Communicating in a culturally diverse workforce

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Communicating in a culturally diverse workforce

By Karen Fowler, PhD, RN

As the Latino population continues to grow in the US, the need for a culturally diverse workforce heightens. The current RN workforce doesn’t reflect the increasing diversity of the population. Demands on nurse leaders include the ability to retain a skilled, engaged, and diverse staff. The leader’s communication style directly influences the nurse leader-RN relationship, coordination of work, and RN satisfaction with the work environment. Ensuring that nurse leaders have competence in communication includes analysis and development of targeted training plans. Investment in targeted training plans will enhance leader communication competence and position the organization for success in an increasingly diverse environment.

The turnover cycle of hiring, training, and later replacing the same RN is counter to maintaining an engaged nursing workforce. Nurse leaders are at the frontline of efforts aimed at retaining and engaging RNs. The nurse leader plays a key role in retention by positively influencing the work environment, utilizing effective communication skills, and successfully forming relationships with culturally diverse RNs. The social relationship component between nurse leaders and RNs relies on the leader’s level of communication competence to link management functions to organizational goals.

This descriptive correlational study collected data using a survey tool and retrospective hospital turnover and retention statistics to investigate the impact of nurse leader communication on RN turnover, retention, and job engagement. Respondents consisted of 247 RNs in one of two acute care hospitals located 25 miles apart on the border between the US and Mexico, with a population that’s 82.27% Latino. There’s an underrepresentation of research on Latinos in the nursing profession. The demographic makeup of this study provides implications for a diverse workforce setting.

Theoretical framework
Investigating the relationship between nurse leader communication competence and turnover, retention, and engagement of a culturally diverse staff can provide insight into critical concepts for nursing management training. The literature is replete with studies on turnover and engagement, but few studies explore the nurse leader’s role in a diverse cultural setting.

Gittell’s theory of relational coordination includes a description of how coordination of work supports frontline workers. Relational coordination is a two-dimensional concept with a relational component and a communication component. Initially, Gittell applied the concept of relational coordination to the flight industry, where it demonstrated improvement in the quality of flight departures related to being on time, customer satisfaction, and baggage handling. Subsequent studies showed the possibility of translating the theory for use with other service-related teams, such as in healthcare.

Components of this theory and the concept of engagement—an internal and persistent state of motivation and satisfaction tied to an individual’s appraisal of the difference between expected and actual outcomes—provided a foundation for investigation of nurse leader communication in a culturally diverse workforce.

Methods
The research survey consisted of two established instruments: the Supervisor Leadership and...
Communication Inventory (SLCI) and the Utrecht Work Engagement Scale (UWES). Both instruments have demonstrated reliability and validity from previous research. Demographic data were also a component of the survey tool (age, gender, ethnicity, tenure, and shift worked). Collection of ethnicity data provided descriptive information about the unique characteristics of the participants. Aggregation of data occurred through identification of the nurses’ work unit and the correlating nurse leader who had accountability for that unit (as determined by the organizational chart).

The 53-item SCLI consists of questions related to communication, supervisor leadership, employee behavior, and organizational outcomes. It codes scores into one of three zones: red, yellow, or green. This coding ranks leader communication based on an average of the Likert-scale items. Leaders in the green zone communicate proactively, providing meaningful feedback and effective mentoring. Yellow zone communication is highlighted by misaligned objectives, firefighting of issues, and ineffective explanations, whereas red zone communication is one-way, micromanaged, and task-based.

The UWES uses a 7-point Likert-scale to measure the three subscales of RN engagement: vigor, dedication, and absorption. Categorizing engagement is done at five levels: very high, high, average, low, and very low. Vigor is described as high levels of energy, resilience, willingness to invest effort, and persistence; absorption is feelings of happy immersion in work; and dedication is a sense of pride related to work, feelings of significance derived from work, and workers’ indications that the work is inspirational and challenging.

**Analysis**

The surveys from the 247 RNs were linked to 13 nurse leaders who were in the nurses’ direct chain of command. The data were analyzed for turnover, retention, nurse leader communication competence, leadership characteristics, and engagement.

