



Leadership Strategies in resolving communication challenges among Internationally Educated Nurses: A Literature Review

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Abstract:

Communication and leadership are critical aspects of nursing, particularly among international educated nurses (IEN) who bring diverse cultural backgrounds, experiences, and communication skills and styles in healthcare system. IENs faces challenges related to language proficiency and effective communication plays a vital role in ensuring patient safety and collaboration with other healthcare providers. Nurses' leaders and managers should support the IENs to improve their communication skills and to ensure that resolving conflict should be in culturally sensitive manner.

Aim: The study seeks to consolidate existing research on the leadership strategies employed by nurse leaders or managers to address communication challenges encountered by IENs.

Methods: A semi-systematic literature review included 12 articles in this study (n=8 qualitative studies, n=1 cross-sectional study, n=1 qualitative and exploratory, n=1, descriptive phenomenological study, and n=1 mixed method). Covidence was used as an online platform tool to facilitate the process of the review by two authors.

Results: The review yielded four different themes that points towards identified leadership strategies and interventions. This includes a. supportive, coaching, mentorship/supervisory, b. collaboration and strategic leadership strategy and c. transformational and d. transcultural and experiential leadership.

Conclusion: The literature review conducted revealed a combination of leadership strategies utilized by nursing leaders/managers to help resolve communication barriers experienced by IENs. Overall, there is no single, clearcut strategy identified to resolve these challenges. Instead, as a nurse manager or nurse leader, one must be able to tailor the strategies to be used according to the needs of the IENS.

Keywords:

Communication Challenges. Cultural Challenges,

Foreign nurses, Internationally Educated Nurses, Problems, Management, Leadership.

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Introduction

The shortage of nurses worldwide and the growing elderly population have made it necessary to increase the global nursing workforce, resulting in more multicultural workplaces in healthcare systems worldwide (World Health Organization, 2021; Boggs et al., 2023). Due to this rapid increase of global mobilization of foreign nurses to other countries, its effects in the healthcare system where internationally educated nurses (IEN) lived or employed are palpable. Most of these IENs moved to a country where the language and culture is different from their own. Language barrier is found as one of the most identified challenges that IENs face. When communication is not effective and can compromise not only the quality care of the patients, but it also strains the teamwork and relationship between professionals and colleagues (Gerchow et al., 2021).

In all areas of nursing, communication is a vital element. In a nurse-patient relationship, this includes prevention, treatment, rehabilitation, therapy, education, and health promotion (Kourkouta & Papathanasiou, 2014). Communication among co-workers is of equal importance. Research studies including Pung & Goh's (2016) included communication as one of the inevitable challenges faced by international nurses when migrating to a foreign country.

Wolcott et al. (2013) shows that nurses' managers reported that many of the local nurses have not been prepared for arrival of the IEN. There were conflicts and issues specifically with the communication, nursing roles and integration program. Workplaces should enhance cultural sensitivity to have a successful multicultural work environment (Wolcott et al., 2013).

Kamau et al. (2022) conducted an umbrella review and highlighted the significance role of nurse's managers in setting up a ward-level conducive environment, relationship of the colleagues, development of competence and build sociocultural environment (Kamau et al., 2022). According to Meuter et al. (2015), nurse supervisor and managers need to practice cultural competence in leading multicultural teams. However, there are limited studies on the necessary cultural competencies and leadership styles for managers in diverse healthcare environments (Meuter et al., 2015).

The purpose of this research is to synthesize the current research about leadership strategies used by nurse leaders or managers in resolving the communication challenges faced by internationally educated nurses (IEN). The study seeks to answer the questions:

- What strategies or leadership styles do nursing leaders or managers employ to resolve these issues with communication challenges with IENs?
- What are the specific strategies that work for IENs?

2 Background

The experience of nurse managers with the internationally educated nurses has major challenges in communication pattern, documentation, teamwork, supervision, and delegation of care. (Sherman, 2007). The balancing act between ensuring a conducive nursing work environment and safeguarding the quality of nursing care delivered by the multicultural health care teams is not an easy feat for modern health care leaders.

Internationally Educated Nurses (IEN) may face challenges in effective communication with their host country's residents. Differences in language and accents, communication styles and body language can impact the quality of care and create potential issues in relationships between healthcare workers and patients, especially when caring for older individuals with conditions like dementia and palliative care (Stone, 2016).

According to Sherman (2007), communication challenges extend beyond patient-health worker relationship. Language difference can lead to misunderstandings, hindering the execution of physician's orders and posing difficulties in nurses' critical thinking, particularly in acute situation (Sherman, 2007). Ho (2018) stated that in caring for patients or clients, more countries are using the patient-centred approach therefore communication plays a huge role in conducting this approach. Nurses also spend more hours with the patients or clients compared to the other members of the health care team. IEN encounter difficulties working in foreign countries as clinical communication are complex and it varies in different countries (Ho et al., 2018).

Multicultural working places have been increasing globally and due to diversity, this can be a challenging and can affect communication due to diverse socio-cultural background (Schenk et al., 2022). For example, Kamau et al. (2022) conducted a qualitative descriptive study of culturally and linguistically diverse nurse's working various health care settings in Finland. The results showed that culturally and linguistically diverse nurses faced cultural, ethnic, and linguistic challenges.

Cultural displacement, communication, language differences, feeling of outcast, difference in nursing practice, deskilling and discrimination are the obstacles in implementing proper

transition, ethical equality and integration among the foreign nurses who are working outside from their own country (Balante et.al, 2021). This is supported by the findings of Newton et al. (2012) study where cultural displacement is claimed to be rooted from communication and language differences, integration difficulties and differences in nursing practice (Sherman, 2007).

There are vast number of research studies conducted about nurse-patient communication in general, but few are about IENs and strategies to resolve communication challenges that they face. There is also a gap about what kind of leadership and strategies that support nurse managers in resolving communication barriers among internationally educated nurses. This is supported by studies of Kamau et.al. (2023), which claims that due to lack of formal leadership and management preparedness and limited leadership experience competencies, nurse managers having difficulty to support and manage the IENs (Kamau et.al., 2023). In 2007, Sherman study emphasized the need for nurse managers to develop leadership skills, especially in supporting IEN during their transition to a new workplace. However, not all nurse managers possess these skills. This study recommends that those supervising IENs should attend continuing education programs to enhance their leadership abilities, including coaching, mentoring, cultural competencies, and communication in leadership (Sherman, 2007).

2.1 Leadership strategies and styles

The person's ability to influence a group of individuals in the intent to achieve a common goal is defined as leadership (Andersen, 2016; Neuza & Patrícia, 2020; Torlak et al., 2021). Clinebell et al., (2013) stated that "Leadership is principally a relationship of influence between a leader and his or her followers with a commitment to a joint purpose".

However, leaders are not necessarily born with essential traits needed to become an effective leader. Recent studies show that leadership skills can be developed through training and experience. Leadership perspectives shifted from the Great Man and Trait theories which states that great leaders are born, to modern views of leadership such as situational, transactional, and transformational leadership (Day et al., 2014). Leaders can acquire the social skills, knowledge, and attitudes necessary for them to conform to social situations effectively and interact with followers properly. Andersen (2016) described what leaders do. It includes inspiring, encouraging, and acknowledging the team for the purpose of accomplishing set tasks and goals.

There is a variety of leadership styles that is compatible with a leader's traits and the nature of the task that can be used to gain support and approval from people inside the business (Bass & Bass, 2009). Leadership styles includes either transactional, focused on task performance and rewards, or transformational, inspiring, and leading by example (Kuhnert and Lewis, 1987). It may be authoritarian, laissez-faire, or democratic (Lewin et al., 1939). Goleman (2000) also proposed six leadership styles: coercive, authoritative, affiliative, democratic, pace setting, and coaching.

