TITLE
The Perceived Leadership Characteristics, Behaviors, and Self-Esteem: Conducting Your Nursing Leadership Orchestra as a Hispanic Nurse

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OBJECTIVE
The purposes of this study were to investigate the perceptions of the leadership characteristics and behaviors of Hispanic nurses, as well as to evaluate Hispanic nurses’ self-esteem.

METHODOLOGY
Acceptance for participants in the study was based on an understanding that they were of Hispanic origin, a licensed registered nurse in the continental United States or Puerto Rico, able to read and comprehend English, and had passed the nursing licensing exam. Participants were recruited from the National Association of Hispanic Nurses (NAHN) using an advertisement on Facebook; in addition, emails were sent through chapter presidents of NAHN to local chapter members for additional recruitment. The primary investigator for this study also distributed flyers at various meetings of Hispanic nurses. In total, 193 people completed the Leadership Practices Inventory, the Multi-Factor Leadership Questionnaire (Avolio & Bass, 2004), the Rosenberg Self-Esteem Scale (Rosenberg, 1965). The typical respondent was female (87%), between 30-40 years of age (37%), either Puerto Rican (31%) or Mexican (27%) heritage, with a baccalaureate degree (47%), staff nurse (43%), and employed full-time (89%). Internal reliability (Cronbach alpha) coefficients in this study were: .78 Model, .88 Inspire, .83 Challenge, .74 Enable, and .83 Encourage.

KEY FINDINGS
Enable was the leadership practices most frequently reported, followed by Encourage and Model, then Inspire and Challenge. All five leadership practices were significantly correlated with the self-esteem of Hispanic nurses.

A high, significant correlation between nine out of the twelve subscales in the Multifactor Leadership Questionnaire and all the subscales of the Leadership Practices Inventory was found. There was a negative correlation on every scale of the Leadership Practices Inventory to the subscales Management-by-Exception-Passive and Laissez Faire of the Multifactor Leadership Questionnaire, which are two behaviors that are needed for leadership. All the correlations between the five leadership practices and the Outcomes of Leadership scales on the MLQ (extra effort, effectiveness, and satisfaction with leadership, were significant and high.
ANOVA was used to assess whether any of the five leadership practices were statistically associated with the demographic variables:

MODEL: The results of the ANOVA found no statistical differences among the following demographic variables: gender, Hispanic origin, number of years since graduating nursing school, highest level of education, employment status, if they have held a leadership position; president, vice president, secretary, treasurer, director at large, or other; number of years in leadership, number of years since taking the RN licensing exam, state of current practice, and how did they hear about this study. There were significant correlations in relationship to age and current job title.

INSPIRE: The results of the ANOVA found no statistical differences among the variables; gender, Hispanic origin, employment status, the state they currently practice in, and how they learned about this study. There were significant correlations in relationship to the following demographic variables: age, number of years since graduating nursing school, current job title, if they have held a leadership position, if they have held the leadership position of president, if they held the position of vice president, they have not held a leadership position, number of years in leadership, and number of years since taking the RN licensing exam.

CHALLENGE: The results of the ANOVA found no statistical differences among the following demographic variables; gender, Hispanic origin, employment status, if they have held the leadership position of vice president, secretary, treasurer, or other, state they currently practice in, and how they learned about the study. There was a significant correlation in relationship to the following demographic variables: age, number of years since graduating nursing school, highest level of education, current job title, if they have held a leadership position, if they have held the position of president, if they have held the position of director at large, if they have not held a leadership position, number of years in a leadership position, and number of years since taking the RN licensing exam.

ENABLE: The results of the ANOVA found no statistical differences among the following variables; gender, age, Hispanic origin, number of years since graduating nursing school, highest level of education, if they have held a leadership position, if they have held the position of vice president, secretary, treasurer, director at large, or other; if they have never held a leadership position, number of years in leadership, number of years since taking the RN licensing exam, and how they learned about this study. There were significant correlations in relationship to current job title, if they have held the leadership position of president, and the state they currently practice in.

ENCOURAGE: The results of the ANOVA found no statistical differences among the following demographic variables; gender, Hispanic origin, number of years since graduating nursing school, highest level of education, current job title, employment
status, if they have held a leadership position; vice president, secretary, treasurer, director at large, or other; number of years in leadership, number of years since taking the RN licensing exam, state of current practice, and how did they hear about this study. There were significant correlations in relationship to age, and if they held the leadership position of president.

The author concludes:

From this study, it can be concluded that Hispanic nurses perceive leadership characteristics the same way as nurses who are in nursing leadership positions, and yet most were staff nurses. Hispanic nurses have the characteristics needed to make a strong leader. It can be assumed that Hispanic nurses can be strong transformational leaders if they have are given the appropriate guidance, development, and mentoring (p. 125).

Many of the characteristics and behaviors required to be a transformational leader are rooted in the Hispanic culture. Moreover, this study seems to have verified that those cultural norms translated to the types of leadership characteristics that nurses wanted to see in themselves and others. The next step is to nurture those existing characteristics and behaviors in order to have the next generation of Hispanic nurse leaders (p. 133).