The percentage of male RNs participating in the survey was 19%. The largest age group was 25 to 29 and the largest tenure grouping was 0 to 5 years. Demographic data collected included ethnicity as reported by the participants. As expected, the number of Latino nurses participating in the survey was high at 65.5%.

Turnover and retention data were analyzed by nursing unit, with delineation by nurse leader. (See Table 1.) The mean retention rate for departments that reported to the 13 nurse leaders was 80.8%. The range of turnover by leader varied from 0% to a high of 60%. Retention rates ranged from a low of 64.3% to an ideal retention rate of 100%.

The lowest scoring category on the SCLI was organizational outcomes, followed closely by the leadership category. The lowest single mean score on a question was from the employee behavior category: “Employees adapt to feedback from their supervisors.” The highest single scoring item was in the communication section: “Employees receive formal feedback.”

![Figure 1: Nurse leader communication](image-url)
includes an analysis of leader communication score averages for each of the nurse leaders. Of the 13 nurse leaders included in the analysis, 7.7% were communicating from the red zone, 53.8% from the yellow zone, and 38.5% from the green zone.

Table 2 displays the relationships between the groups of variables measured. RN engagement correlates positively with all variables measured by the SLCI (supervisor communication, supervisor leadership, employee behavior, and organizational outcomes). The analysis demonstrates medium strengths of association between job engagement and supervisor communication skill ($r = .464$, $P < .001$), supervisor leadership ($r = .394$, $P < .001$), and employee behavior ($r = .315$, $P < .001$). The strength of the association between job engagement and organizational outcomes was high ($r = .60$, $P < .001$). There’s a positive relationship, indicating that higher supervisor communication/leadership scores and employee behavior scores lead to higher organizational outcomes scores.

The lowest scoring question on the UWES was an absorption question: “I get carried away when I’m at work” ($M = 3.41$). The dedication question “I’m proud of the work I do” had the highest mean score ($M = 5.27$). The survey participants rated average for both vigor and absorption. The respondents scored high on dedication. Figure 2 lists engagement scores (an average of vigor, dedication, and absorption) by nurse leader. Nursing staff members reporting to leader 2 had the highest engagement scores. The leader with the least engaged staff identified by lowest mean score on the UWES was leader 6, with a mean score of 3.47 and a standard deviation of .68.

Discussion
Nursing management is a people-oriented profession that must respond to rapid changes in technology, policy, healthcare infrastructure, and consumer expectations while maintaining high-quality care. Successful hospitals adapt to rapid changes through retaining a highly skilled and engaged nursing workforce. Nurse leaders hold a key role in attracting new nurses and face challenges in retaining nurses. Hospitals remain the highest employer of nurses at 61% of the total workforce.12

<table>
<thead>
<tr>
<th>Scale</th>
<th>1</th>
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<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
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</thead>
<tbody>
<tr>
<td>1. Supervisor communication skill</td>
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<td>–</td>
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<tr>
<td>2. Staff turnover ($r$)</td>
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<td>–</td>
<td>–</td>
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<td>($P$)</td>
<td>.721</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
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<td>3. Staff retention ($r$)</td>
<td>–0.48</td>
<td>–0.582**</td>
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<td>($P$)</td>
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<tr>
<td>4. Job engagement ($r$)</td>
<td>.464**</td>
<td>–0.90</td>
<td>–0.029</td>
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<td>–</td>
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<td>($P$)</td>
<td>.549**</td>
<td>.000*</td>
<td>.449</td>
<td>.918</td>
<td>.000*</td>
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<td>–</td>
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<tr>
<td>5. Supervisor leadership ($r$)</td>
<td>.843**</td>
<td>–0.057</td>
<td>.008</td>
<td>.394**</td>
<td>–</td>
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<td>($P$)</td>
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<td>6. Employee behavior ($r$)</td>
<td>.499**</td>
<td>–0.91</td>
<td>–0.059</td>
<td>.315**</td>
<td>.470**</td>
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<td>($P$)</td>
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<tr>
<td>7. Organizational outcomes ($r$)</td>
<td>.596**</td>
<td>.580**</td>
<td>–0.082</td>
<td>.491**</td>
<td>.566**</td>
<td>.696**</td>
<td>–</td>
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<td>($P$)</td>
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Note: **Correlation is significant at the .01 level (two-tailed); *P < .001 (two-tailed).
The combination of an aging workforce, physically demanding work, a complex work environment, and unattractive work schedules makes nurse retention difficult in the hospital setting. For hospitals to be successful, nurse leaders need to be proficient in communication and building relationships with RNs. Ensuring provision of quality care in an operation that functions 24/7 with a significant portion of time without the nurse leader on site poses leadership and communication challenges. As the population becomes more diverse, nurse leaders must adapt communication strategies to work with a diverse group of nurses.