2.1.1 Transformational Leadership

Transformational leadership is defined as leaders' behaviours that affect followers by broadening and elevating their goals and providing them with confidence to perform beyond expectations specified in an implicit or explicit exchange agreement (Dvir et al., 2002). Stanko & Gibson (2009) noted that transformational leaders are seen to be effective in the multicultural team perspective because of their ability to promote shared team goals and strengthen followers' sense of belonging to the team while acknowledging diverse cultural perspectives. It is a style of leadership that inspires followers to overcome their self-interests by changing their morale, ideas, interests, and values, and motivates them to perform better by pursuing collective goals (Bass et al., 2003).

To achieve this, transformational leaders employ four integrated leadership qualities, each expressed through different sets of behaviours including idealized influence, inspirational motivation, individualized consideration, and intellectual stimulation. Transformational leadership behaviours promote team processes that help individual and team performance, such as trust, communication, information elaboration, and team identification (Kearney & Gerbert, 2009). Thus, by adopting these behaviours, transformational leaders can accomplish a greater emphasis on collective vision and purpose (Schaubroeck et al., 2007).

2.1.2 Experiential leadership and Social Learning Theory

A theoretical framework for learning leadership by experience was developed by Guthrie and Jones (2012). It argued that "concrete experience is 'learning by encounter,' this means learning from specific experiences, relating to different people and their experiences, or being sensitive to feelings and people". Samantha Magee (2023) explained that experiential

leadership is an integrated framework which is based directly from the theory of experiential learning, this allows for supervisors to learn in workplace reality, this inspired them to tailor programs to reflect current workplace experiences lived by the individual and the organization.

Social learning theory by Albert Bandura (1978) suggested that people identify themselves with whom they think of as “ideal” and follow the same behaviour they have observed. This can prove useful when leading IENS, by cultivating good relationships and leading by example.

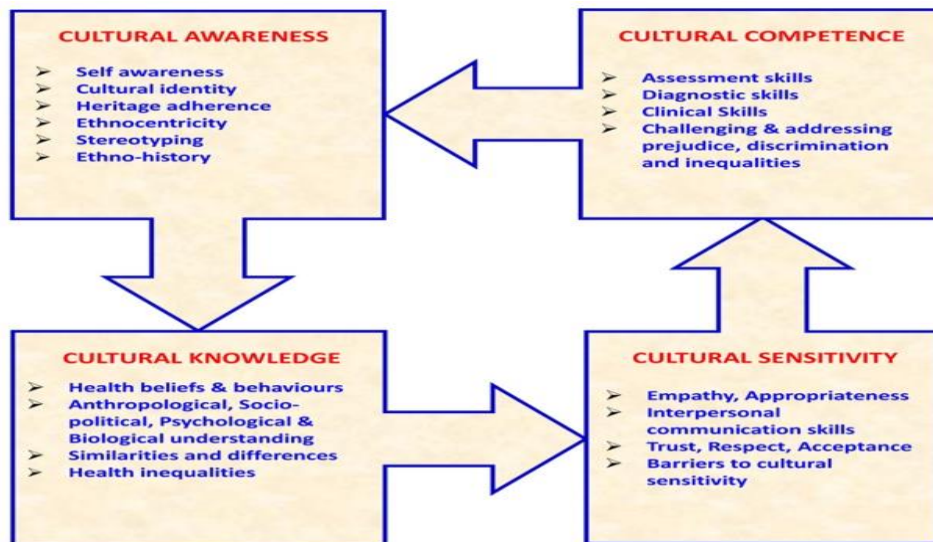
2.2 The Papadopoulos, Tilki and Taylor Model for Developing Cultural Competence

Communication is a fundamental part of a culture, and understanding the interplay between the communication and culture is important for effective cross-cultural interaction when communicating from basic level to professional level. Communication will not be solely alone, as it will always be a part of culture. The Papadopoulos, Tilki, and Taylor (PTT) model is well-known framework in understanding cultural competence especially in nursing and healthcare. This model developed to magnify the meaning of cultural competence and how to apply in healthcare practice. The PTT model emphasizes the holistic approach to cultural competence, considering not only knowledge but also awareness, sensitivity, and practical application. This model can be easily adaptable worldwide because its design is suitable for various cultural contexts. It is valuable for healthcare professionals in diverse settings, promoting continuous learning and improvement. It acknowledges that cultural competence is a dynamic and evolving process (Papadopoulos et al., 2016).

The PTT model consists of four stages, the first stage cultural awareness which focuses on self-awareness, culturally identity, heritage adherence and ethnohistory. This stage focuses on personal values, beliefs, and practice. The second stage is the cultural knowledge which explains about the meaningful contact with other ethnic group which help to enhance their health beliefs and behaviours and to broaden their understanding in solving the problems that may arise. The third stage is cultural sensitivity. It is about how you see people as a professional healthcare provider. This should involve an equal partnership such as trust, acceptance, and respect. The fourth stage is cultural competence which requires the synthesis and application of the three earlier stages. On this stage, it focuses on the practical skills but it important to

develop the skill in recognizing and challenges in racism (Papadopoulos et al., 2016). Figure one below is the graphic design of four stages of the PTT model.

Figure 1 The Papadopoulos, Tikki and Taylor model of cultural competence (Papadopoulos et al., 2016).



2.3 Communication

Communication plays a fundamental role in nursing. As a member of a multi-professional team, the nurse needs to be able to speak clearly and accurately, as miscommunication can lead to dangerous misunderstandings like misinterpretation of clinical data or decisions. Linguistic competence is a requirement since decision-making is based on discussions and consultations between colleagues as well as the patient or patient’s kin. (Flin et al., 2013, Crawford et.al., 2017). Working in a hospital setting can deprive communication as there a lot of interference both internal and external where simple conversation can result to conflicts and misunderstandings. Duun and Goodnight theory explains the communication process.

Dunn and Goodnight (2019) defined communication as a simultaneously process of sending, receiving, and understanding the message between two people or group of people. Effective communication takes a lot of energy and work. There are several factors that contribute to effective communication such as ability to listen, both verbal and non-verbal communication skills, perception of understanding the message and ability to analyse the receiver of the message. People communicate in a unique way as people have different ethnicity, race, gender,

socio-economic status, age, values, and beliefs (Dunn et.al., 2019). Figure two is the illustration of the communication process.

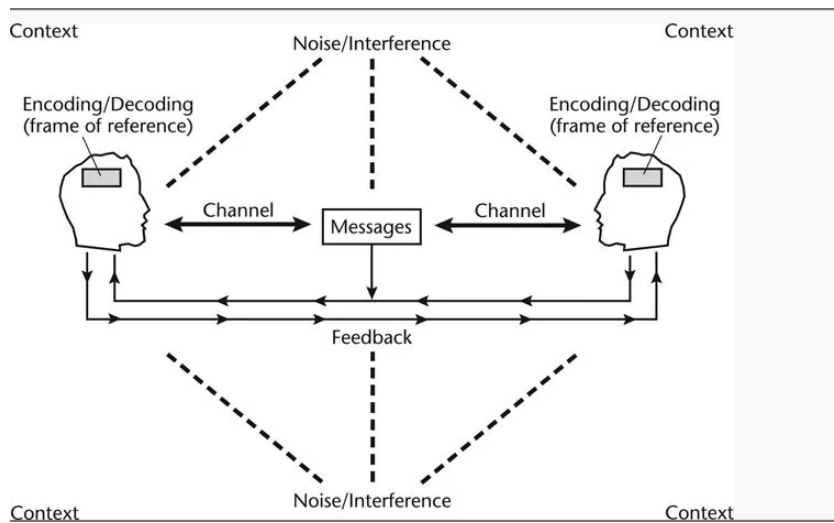


Figure 2. Communication Process- Communication: Embracing differences D. Dunn, Lisa Goodnight (Dunn et al. 2020 pp. 8-28).

