptive quantitative design was the appropriate design for the study (Clandinin & Connelly, 2004). Researchers typically apply the nonexperimental descriptive quantitative design to gain knowledge yielded from secondary data and to connect with outstanding phenomena within the nursing care field of study. This quantitative nonexperimental descriptive study approach included the use of a cross sectional survey of 50,000 nurses from 2018; a power analysis using Field's G*Power 3.1.9.2 for sample analysis; use of Statistical Package for Social Science (SPSS) for analysis of study results; Cronbach's alpha to achieve internal consistency of

received responses; descriptive analysis of central measures and frequencies and percentages will be used to describe sample demographics.

Section 3: Presentation of Results and Findings

Introduction

The purpose of this quantitative nonexperimental descriptive study was to examine if a relationship exists between a lack of advancement opportunities and lack of good leadership and African American female nurses' reasons for leaving the nursing profession. Each independent variable, lack of advancement and lack of good leadership, was examined. The impact of both independent variables on the dependent variable and reason for leaving the nursing profession warrant further study investigation to add to the body of literature on the nursing profession. The research questions and hypotheses for this study are:

RQ1: What is the relationship, if any, between a lack of advancement opportunity and African American female nurses' reason for leaving the nursing profession?

H_01 : There is no relationship between a lack of advancement opportunity and African American female nurses' reason for leaving the nursing profession.

H_{a1} : There is a relationship between a lack of advancement opportunity and African American female nurses' reason for leaving the nursing profession.

RQ2: What is the relationship, if any, between African American female nurses' reason for leaving the nursing profession and lack of good leadership?

H_02 : There is no relationship between African American female nurses' reason for leaving the nursing profession and lack of good leadership.

H_{a2} : There is a relationship between African American female nurses' reason for leaving the nursing profession and lack of good leadership.

RQ3: What is the relationship, if any, between African American female nurses' reason for leaving the nursing profession and lack of advancement opportunity and lack of good leadership?

H₀3: There is no relationship between African American female nurses' reason for leaving the nursing profession and lack of advancement opportunities and lack of good leadership.

H_a3: There is a relationship between African American female nurses' reason for leaving the nursing profession and lack of advancement opportunities and lack of good leadership.

Section 3 includes the data collection of the secondary data set, the results of the data collection, and a summary.

Data Collection of Secondary Data Set

According to NSSRN (2018), in alliance with the U.S. Census Bureau, the National Center for Health Workforce Analysis governed the 10th NSSRN data collection in 2018. From April 2018 to October 2018, a total of 50,273 RNs completed the survey via a web instrument or a paper questionnaire with an unweighted response rate of 50.1% (49.1%, weighted; NSSRN, 2018). The time frame for the survey lasted 24 weeks. This instrument compiled data from participants with active RN licenses from all U.S. states. These data revealed a thorough look into the RN workforce.

There were no discrepancies in the use of the secondary data set from the plan previously presented. The average age of the respondents was 47.9 years old, with nearly half (47.5%) of all RNs aged 50 or older (see Figure 1). White, non-Hispanic RNs

accounted for the largest proportion (83.3%). Hispanic RNs accounted for 3.7%; Black, non-Hispanic RNs 4.9%; Asian, non-Hispanic RNs 4.8%; multiple races (1.9%); and Native American, Pacific Islanders, and other accounted for less than 1% (see Table 1). Racial and ethnic minority groups accounted for 26.7% of the RNs in this study (NSSRN, 2018).