The leader’s role in developing and promoting engaged RNs lies primarily in his or her ability to form professional and social relationships with staff. Building relationships requires communication, and perceptions of leader support are dependent on the type, frequency, and accuracy of communication. In addition, the leader’s ability to communicate effectively, linking the organization’s vision, mission, and goals to staff members’ work, promotes engagement. Figure 3 illustrates the relationship between communication competence and engagement. The higher the leader’s communication competence scores, the higher the RNs scored on the engagement scale.

Data analysis also showed that leadership was positively correlated with job engagement \( r = .394, P < .001 \). This indicates an association between higher leadership scores and higher RN engagement. Employee behavior was also linked to job engagement \( r = .315, P < .001 \). The data demonstrated an association between positive employee behaviors and more engaged RNs. The final variable measured was organizational outcomes \( r = .491, P < .001 \). The correlation was large, indicating an association between positive organizational outcomes and RN engagement.

The findings didn’t indicate a strong relationship between leader communication and turnover/retention. A possible reason for this is the uniqueness of the population studied. The study location houses the second largest military base in the US. The hospitals employ family members of military personnel and, therefore, turnover may be associated with changes in duty station.

The scope of this study is applicable to the current population. The study wasn’t a replication of a previous study and its generalizability is limited. The study population was culturally unique; the research offers information on the ethnicity of RNs in a border city. These factors limit the generalizability of the findings.

**Nursing leadership recommendations**

Taking into consideration that leader communication competence and RN engagement are positively correlated, recommendations consist of a three-pronged strategy. First, organizations need to evaluate their current leaders’ communication competence by asking staff. Often, senior administrators have a different view of nurse leaders than the nurse leaders’ direct reports. A linear approach to leader performance ratings and competence is ineffective. Even the 360-degree approach doesn’t always provide the clarity needed to evaluate a nurse leader’s communication skills.
Nursing staff members should be considered major stakeholders when evaluating the communication and leadership style of their nurse leaders.

leaders, which must include enhanced diversity training. Communication skills can be improved, taught, and mentored. Research has identified a positive relationship between leader motivating language and employee satisfaction, perceived leader communication competence, and employee perceptions of leadership effectiveness.15

Third, nurse leaders should build leadership capacity through training to devise purposeful activities focused on developing engaged employees. These activities must be strategic and include planned activities for a diverse workforce. Research on diverse workgroups is sparse. In a study among Spanish nurses, social resources were found to impact burnout and engagement.16 Social resources, values, and personal meaningfulness vary based on culture. To foster engagement, leadership views on a healthy work environment need to align with staff views.

Engagement is essential
The role of the nurse leader in promoting a positive work environment to increase staff engagement will become increasingly important for organizational success. This study supports an association between leadership communication competence and RN engagement. However, more research is needed on the diverse nursing workforce. Latinos are the fastest growing ethnic group. Although the current number of Latino RNs is proportionately small, this number is expected to grow, highlighting the need for studies focused on Latino RNs.17

High turnover, low retention rates, and an unengaged workforce remain a concern for the nursing profession. Increasing nurse compensation, improving benefits, and offering other financial incentives don’t always keep staff engaged. However, investing in nurse leaders through training and development may have a direct impact on retaining more engaged RNs. Improving leadership skills in supervisor communication enhances RN engagement, potentially improving satisfaction and the work environment. NM

REFERENCES

Karen Fowler is a clinical associate faculty member at the University of Texas at El Paso.

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