According to Dunn and Goodnight (2019), communication involves several key components. People are central to the process, and the message convey thoughts or feelings. Encoding translates these thoughts into symbols for meaning, and decoding interprets the symbol for the receiver. Channels, like expressions or voices, convey messages, while feedback is crucial for understanding interpretations. The context is about physical settings and psychological climate, plays a role and noise such as external stimuli or internal thoughts can interfere. It is essential to have a clear feedback, as different frameworks can lead to confusion (Dunn et.al., 2019).

The research aims to yield insights into effective leadership strategies and styles for resolving communication challenges among internationally educated nurses (IENs) in culturally and linguistically diverse working environments. Through this research, a better understanding of effective leadership approaches in overcoming communication barriers among IENs can be gained. As managers themselves, the authors hope to enhance their understanding of leadership in supporting IENs and apply these findings to their own managerial roles.

3 Research Aim and Questions

The aim of this research is to synthesize the current research about leadership strategies and interventions used by nurse leaders or managers in resolving the communication challenges faced by internationally educated nurses (IEN).

- What strategies or leadership styles do nursing leaders or managers employ to resolve these issues with communication challenges with IENs?
- What is the specific strategy that works solely for IENs?

4 Methods

The authors acknowledge the significance of thoroughly considering prior relevant literature as essential for all research studies. In this research, the authors are both in consensus that literature review is the appropriate methodological tool to provide answers for our research question.

In general, a literature review can be referred to as a “more or less” systematic way of collecting and synthesizing earlier research (Baumeister & Leary, 1997; Tranfield, Denyer, & Smart, 2003). Snyder (2019) stated that literature reviews can be useful when the aim is to give an overview of a certain issue or research problem and or evaluate the state of knowledge on a particular topic. However, depending on the goal, different approaches to conducting a literature review may vary. Since this study aims to synthesize available information, provide an overview on a research area, and track development over time, the authors have decided to conduct a semi-systematic review.

According to Wong et al. (2013), a semi-systematic review aims to identify and understand all possible and relevant research traditions that have implications for the studied topics and to synthesize these using meta-narratives instead of using effect size. In a semi-systematic approach to literature review, a broader topic that has been conceptualized differently, within diverse disciplines, can hinder a full systematic review process (Wong et al., 2013).

In this case, the roles of leaders or managers in resolving communication barriers of internationally educated nurses and interventions employed to address these challenges from 2013-2023. To review all possible articles that could be relevant to this topic is simply not

plausible, therefore a different strategy was developed. In a semi-systematic literature review, search strategy may or may not be systematic. Nevertheless, this approach dictates that the research process should be transparent and should have developed a strategy that allows for the reader to evaluate whether the arguments for the judgements were made reasonably made, both for the chosen topic and from a methodological perspective (Snyder, 2013). Considering this, the authors agreed on a set of inclusion and exclusion criteria in identifying and critically appraising which articles will be included in the review.

A thematic or content analysis is used to synthesize findings in this review. This is a technique used to define, analyse, and report patterns in the form of themes within a text (Braun & Clarke, 2006). This type of analysis for a semi-systematic review facilitates detection of themes, theoretical perspectives, or common issues within a specific research discipline or method or for identifying components of a theoretical concept as indicated in the studies of Ward, House & Hammer (2009) in their article Developing a framework for transferring knowledge into action: A thematic analysis of the literature.

5 Data Collection and Analysis

The authors conducted literature review using online databases CINAHL, PubMed, Google Scholar, and Elsevier/Science direct, as well as few articles cross-referenced from retrieved articles to gather relevant articles. The authors did not utilize any specific terms for study design or outcomes of studies.

Danish and Finish studies were excluded to broaden the search of studies. The studies that are included in the review are from 2013-2023.

BOOLEAN terms were used in CINAHL and PubMed, while complete sentences were used in Google scholar and Science Direct as advanced search were unavailable. The table displayed terms and sentences used during the search process.

Data base	Terms or Sentence
CINAHL	Communicat* challeng* AND strateg* OR manag* AND foreign nurs* OR internationally educated nurses

Elsevier/Science Direct	Management strategies in communication challenges among foreign nurses
PUBMED	communicat* challeng* AND strateg* AND manag* AND foreign nurs*
Google scholar	Leadership strategies in communication challenges among foreign nurses

Table 1. Data bases and terms and sentence in searching literature review.

The inclusions criteria for the articles were: 1) qualitative and quantitative studies that were conducted between the years 2013-2023, 2) articles that are focused on foreign nurses and internationally educated nurses, 3) articles that focused on leadership strategies and management for nurse managers, 4) studies describing direct and indirect effects of leadership strategies and management on internationally educated nurses or foreign nurses, 5) articles in the English language.

The exclusion criteria are as follows: 1) articles that are focused on physician, laboratory employees and other medical staff, 2) qualitative and quantitative studies that were conducted before 2013, 3) grey literature 4) non-English articles 5) other literature review 6) non full access review.

To streamline the literature review, we utilized Covidence as our platform for this study. Covidence is an online software that simplifies the process of screening and extracting data. It facilitated a systematic and efficient approach to handling the extensive pool of literature identified through our strategy search. Covidence allows authors to import, screening citations, full text articles, resolving conflicts, extracting data with different customized forms, exporting different formats, and tracking the data in PRISMA in real time (Cleo et al., 2019. Kellermeyer et al., 2018, Tello, 2021).

The authors agreed to a flexible working schedule with an identified goal per week, as well as this platform to be able to use their time more efficiently as they are both working full time with changing time shifts and different living location and time. One author living in Denmark and the other author resides in Finland. This also allows the authors to focus on the content rather than the logistical challenges.

The authors imported an enormous number of articles (n=787) to the covidence platform in RIS format and once the articles had been uploaded, the platform automatically removed all the duplicates (n=412), and one duplicate was identified manually.

Once the articles were identified, the process of title and abstract screening followed. This process is aimed to remove the studies not related to our topic using the inclusion and exclusion criteria to determine their relevance to our research question. The authors screened (n=374) articles independently. During the screening, both authors had access to essential information such as titles, authors, DOI and abstracts. There were three buttons to choose from no, maybe, yes, by selecting one of these buttons, this gives a straightforward decision-making process and allowed authors to advance and speed up to the next articles, 286 articles were excluded after this phase. This design eliminates the need to navigate through large spreadsheets, thus it increases efficiency and lessens frustration when coordinating with the second reviewer. After the individual assessment, the authors conferred to resolve possible conflicts by discussing through an online platform (Microsoft Teams and online messaging system). This resulted in (= 88) articles sought for retrieval and eligibility.

In the comprehensive examination of relevant literature, both authors individually conducted a thorough review of the full texts. To ensure a robust understanding, consensus was sought, and a total of (n= 32) articles were deemed essential for agreement between the authors. This consensus- building process was facilitated through online platforms, allowing the authors to collaboratively discuss and determine the inclusion of specific articles.

Following the consensus phase, as substantial number of articles, specifically (N=76) articles, were subsequently excluded from the review. This exclusion process suggests that the authors critically evaluated and filtered the literature, retaining those articles that were deemed most pertinent to the objectives and scopes of their study. The decision to exclude these articles likely reflects the authors' commitment to refining and focusing on their review on the most relevant and valuable contributions to their research. Most excluded articles were due to wrong indication (n=21), followed by wrong outcomes (n=20), then by wrong study design (n=16), wrong patient population (n=10) and intervention (n=10) also accounts for exclusion. One article (n=1) does not have a full text and is also excluded from the review. There were (n=12) articles that are eligible for extraction and for assessment.

During the extraction phase, the authors utilized a data extraction template in Covidence. The template covered study details such as ID, article title, authors, study location, aim, design, publication date, inclusion/exclusion criteria, participant recruitment method, total participants, problem, intervention, leadership strategies, and overall leadership strategies. Each author independently performed the extraction using the template. Following individual assessments, the authors reached a consensus for the final decision. Figure three illustrates the identification, screening, and extraction process for all articles in this study.