Figure 1

Ages of Nurses in 2018

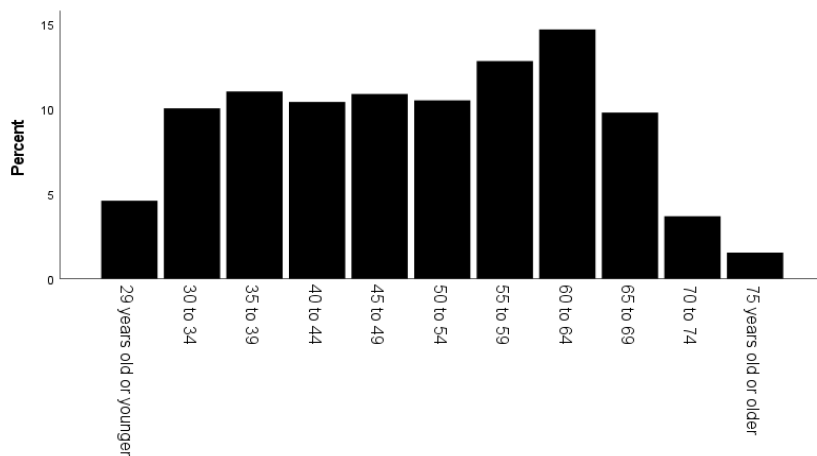


Table 1*Race and Gender Characteristics*

Race/Ethnicity	SEX				Total	
	Male		Female		N	%
	N	%	N	%		
Hispanic	216	5.2%	1657	3.6%	1,873	3.7%
White	3,257	77.8%	38,596	83.7%	41,853	83.3%
Black	202	4.8%	2,273	4.9%	2,475	4.9%
Asian	297	7.1%	2,104	4.6%	2,401	4.8%
Native	27	0.6%	174	0.4%	201	0.4%
Pacific Island	21	0.5%	121	0.3%	142	0.3%
Other	48	1.1%	305	0.7%	353	0.7%
Multiple	118	2.8%	857	1.9%	975	1.9%
Total	4,186	100.0%	46,087	100.0%	50,273	100.0%

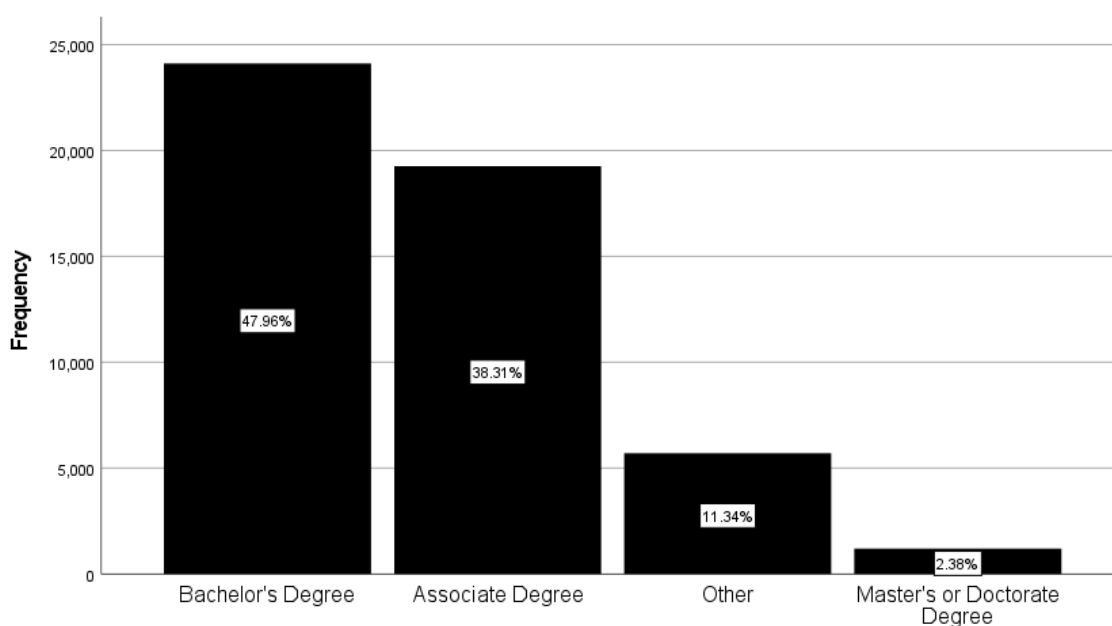
For RNs who graduated in the previous 20 years, the percentage of minority groups (those of non-Hispanic White descent) seemed to be higher when linked to licensed prior to this period. This upsurge in minority groups is largely propelled by Hispanic RNs. Men in nursing also continues to rise in demographics in nursing. In 2018, male RNs represented 8.3% of the population, a growth from 7.1% in the 2008 NSSRN study (NSSRN, 2018; see Table 1). Nurses are more diverse today than were represented in the 2008 NSSRN study. Both men and minority groups have seen a slight increase within the RN population (NSSRN, 2018).