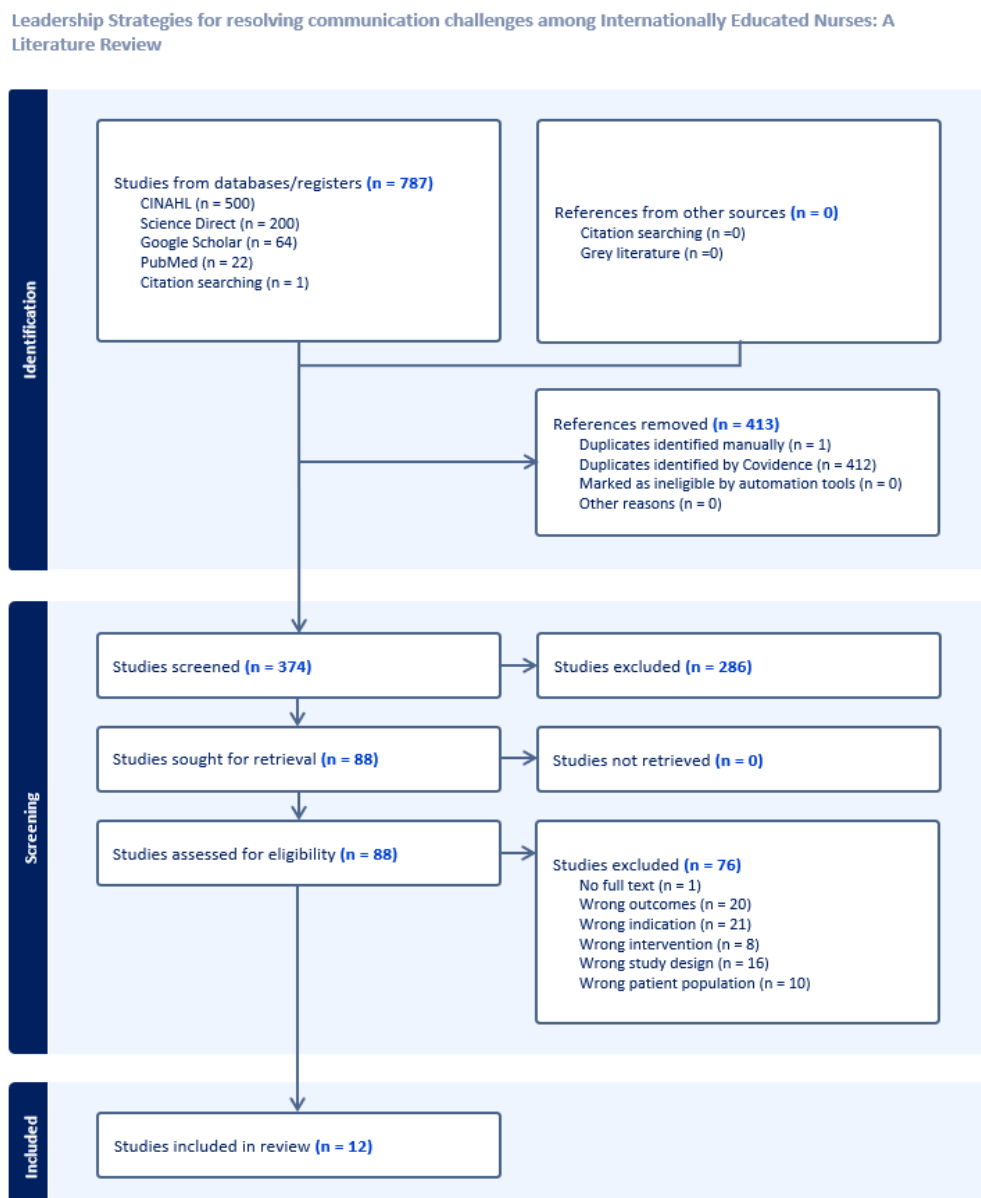


Figure 3. PRISMA Diagram

6 Results

The analysis of the 12 studies reveals different leadership strategies and interventions that were utilized in resolving communication challenges of IENs. Nurse leaders/managers play a fundamental role in choosing which leadership styles and interventions would best fit the team's needs with IENs.

Four different themes of leadership strategies/styles were identified:

Leadership strategies/styles
a. Supportive, Coaching, Mentorship/Supervise leadership strategies
b. Collaborative and Strategic leadership strategies
c. Transformational leadership strategies
d. Experiential and transcultural leadership strategies

Table 2. List of leadership strategies/styles.

The succeeding section describes the themes identified in the review and the articles where they appeared. The summary of the reviewed articles is shown in table three.

6.1 Supportive, Coaching and Mentorship/Supervise Leadership strategies.

According to Wolcott et al. (2013) and O'Callaghan et.al. (2018) who both conducted qualitative studies, buddy-system during mentorship program will support IENs to improve their language skills and ensuring effective communication with their patients, colleagues, and other healthcare professionals (Wolcott et al., 2013; O'Callaghan et al., 2018). Mentorship programs should be offered to IENs during the first period of their settlement and adaptation as language barriers are crucial during this stage. (O'Callaghan et. al., 2018).

Ramji (2016) and Lee et al. (2021), revealed on their qualitative studies that mentorship program supports social well-being of IENs such as the feeling of belongingness, feelings of not being alone, feelings of connection and establishing having safe space (Ramji., 2016; Lee et al., 2021). Though buddy-system mentorship intervention has been highlighted on these four qualitative studies, the impacts to IENs were different.

Role of a mentor is very valuable tool for fostering the development of competencies and building confidently IEN and according to Allen (2018) qualitative study, the nurse managers

should select mentors who possess good skills such as active listener, having a patience attitude, and accommodating as the goal of mentoring IENs should develop their self-confidence and nurture their knowledge about the culture of their workplace and their competencies (Allen, 2018).

Wolcott et al., (2013) mentioned on their qualitative research that the accent should make less focus in teaching IENs for better and effective communication and Alhamami (2020) qualitative research supported these intervention and revealed that different accent can cause language barriers and by using simple language in both in casual and professional conversation can reduced the effects of language barriers and internationally standardized medical terms will help both IENs and patients to achieve effective communication (Alhamami 2020; Wolcott et al., 2013). These two studies revealed that that the accent reduction intervention might still need to be addressed in the future because the two studies have been conducted seven years apart but there are still gaps over the years.

Supportive leaders or managers acknowledge the potential language challenges faced by IENs and they need to support IENs. According to Ramji (2016) nurse managers focus on the importance of language proficiency and must be confident in communicating (Ramji 2016). To achieve language proficiency, a training program is necessary (Hadziabdic et al., 2021; Ammentorp et al., 2021). In Hadziabdic et al., (2021) qualitative descriptive study concludes that bridging program or training program for IENs should be supported by the nurse managers and encourage IENs to attend the program, to have an effective encouragement and motivation the nurse managers allowed IENs to have a leave from their work (Hadziabdic et al., 2021). Meanwhile on Ammentorp et al., (2021) multiple case study reveals that training program or bridging program on communication should include the following methods such as role-playing, group discussion and supervision (Ammentorp et al., 2021).

Despite the different interventions that support IENs, there were two qualitative studies revealed that there was discrimination against IENs, therefore it was suggested that the nurse's manager should include anti-discrimination strategies in the workplace in resolving conflict associated with the language barriers as communication are part of cultures (O'Callaghan et al., 2018).

6.2 Collaborative Leadership strategies

In the study conducted by Al Achkar et al. (2021), the researchers brought to light a deficiency in professional networking and opportunities specifically tailored for IENs. This means that according to their findings, IENs face challenges or limitations in accessing or participating in professional networks within their field. This identification underscores a potential gap in the support and collaborative opportunities available to IENs within the professional community, shedding light on an aspect that may impact their integration and professional development in the healthcare sector (Al Achkar et al., 2021). This aligns with the findings from Alhamami (2020) qualitative study, which suggests a potential solution to the identified shortage of professional networking for IENs. Alhamami proposal centers on the idea that by increasing awareness of the positive impacts associated with multilingualism, there is the potential to positively influence the attitudes held by both IENs and local nurses.

The implication here is that a heightened understanding of the benefits of being multilingual could contribute to an improvement in the way IENs and local nurses perceive and engage with each other. Furthermore, it is proposed that this enhanced awareness has the potential to lay the groundwork for more effective collaboration between these two groups (Alhamami et al., 2020).

In summary of these two qualitative studies, Alhamami (2020) study complements the findings of Al Achkar et al. (2021) by offering a potential strategy for addressing the identified shortage in professional networking opportunities for IENs, emphasizing the role of awareness and collaboration in fostering a more supportive and inclusive healthcare environment (Al Achkar et al., 2021; Alhamami 2020). Though these two qualitative studies did not mention any specific role or strategy of nurse managers.

Awareness of communication styles is linked to one's cultural background (Wolcott et al., 2013). To grasp the connection between communication style and cultural background, it is crucial to focus on interactions between IENs and communities. This engagement can improve mutual understanding and familiarity, not only in terms of cultural aspects but also by enhancing IENs' awareness and involvement in delivering healthcare services with a positive impact (Hadziabdic et al., 2021; Al Achkar et al., 2021; Lee et al., 2021).

As outlined by Lee et al. (2021) qualitative study, IENs stand to gain substantial advantages through the implementation of a multiorganizational collaborative approach. The researchers propose the use of the Community Collaboration Employment Method (CCEM) as a framework for fostering collaboration across multiple organizations. This qualitative study advocates for the application of CCEM to enhance preparedness and resilience within the healthcare system (Lee et al., 2021).

The suggestion of multiorganizational collaborative approach implies that involving various organizations, likely different sectors, or domain within the healthcare system, is crucial for the effective integration and support of IENs. The CCEM, as introduced by Lee et al., (2021), serves as a structured framework for orchestrating this collaboration. By emphasizing preparedness and resilience, the CCEM framework aims to contribute to the development of a healthcare system that is not only better equipped to address the needs of IENs but also is more adaptable and robust in the face of various challenges. Overall, Lee et al. (2021) study advocates for a systematic, collaborative strategy to enhance the integration and success of internationally educated nurses in the healthcare workforce (Lee et al., 2021).

In the mixed methods study conducted by Meuter et al. (2015), the researchers utilized both qualitative and quantitative research approaches. Their study specifically delved into addressing the intricacies of language barriers in healthcare communication. The aim was to make valuable contributions to the design of language programs tailored for IENs. By employing a mixed method approach, Meuter et al. (2015) likely sought a comprehensive understanding of the multifaceted issues surrounding language barriers in healthcare (Meuter et al., 2015).

The implications of Meuter et al., (2015) findings suggest that an effective language program, designed based on insights gained from both qualitative and quantitative perspectives, can play a crucial role in supporting clinicians. In this context, the support extends to clinicians who are tasked with facilitating effective learning methods for IENs. The integration of both research methods likely allowed Meuter et al., (2015) to not only uncover qualitative nuances but also quantify aspects of language barriers, providing a more holistic foundation for the development of the targeted language programs to enhance communication and learning within the healthcare setting (Meuter et al., 2015).

Effective collaboration among decision-makers and authorities has a significant influence on shaping language program policies for IENs. Additionally, it is essential to take account financial support, including scholarship allowances, or fees coverage and examinations for IENs (Hadziabdic et al., 2021; Al Achkar et al., 2021).

6.3 Transformational Leadership strategies

Communication is a key element in providing high-quality health care services (Norouzinia et al., 2015). Transformational leadership strategies promote team processes that facilitate individual and team performance, such as trust, communication, information elaboration, and team identification (Kearney & Gerbert, 2009).

Communication barriers perceived by nurses and patients, a cross-sectional study, recommended that nurses should be effectively trained in communication skills. In order to do so, interventions such as motivating nurses to provide high-quality health care services, holding periodic communication skills workshops, holding nursing quality assurance committees, and most importantly changing attitudes of nursing managers and administrators towards a holistic approach rather than offering task-based services were applied to resolve not only communication barriers but facilitate IENs integration to the work community as well.

6.4 Experiential and Transcultural Leadership strategies

Experiential and transcultural leadership strategies emerged from the qualitative studies conducted by Hadziabdic et al. (2021) in Experiences of Nurses educated outside the European Union of a Swedish Bridging Program and the Program's Role in their Integration into the Nursing Profession: A Qualitative Study, and International Portuguese Nurse Leaders' Insights for Multicultural Nursing (Teixeira et al., 2022). In Teixeira et al. (2022) study, aimed to identify nurse managers' interventions that allow for conducive nursing work environments for multicultural nursing teams. This study revealed assumptions that points toward transcultural and experiential leadership strategies.

In a multicultural work environment, there is a tendency for professionals who share the same mother tongue to group together, this in return causes situations of bullying and discrimination towards other nationalities. Non-verbal communication can complicate communication between different nationalities. To address these challenges, the need for the nurse manager to

identify these situations early was recommended, prohibition of the use of the mother tongue (if different from the local), assignment of representatives from diverse cultures to be cultural mediators, building teams with mixed nationalities and encouraging cultural mediation programs within the organizations were identified.

In cases of recurrent discriminatory behaviours, this should be considered in the performance appraisals of those practicing them. In addition to that, in order to improve the understanding of other nationalities' verbal and non-verbal language, nurse managers must develop their own communication skills and should be an example to their teams.

The nurse manager must always communicate in the official language of the organization; negotiate the use of the mother tongue outside the clinical area; and, instead of the integration being performed by a colleague of the same nationality, IENs must be assigned a preceptor of a different nationality to force communication in the language recommended by the organization. With the goal to improve positive communication between migrant healthcare workers and their patients, the need to learn the local language was underlined by, for instance, nurse managers, who should encourage and support staff participation in a language course. Sweden's bridging program and its role in the integration of nurses educated outside EU (Hadziabdic et al., 2021), shared the same identified strategies.

This study showed that language proficiency affected the performance of IENs in the bridging program, in clinical practice, and in passing the knowledge test for obtaining a nursing license in Sweden. Medical terminology, abbreviations and names of medication and equipment varied between countries, and these complicated learning the ropes of clinical work. Bridging programs in this context refers to a one-year course offered in universities in Sweden in accordance with Swedish law on Higher Education. It is designed for internationally educated nurses with a degree from a country outside the EU (European Union)/EES. The aim of these programs is to transfer and make use of knowledge and skills that have been obtained in countries outside the EU, i.e., the participants are able to augment their education to qualify for nursing work in Sweden. The bridging program includes different courses in nursing, pharmacology, and drug calculation, as well as learning and leadership. The clinical training components are carried out in primary care, municipal care, and nursing as well as in one of the specialties of medicine, surgery, or geriatrics.

After the bridging program, nurses educated outside the EU must pass a so-called knowledge test, which is in Swedish and examines areas such as laws and regulations for the health care sector as well as practical test showing clinical skill competence to be able to work as a registered nurse in Swedish health care (Hadziabdic et al., 2021).

Participants in this study regarded the clinical training program as a valued source of learning experience, both about the work and language, compared to the learning they get in classrooms.