In 2017, roughly 83% (3,272,872 RNs) of RNs held a nursing-associated job. Most of the RNs in the workforce are college educated (63.9%). The dispersion of the qualifying degree for the first nursing license for the sample population was: nurses with a bachelor's degrees accounted for 47.96%, associate's degrees accounted for 38.31%, some other certification accounted for 11.34%, and master's or doctorate degrees

accounted for 2.38% (see Figure 2). Advanced practice RNs accounted for approximately 11.5% of the nursing workforce. Telehealth capabilities were reported in 32.9% of nurses' workplaces. Among them, 50.3% of nurses used telehealth in their practice. Median annual earnings for full-time RNs were \$73,929, while part-time RNs earned a median annual amount of \$39,985 (NSSRN, 2018).

Figure 2

Qualifying Degree for First Nursing License



A representative sample of 102,690 registered nurses were arbitrarily selected from over 4.6 million licensure records provided by the National Council of the State Boards of Nursing and individual state nursing boards (NSSRN, 2018). The licensure records were sorted by state, license type (RN or NP), and demographic variables. Sampling rates from each state were then determined to set a baseline for representation (NSSRN, 2018). The survey extended respondents the opportunity to participate by

responding to a web instrument or paper questionnaire after being communicated with by mail. Additionally, respondents had access to a staffed questionnaire assistance telephone line where they could receive login assistance, language support, or other assistance. A total of 50,273 eligible participants completed this survey with an unweighted response rate of 50.1% (49.1%, weighted; NSSRN, 2018).

The participant sample size examined was based on the G*Power analysis presented in Section 2. Use of the G*Power software 3.1.9.7 with a small effect size (.05) and a 95% confidence level yielded a critical χ^2 value of 1.9547889. For African American female nurses, the sample size included 2,273 respondents; this is represented in Table 1.

A cross tabulation and Chi-square test was conducted to determine if there were relationships between African American female nurses' reasons for leaving the nursing profession and lack of advancement opportunity and lack of good management or leadership. Chi-square is a nonparametric test and is the best method for analyzing nominal data (Siedlecki & Bena, 2021). The significance level (p) for the tests was set at .05 with a 95% confidence interval. Significance levels less than .05 indicate a statistically significant difference in the population, with values higher than .05 indicating no statistical significance (Siedlecki & Bena, 2021). All assumptions for the Chi-square test were met; the data are from a random selection, the data were measured at a nominal level, the variables are mutually exclusive, and the expected cell count was met (Siedlecki & Bena, 2021). To interpret the strength of the relationship between the nominal variables, Cramer's V was calculated for each Chi-square test (Siedlecki &

Bena, 2021). The values for Cramer's V can range from 0 to 1, with higher values indicating a strong association between the variables and lower values indicating a weak association between the variables (Siedlecki & Bena, 2021). The independent variable used was African American female nurses. The dependent variables were lack of advancement opportunities and lack of good management or leadership.

Results

Research Question 1

For RQ1, a relationship was found between lack of advancement opportunity and the African American female nurses' reason for leaving the nursing profession. A cross tabulation was conducted to determine the number of responses to variable for African American female nurses. There were 302 responses by African American female nurses to the question regarding reason for leaving the profession being due to lack of advancement opportunities (see Table 2). Of the 302 responses, 62 indicated an affirmative response (yes), and 240 indicated a negative response (no; see Table 2). The results of the Pearson's Chi-square test indicate a statistically significant relationship between the lack of advancement opportunity and the African American nurses' reason for leaving the nursing profession with a Pearson Chi-square value of 41.536, with 1 degree of freedom and $p = .000$ (see Table 3). Based on the p value of .000, the null hypothesis is rejected.