Table 3. Summary of Reviewed Articles

Title/Author/Yr./Study Design	Aim of Study Participants (P)	Results Leadership strategy	Results Intervention
Integration of internationally educated nurses into the U.S. Workforce. DOI: 10.1097/01.NND.0000433145.43933.98 Krista Wolcott, MSN, RN, Suzanne Llamado, MSN, RN, Denise Mace, MSN, RN (2013) Study Design: Qualitative research	To explore the experiences of IENs and the nurse managers and educators working with them, to understand the issues, and to highlight potential solutions for addressing integration challenges. (P) 13	Supportive Leadership Strategy Collaborative	Mentorship -buddy system, accent reduction classes as a means of facilitating better buddy system, social support communication. ," Language regulation was found to be helpful, encouraging primarily English be spoken in patient Care areas.
International Portuguese Nurse Leaders' Insights for Multicultural Nursing. DOI: 10.3390/ijerph191912144 Gisela Teixeira, Pedro Lucas and Filomena Gaspar (2022) Study Design: Qualitative and	To identify nurse managers' interventions that improve favourable nursing work environments in multicultural nursing teams and culturally	Transcultural leadership	Nurse managers should develop communication skills to improve their understanding of other nationalities' verbal and non-verbal language and

<p>exploratory study</p>	<p>congruent care for patients, based on Portuguese nurse leaders' experience in international settings.</p> <p>(P) 5</p>		<p>should demonstrate examples of respect to their teams. Encouraging nurses to communicate in the official language recommended by the organization eliminates the possibility of later colleagues feeling uncomfortable or excluded in the work environment</p>
<p>Integrating Immigrant Health Professionals into the US Healthcare Workforce: Barriers and Solutions. https://doi.org/10.1007/s10903-023-01472-7</p> <p>Morhaf Al Achkar, Arati Dahal · Bianca K. Frogner Susan M. Skillman, Davis G. Patterson (2021)</p> <p>Study Design: Qualitative research</p>	<p>Explore systemic barriers that affect the career progression of health professionals immigrating to the U.S. who received their healthcare education abroad and practices for overcoming those barriers.</p> <p>(P) 13</p>	<p>Collaboration</p>	<p>Initiatives must engage both immigrant workers and their communities in determining appropriate solutions. -English language proficiency courses, and activities to increase immigrants' familiarity with U.S. culture in general and in healthcare.</p>
<p>Beyond Transition: Understanding Workplace Integration of Internationally Educated Nurses-A Qualitative Case Study/ http://dx.doi.org/10.20381/ruor-5883</p> <p>Zubeida Ramji, RN, MH Sc</p>	<p>To understand how IENs are integrated into workplaces beyond the transition phase in Ontario.</p> <p>(P) 28</p>	<p>Strategic management Mentorship Coaching Supportive</p>	<p>Knowing the local communities (consultation and engagement) Sharing good practice</p>

<p>(2015)</p> <p>Study Design: Qualitative research</p>			<p>Strategic framework</p> <p>Sound planning</p> <p>Managing expectations</p> <p>Local partnerships</p> <p>Monitoring</p> <p>Understanding the complexity of cultural nuances</p> <p>supports others development/ feedback</p>
<p>Multiorganizational Partnerships: A Mechanism for Increasing the Employment of Internationally Educated Nurses.</p> <p>DOI: 10.12927/cjnl.2021.26593</p> <p>Ruth Lee, RN, MScN, PhD, Daniela Beckford, RN, Livia Jakabne, RN, BScN, Lesley Hirst, RGN (UK), RN, MN, MSc, Charissa Cordon, RN, MN, EdD, CON, Sarah Quan, RN, MN, Janice Collins, BScOT, BComm, Andrea Baumann, RN, PhD, FAAN, CM, Jennifer Blythe, PhD</p> <p>(2021)</p> <p>Study Design: Qualitative research</p>	<p>The aim of this article is to describe a multiorganizational project that prepares IENs for employment in Canadian healthcare.</p> <p>(P) 591</p>	<p>Mentorship</p> <p>Coaching</p> <p>Collaborative</p>	<p>Workplace language and communication courses</p> <p>-Workshops focusing on telephone tactics</p> <p>-Language assessment</p> <p>- Cultural awareness training workshop for IENs, CIs and CMs/CEs/clinical leaders</p>
<p>Language barriers in multilingual Saudi hospitals: Causes, consequences, and solutions</p> <p>DOI: 10.1080/14790718.2020.1777134</p> <p>Munassir Alhamami</p> <p>(2020)</p>	<p>To examine the role of language barriers in a multilingual, non-Western working environment and assessing how various healthcare actors and</p>	<p>Mentorship</p> <p>Supportive</p> <p>Collaborative</p>	<p>Avoid using jargon: use simple language, internationally standardised medical terms, comprehensive, long-term</p>

Study Design: Qualitative research	stakeholders navigate these barriers. (P) 12		programmes that might help new hires understand the Arabic language and Saudi culture.
Communication barriers perceived by nurses and patients/ doi:10.5539/gjhs.v8n6p65 Roohangiz Norouzinia, Maryam Aghabarari, Maryam Shiri, Mehrdad Karimi & Elham Samami' (2015) Other: Cross sectional, descriptive analytic study	To determine the barriers to nurse-patient relationship from the perspective of nurses and patients. (P) 70 nurses, 50 patients	Motivational leadership Transformational leadership	allocation of medical staff with regard to the language and culture of the region, motivating nurses to provide high-quality health care services, upgrading medical clinics and facilities, holding periodic workshops of communication skills, holding nursing quality assurance committees, and most importantly, changing attitudes of nursing managers and administrators from offering task-based services toward following a holistic approach.
Exploring the experiences of internationally and locally qualified nurses working in a culturally diverse environment. <u>doi:</u> <u>10.3316/informit.123355974545870</u>	This article explores the support needs, attitudes and experiences of both internationally and locally qualified	Mentorship Cross-culturally	language support, particularly during the early period of settlement and adjustment,

<p>Dr Cathy O'Callaghan, Patty Loukas, Michelle Brady, Dr Astrid Perry (2018)</p> <p>Study Design: Qualitative</p>	<p>nurses working within a culturally diverse environment.</p> <p>(P) 108</p>		<p>need to assist IQNs with communication skills in the area of colloquialisms, abbreviations, terminology and idiom to improve patient safety.</p> <p>Nursing English" classes have also been recommended for IQNs across NSW which focus on pronunciation, intonation and functional language as well as face-to-face workshops to discuss cultural and language differences (Brunero 2009).</p>
<p>Overcoming language barriers in healthcare: A protocol for investigating safe and effective communication when patients or clinicians use a second language/ doi.org/10.1186/s12913-015-1024-8</p> <p>Renata F. I. Meuter, Cindy Gallois, Norman S. Segalowitz, Andrew G. Ryder & Julia Hocking (2015)</p> <p>Study Design: Mixed method: qualitative and quantitative studies</p>	<p>To understand language barriers and miscommunication that may occur in healthcare settings between patients and healthcare practitioners, special where at least one of the speakers is using a second (weaker) language.</p>	<p>Collaborative</p>	<p>Policy and practical solutions</p>

	(P) 80		
<p>Experiences of nurses educated outside the European Union of a Swedish bridging program and the program's role in their integration into the nursing profession: a qualitative interview study.</p> <p>https://doi.org/10.1186/s12912-020-00525-8</p> <p>Emina Hadziabdic, Anna-Maria Sarstrand Marekovic, Johanna Salomonsson & Kristiina Heikkilä (2021)</p> <p>Study Design: Qualitative</p>	<p>The aim of this study is to explore the experiences of nurses, originally educated outside the EU (European Union)/EES, of the Swedish bridging program and of the program's role in facilitating their integration into the nursing profession in Sweden.</p> <p>(P) 11</p>	<p>Experiential leadership</p> <p>Supportive leadership</p>	<p>Bridging programs for IENS</p> <p>Learning by doing</p> <p>It is essential that language skills are taught during the bridging education program.</p>
<p>Experiences of internationally educated nurses holding management positions in the United States: Descriptive phenomenological study.</p> <p>DOI: 10.1111/jonm.12591</p> <p>Lilian A. Allen PhD, Nursing Instructor/Adjunct Faculty/Staff Nurse (2018)</p> <p>Study Design: Qualitative</p>	<p>To explore the experiences of internationally educated nurses in management positions in United States health care organisations to understand the obstacles and support these individuals' experience when pursuing and working in managerial roles.</p> <p>(P) 7</p>	<p>Supportive strategies</p> <p>Mentorship</p>	<p>Cultural and diversity training.</p> <p>In selecting mentors, department leaders should choose individuals who are active listeners, patient, welcoming, change agents and accommodating.</p> <p>encourage internationally educated nurses to participate in unit and organisation-wide committees and to evaluate their performances regularly.</p>

<p>Upscaling communication skills training – lessons learned from international initiatives. DOI: 10.1016/j.pec.2020.08.028</p> <p>Jette Ammentorp, Sarah Bigi, Jonathan Silverman, Marlene Sator, Peter Gillen Winifred Ryan, Marcy Rosenbaum, Meg Chiswell, Eva Doherty, Peter Martin (2020)</p> <p>Study design: Multiple case study design</p>	<p>To collect and analyse experiences and lessons learnt from projects that have initiated large scale communication skills training programs in healthcare organisations, and to identify the main facilitators and barriers for their implementation.</p> <p>(P)</p> <p>between 446 and 3000 healthcare workers.</p>	<p>Coaching Leadership Supervisory</p>	<p>role-play, feedback group discussion, consultations.</p>
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The analysis of 12 studies explores various leadership strategies and intervention used to address communication challenges among IENs. Nurse managers/leaders plays a crucial role in selecting appropriate leadership strategies for IENs. Four themes of leadership strategies emerged as follows:

- Supportive, Coaching and Mentorship/Supervise Leadership:

Mentorship program, including buddy system, can enhance language skills and communication skills for IENs.

Mentors should possess key skills like active listening and patience skills to build IENs confidence and cultural understanding.

Accent reduction interventions may improve communication by focusing less on accents.

Discrimination issues need addressing, and anti-discrimination strategies should be incorporated into the workplace.

- Collaborative and Strategic Leadership:

Lack of professional networking for IENs can be addressed to increased awareness and positive collaboration between local nurses and IENs.

Understanding communication style differences related to cultural backgrounds is essential for mutual understanding.

- Transformational Leadership:

Effective communication is crucial in healthcare, and transformational leadership promotes trust, communication, and information exchange.

Nurses should be trained in communication skills, and intervention like workshops and attitude changes can enhance communication and integration of IENs.

- Experiential and Transcultural Leadership

Multicultural work environment may lead to grouping based on mother tongue, causing challenges like bullying and discrimination.

Strategies include early identification of issues, prohibiting mother tongue use, assigning cultural mediators, and encouraging language courses.

Nurse managers should communicate in the official language, promote integration, and support staff participation in language courses.

These leadership strategies and interventions aim not only to improve communication but also contribute to broaden the cultural understanding, and integration of IENs into healthcare system.

7 Discussion

The highlight of this review is that there is no clear-cut or specific leadership strategy in resolving communication challenges faced by IENs, instead it is a combination of different strategies, selected by the nurse manager/ leader according to the needs of the multicultural health care team. The communication challenges are multifaceted, and a diverse set of strategies may be needed to effectively address them. Since there are no specific leadership styles for communication challenges among IENs, nurse leaders/managers should be flexible and adaptable to tailor their approaches based on unique characteristics and challenges not only among IENs but also the non IENs which are both part of working team.

Managing with diverse workforce including the IENs needing a nuanced and intentional approach from managers which means it requires dedication, self-reflection, and a commitment to continuous learning. The approach of managing communication challenges is portrayed as a dynamic and evolving process which means it requires ongoing adjustments and flexibility. In recognizing the dynamics of communication challenges, it is expected that the strategies must evolve to meet the changing needs of the IENs (Hunt, 2007). Nurse managers/ leaders must actively engage on their reflections and analysing their own feelings with IENs and reflects on their selves according to their own cultural biases as this can affect their management abilities in managing the IENs (Haynes, 2010).

Nursing practices are evolving due to multicultural work environment. Communication is a fundamental part of a culture, and understanding the interplay between the communication and culture is important for effective cross-cultural interaction when communicating from basic level to professional level. Communication will not be solely alone, as it will always be a part of culture. This can be understood through the Papadopoulos, Tilki, Taylor (PTT) theory model, which is a framework for cultural competency especially in nursing and healthcare.

The PTT model focuses on several aspects, a. cultural awareness and this means recognizing and acknowledging one's own culture values, beliefs, and biases. To apply this in the management, manager/ leaders should use this model to encourage the IENs to reflect on their own cultural awareness, and understanding of how their cultural background influences their communication style, b. cultural knowledge is about getting information about the diverse cultural groups, including their values, beliefs, and healthcare practices. By using this model, nurse managers/ leaders can support the IENs in getting cultural competence knowledge, which is important for effective communication with diverse patients as well as IENs colleagues, c. cultural sensitivity, this concerning of being able to understand and being respectful of cultural differences and adapt communication and practice accordingly.

The PTT model serves as a guide for nurse managers/leaders in promoting cultural sensitivity among IENs which are important in tailoring communication approaches to diverse cultural needs, d. cultural competence in practice referring to integration in cultural awareness, knowledge and sensitivity in everyday work routine or practices in healthcare. Employing the PTT model will support managers to assess how IENs apply their cultural competence on their

communication with patients, colleagues, and within the healthcare system, e. cultural competence outcomes enhancing the achievement of positive health outcomes and patient satisfaction through culturally care. The nurse managers/ leaders apply the PTT model to evaluate the outcomes of cultural competence initiatives, including improved communication (Papadopoulos et al., 2001).

Applying the PTT theory model in communication skills in IENs, would support managers/leaders in assessing the areas of strength and areas that may need an improvement, this can also be used to create or design a particular training program which focus on communication skills, this model can support the continuous on going learning in the realm of communication skills among IENs. The PTT models will also provide a basis for constructive feedback and evaluation. Nurse managers/leaders construct a model to offer specific and precise feedback on communication performance (Papadopoulos et al., 2016).

The results did not explicitly outline specific interventions or strategies implemented by nursing management to address communication challenges among IENs. However, these four themes that emerged from the results gathered upon conducting the research reveals that a. supportive, coaching, mentorship/supervisory, b. collaboration and strategic leadership strategy and c. transformational and d. transcultural and experiential leadership are most preferred strategies in resolving IEN related communication challenges.

Multiorganizational collaboration is seen to be helpful in helping IENs resolve communication challenges. Lee et al. (2021) presented that partnerships that address the needs of IENS contribute to increasing the employment of IENs. Communication interventions includes partners that facilitates the learning of workplace language and communication skills through workshops and language courses, educational organizations and their bridging programs, and independent evaluation partners to provide continuous assessment, thereby allowing for evidence-based revisions to ensure best interventions are being applied as the process continues.

Collaboration at the individual level is seen as equally significant. Here are the key strategies for collaboration identified in the review in addressing communication challenges among IENs:

- a. Language training or support should be offered to IENs. Language programs should focus on the specific aspects barriers in healthcare communication and nurse managers/leaders should encourage IENs to attend the program as a prerequisite requirement
- b. Cultural competence training for nurse managers/leaders should be offered to equip their selves with knowledge, skills and attitudes that are necessary to understand, respect and respond culturally and ethically to cultural difference not only among IENs but also as a whole organization in a multicultural workplace,
- c. Clear communication policies should be emphasized and developed to clarify the expectations in communication and helps standardize the communication practices across the whole organization.

8 Strengths and Limitations of the Study

8.1 Strengths

Our study had several strengths that includes focusing on a timely and relevant topic using a semi-systematic approach. Articles used are not limited to a specific locality or country. This approach is appropriate for the research subject and its purpose. Although semi-systemic approach provided a degree of flexibility in the search and selection process, relevant literature were analysed systematically. Both authors are themselves IENs, therefore the study process is given careful thought with emphasis on transparency. This awareness has been a guiding tool for the authors to perform constant self-checks, ensuring that our own biases do not influence the research. Another strength that we identify is that the study itself is replicable and accessible.