Table 2*Lack of Advancement Opportunities Cross Tabulation*

	Responses				Total	
	Yes		No		N	%
	N	%	N	%		
All Others	730	92.2%	3910	94.2%	4640	93.9%
African American Females	62	7.8%	240	5.8%	302	6.1%
Total	792	100.0%	4150	100.0%	4942	100.0%

Table 3*Chi-Square of African American Female Nurses and Reason for Leaving, Lack of Advancement Opportunity*

Total N	302
Test statistic	41.536
Degree of freedom	1a
Asymptotic sig. (2-sided test)	.000

Note. There are 0 cells (0%) with expected values less than 5. The minimum expected value is 151. * $p < .05$.

Research Question 2

For RQ 2, a relationship was found between lack of good leadership and the African American female nurses' reason for leaving the nursing profession. A cross tabulation was conducted to determine the number of responses to variable for African American female nurses. There were 302 responses by African American female nurses to the reason for leaving the profession was due to lack of good leadership (see Table 4). Of the 302 responses, 95 indicated an affirmative response (yes), with 207 indicating a negative response (no) (see Table 4) to the question regarding reason for leaving the nursing profession due to lack of good leadership. The results of the Pearson's Chi-square

test indicate a statistically significant relationship between the lack of advancement opportunity and the African American nurses' reason for leaving the nursing profession with a Pearson Chi-square value of 41.536, with 1 degree of freedom and $p = .000$ (see Table 5). Based on the p value of .000, the null hypothesis is rejected.

Table 4

Lack of Good Leadership Cross Tabulation

					Total	
	Yes		No		N	%
	N	%	N	%		
All Others	1592	94.4%	3048	93.6%	4640	93.9%
African American Females	95	5.6%	207	6.4%	302	6.1%
Total	1687	100.0%	3255	100.0%	4942	100.0%

Table 5

Chi-Square of African American Female Nurses and Reason for Leaving, Lack of Good Leadership

Total N	302
Test Statistic	41.536a
Degree Of Freedom	1
Asymptotic Sig.(2-sided test)	.000

Note. There are 0 cells (0%) with expected values less than 5. The minimum expected value is 151. * $p < .05$.

Research Question 3

For RQ 3: a relationship was found between the African American female nurses' reason for leaving the nursing profession and the lack of advancement opportunity and the lack of good leadership. A cross tabulation was conducted to determine the number of responses to variable for African American female nurses. There were 302 responses by

African American female nurses to the reason for leaving the profession was due to lack of good leadership and the reason for leaving due to lack of advancement opportunities (see Table 6). Of the 302 responses, 35 indicated an affirmative response (yes), with 27 indicating a negative response (no) to the question regarding the reason for leaving the profession being due to lack of advancement opportunities (see Table 6). The results of the Pearson's Chi-square test indicated a statistically significant relationship between the lack of advancement opportunity and the African American nurse's reason for leaving the nursing profession with a Pearson Chi-square value of 22.605, with 1 degree of freedom and $p = .000$ (see Table 7). The association between the variables for the population was determined by the symmetric measure of the Cramer's V value of .274 (see Table 8). Statistical significance exists between the variables, along with a moderate positive association between the variables, resulting in the rejection of the null hypothesis.

Table 6

Lack of Good Leadership and Lack of Advancement Cross Tabulation

		Reasons for leaving, lack of good management or leadership		Total
		Yes	No	
Reasons for leaving, lack of advancement opportunities	Yes	35	27	62
	No	60	180	240
Total		95	207	302

Table 7

Chi-Square of African American Female Nurses and Reason for Leaving, Lack of Good Leadership and Lack of Advancement Opportunities

	Value	df	Asymptotic significance (2-sided)	Exact sig. (2- sided)	Exact sig. (1- sided)
Pearson Chi-square	22.605a	1	.000		
Continuity correction ^b	21.170	1	.000		
Likelihood ratio	21.280	1	.000		
Fisher's exact test				.000	.000
Linear-by-linear association	22.530	1	.000		
N of valid cases	302				

Note. 0 cells (0.0%) have expected count less than 5. The minimum expected count is

19.50. Computed only for a 2x2 table. *p <.05

Table 8

Symmetric Measures for African American Female Nurses and Reason for Leaving, Lack of Good Leadership and Lack of Advancement Opportunities

		Value	Approximate S=significance
Nominal by nominal	Phi	.274	.000
	Cramer's V	.274	.000
N of valid cases		302	

Note. *p < .05

Summary

In summary, the overall purpose of this quantitative nonexperimental descriptive study was to examine the relationship, if any, exists between a lack of advancement opportunities and the lack of good leadership of African American female nurses' and the

reasons for leaving the nursing profession. Each independent variable, lack of advancement opportunities and lack of good leadership was examined. The null hypothesis was rejected for each question. Based on this information, it could not be ruled out that there is no relevancy to the African American female nurse and the transition from jobs due to (RQ1) lack of advancement opportunity, (RQ2) lack of good management and leadership nor (RQ3) the lack of advancement opportunity and good management and leadership. Pearson Chi-square results revealed a statistical significance in the lack of advancement opportunities and lack of good management for African American female nurses within the workplace, with a moderate association between the variables. The impact of both independent variables on the dependent variable and reason for leaving the nursing profession, warrant further study investigation to add to the nursing body profession.

Section 4 includes the interpretation of the findings from Section 3, the limitations of the study, Recommendations and Implications for Professional Practice and Social Change. The section ends with the conclusion of the study.

Section 4: Application to Professional Practice and Implications for Social Change

Introduction

In this quantitative study, I used a secondary data analysis approach to examine the relationship, if any, between African American female nurses' reasons for leaving the nursing profession and a lack of good leadership and lack of advancement opportunities within the field of nursing. Focus was placed on the variable of lack of good leadership and African American female nurses, the variable lack of advancement opportunities and African American female nurses, and finally the relationship between the two variables together and African American female nurses. The study was necessary to find out if leadership influences African American female nurses in their decision to leave the profession.

The 2018 NSSRN data set was used to attain the answer to the research questions. The results of the cross tabulations and Chi-square test determined that RQ1 of the study demonstrated a statistically significant relationship, Pearson Chi-square 41.536, $p = .000$ between lack of advancement opportunities and lack of good leadership and the reasons African American female nurses leave the profession. RQ2 demonstrated a statistically significant relationship, Pearson Chi-square 41.536, $p = .000$, between the lack of leadership and the reasons African American female nurses leave the profession. RQ3 demonstrated a positive moderate significance, Pearson Chi-square 22.605, $p = .000$ and a Cramer's V value of .274 between the lack of advancement and lack of leadership.

Interpretation of the Findings

This study was developed to investigate the attrition of African American female nurses from the nursing profession and the lack of African American female nurses in leadership positions. Those in nursing leadership positions would assume that advancement opportunity and having a leader in place would not be barriers for an educated, trained nurse, regardless of race; however, this study demonstrates that African American female nurses surveyed did not feel these opportunities and relationships existed for them. Current literature shows strong, positive LMX relationships can have a positive influence in advancement opportunity and leadership perception, particularly for African American female nurses (Banister et al., 2020). The findings in this study were consistent with the findings in other work: African American female nurses value and recognize the need for good leadership, leadership training, and professional development aside from their formal educational training (Truitt & Synder, 2020).

The statistical analysis used to answer the research questions in the study indicated that, when compared to all other races combined, African American female nurses leave their position due to lack of advancement opportunity at a significantly higher rate. Analysis demonstrated while lack of good leadership affected African American female nurses' reason for leaving their positions, the percentage was slightly lower than other races combined (see Table 4). The combination of lack of advancement opportunity and lack of good leadership increased simultaneously, demonstrating a positive relationship between the two variables. Iheduru (2020) found African American nurses felt they struggle to advance in their career due to a lack of leadership to help

eliminate the attitude that they are not capable of becoming a leader within the nursing field. According to Iheduru (2020), the development of good leadership relationships is key to developing African American nurses because it provides the nurses with exposure to opportunities they may not have thought of or known about. Overall, the findings in this study support the current literature indicating that African American female nurses leave positions due to lack of good management and lack of advancement opportunities.

Limitations of the Study

This study was limited in that the 2018 NSSRN was based on nurses' willingness to participate. The survey did provide reliable data; however, it was not completely representative due to all nurses not participating in the survey.

Recommendations

This study presents several opportunities for expansion. Additional focus could be placed on the employment settings African American female nurses are employed in and the association between the type of employment setting and reasons for leaving the nursing profession when the lack of advancement or lack of good leadership is the reason for leaving. The addition of this information could provide a better understanding of settings lacking opportunity and good leadership for African American female nurses. Findings could contribute to further promote mentor or leadership development programs within those particular types of employment settings that are lacking advancement opportunities and leadership.

Analysis of the data across various years of collection and comparison of the responses between years could provide additional insight into the findings of this study.

Identification of changes in the responses in the data between the years could determine improvement or lack of improvement in these areas in the nursing profession. Insight from the examination of this data could be useful to the healthcare industry to improve programs available to African American female nurses.

As identified in this study, there is a lack of literature surrounding African American female nurses and their perceptions of leadership and advancement opportunities. The addition of African American male participants could provide additional insight into the lack of advancement opportunities and lack of good leadership across the African American race in comparison with other races.

Implications for Professional Practice and Social Change

The findings of this study demonstrate that African American female nurses left the nursing profession at higher rates than other races due to lack of good leadership and lack of advancement opportunities. The literature review of this study supports the need for good leadership for African American female nurses to succeed in the nursing profession. Nursing leaders can use this study to inform their decisions on the development of mentorship programs that focus on the development and enrichment of African American female nurses. Through increased mentorship opportunities, employers can prepare this population for advancement and help to retain them in the healthcare industry (Truit & Snyder, 2020). Having a diverse racial representation in healthcare is important not only for individuals employed in the field, but for the patients who receive care in the systems as well (Iheduru, 2020).

The findings of this study contribute to the knowledge base on the relationship between lack of good leadership and lack of advancement opportunities and leaving the nursing profession, particularly for African American female nurses. The addition of this information to this limited area of study may be beneficial to research in this area. This research has potential implications for positive social change because the findings bring attention to the need for more mentor programs and more racially diverse leadership within the field of nursing. The creation of more culturally responsive and collaborative mentorship programs within employment settings is important to the continued development of a more diverse workforce (Truit & Snyder, 2020). The development of positive LMX relationships with African American female nurses can improve recruitment and retention of African American women in the nursing profession. The addition of this population could have positive implications in better patient care and health outcomes for the African American patient population.

This study demonstrates a positive relationship between the variables; however, further research is needed. Through the literature review, qualitative studies regarding African American nurses' perceptions of leadership and advancement opportunities were identified; however, there was minimal quantitative literature available. This area of study could benefit from primary quantitative research conducted to study the lack of African American female nurses in leadership roles. Research in this area could support the findings in this study through explanation of the reasons for lack of advancement opportunity and lack of good leadership. Healthcare organizations, educational facilities,

and doctoral students can use the knowledge from this study to conduct further studies on the lack of advancement opportunities and the lack of good leadership.

Conclusion

In this study, I examined the relationship between lack of advancement opportunities and lack of good management and leaving the nursing profession among African American female nurses. Positive leader–member relationships can have a positive effect on the retention of this population in the nursing profession. The development of mentor programs and improved advancement pathways for African American female nurses is necessary to correct the deficit in the representation of African American female nurses in leadership roles and to provide more diversity in nursing leadership.

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