8.2 Limitations

Most of the studies collected are of qualitative in nature, some are of quantitative in nature. Only full access articles were used during the inclusion process which limited the number of articles that can be used for the study. This brings the question, is there a possibility for a more quantifiable research approach in understanding possible strategies in resolving communication challenges by IENs.

9 Ethical Consideration

The research subject and purpose were submitted to our research supervisors for approval. With utmost consideration to the nature of the study, the authors have actively taken measures to avoid plagiarism and research misconduct. Relevant articles that represent a broad spread of views and opinions are included based on the inclusion and exclusion criteria, in this way we were able avoid choosing only those that agree with the author's opinion. All data recovered were presented as they are. Covidence was used to further promote transparency and avoid bias between the authors.

10 Conclusion

The literature review conducted revealed a combination of leadership strategies utilized by nursing leaders/managers to help resolve communication barriers experienced by IENs. Overall, there is no single, clearcut strategy identified to resolve these challenges. Instead, as a nurse manager or leader, one must tailor the strategies to be used according to the team's needs. Nurse managers need cultural awareness to understand the IENs.

To understand the communication skills of IENs, nurse managers/leaders can utilize the PTT theory to gain a better understanding the cultural competence, enhance and assess the cultural competence, particularly the communications skills of IENs. Careful planning of interventions/strategies to use for IENS to address communication problems even before they arise will help nurse leaders/managers to help resolve possible communication challenges. It is also noteworthy to reiterate the importance of cultural sensitivity which applies to the whole multicultural healthcare team, with the nurse leader/nurse manager as the role model of a culturally competent member of the team.

This review implies the need for further research that focuses on nurse managers' leadership strategies and efficiency in clinical practice with IENs.

Authors contribution

These authors contributed equally to this work.

Conflicts of Interest

The authors declare no conflict of interest.

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References

- Al Achkar, M., Dahal, A., Frogner, B. K., Skillman, S. M., & Patterson, D. G. (2023). Integrating immigrant health professionals into the U.S. Healthcare Workforce: Barriers and Solutions. *Journal of Immigrant and Minority Health*, 25(6), 1270–1278. <https://doi.org/10.1007/s10903-023-01472-7>
- Alhamami, M. (2020). Language barriers in multilingual Saudi hospitals: Causes, consequences, and solutions. *International Journal of Multilingualism*, 19(4), 553–565. <https://doi.org/10.1080/14790718.2020.1777134>
- Allen, L. A. (2018). Experiences of internationally educated nurses holding management positions in the United States: Descriptive phenomenological study. *Journal of Nursing Management*, 26(5), 613–620. <https://doi.org/10.1111/jonm.12591>
- Ammentorp, J., Bigi, S., Silverman, J., Sator, M., Gillen, P., Ryan, W., ... & Martin, P. (2021). Upscaling communication skills training—lessons learned from international initiatives. *Patient education and counselling*, 104(2), 352-359.
- Andersen, J. A. (2016). An Old Man and The “Sea of Leadership.” *Journal of Leadership Studies*, 9(4), 70–81. <https://doi.org/10.1002/jls.21422>
- Addressing the international migration of Health Workers. (n.d.-a). <https://www.who.int/activities/addressing-the-international-migration-of-health-workers>
- Backman, J. (2008). *Rapporter och uppsatser* (2 uppl.). Studentlitteratur.
- Bandura, A. (1977). *Social learning theory*. Englewood Cliffs, NJ: Prentice Hall.
- Bass, B. M., Avolio, B. J., Jung, D. I., & Berson, Y. (2003). Predicting unit performance by assessing transformational and transactional leadership. *Journal of applied psychology*, 88(2), 207.
- Bass, B. M., & Bass, R. (2009). *The Bass handbook of leadership: Theory, research, and managerial applications*. New York, NY: Free Press.

- Baumeister, R. F., & Leary, M. R. (1997). Writing Narrative Literature Reviews. *Review of General Psychology*, 1(3), 311-320. <https://doi.org/10.1037/1089-2680.1.3.311>
- Boggs, K. U., & Arnold, E. (2023). *Interpersonal relationships: Professional communication skills for nurses*. Elsevier.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101.
- Channing, J. (2020). How Can Leadership Be Taught? Implications for Leadership Educators. *International Journal of Educational Leadership Preparation*, 15(1), 134-148.
- Cleo, G., Scott, A. M., Islam, F., Julien, B., & Beller, E. (2019). Usability and acceptability of four systematic review automation software packages: A mixed method design. *Systematic Reviews*, 8(1). <https://doi.org/10.1186/s13643-019-1069-6>
- Clinebell, S., Skudiene, V., Trijonyte, R. & Reardon, James. (2013). Impact Of Leadership Styles on Employee Organizational Commitment. *Journal of Service Science (JSS)*. 6. 139.
- Day, D.V., Fleenor, J.W., Atwater, L.E., Sturm, R.E. and Mckee, R.A. (2014), “Advances in leader and leadership development: a review of 25 years of research and theory”, *The Leadership Quarterly* , Vol. 25 No. 1, pp. 63-82
- DiCenso A., Guyatt G. & Ciliska D. (eds) (2005) *Evidence-Based Nursing*, 1st edn. Elsevier Mosby, St Louis, MO.
- Dvir T, Eden D, Avolio BJ, Shamir B. Impact of transformational leadership on follower development and performance: A field experiment. *Acad Manag J*. 2002;45(4): 735–744.
- Dunn, D. M., & Goodnight, L. J. (2020). *Communication: Embracing difference*. Routledge.
- Ehrenberg-Sundin, B., Lundin, K., Wedin, Å., & Westman, M. (2008) *Att skriva bättre i jobbet: En basbok om brukstexter* (4 uppl.). Norstedts Juridik AB.

- Engelmann, C. (2022). Who's an Employee Now? Classifying Workers in the Age of the "Gig" Economy. *Fordham Urban Law Journal*, 49(4), 959–1001. <https://ir.lawnet.fordham.edu/ulj/vol49/iss4/7>
- Goleman, D. (2000). Leadership that gets results. *Harvard Business Review*, 78, 78-90
- Guthrie, K. L., & Jones, T. B. (2012). Teaching and learning: Using experiential learning and reflection for leadership education. In K. L. Guthrie & L. Osteen (Eds.), *New Directions for Student Services: No. 140. Developing students' leadership capacity* (pp. 53–64). San Francisco, CA: Jossey-Bass.
- Hadziabdic, E., Marekovic, A. M. S., Salomonsson, J., & Heikkilä, K. (2021). Experiences of nurses educated outside the European Union of a Swedish bridging program and the program's role in their integration into the nursing profession: a qualitative interview study. *BMC nursing*, 20(1), 1-11.
- Hadziahmetovic, N., Tandır, N., & Dzambić, A. (2023). A Research Review of Leadership Styles. *International Journal of Academic Research in Economics and Management and Sciences*, 12(1), 188–206.
- Haynes, K. M. (2017). *Nurse Manager Perspectives about Internationally Educated Nurses (IENs) and Hiring Practices in Long-Term Care* (Doctoral dissertation, Trinity Western University).
- Helakorpi, S., & Kivimäki, H. (2021). *Välbefinnandet bland barn och unga – Enkäten Hälsa i skolan 2021* (Statistikrapport 40/2021, 9.11.2021). Institutet för hälsa och välfärd. <https://urn.fi/URN:NBN:fi-fe2021110954501>
- Hunt, B. (2007). Managing equality and cultural diversity in the health workforce. *Journal of Clinical Nursing*, 16(12), 2252–2259. <https://doi.org/10.1111/j.1365-2702.2007.02157.x>
- Kearney E, Gebert D. Managing diversity and enhancing team outcomes: The promise of transformational leadership. *J Appl Psychol*. 2009;94(1): 77–89. doi: 10.1037/a0013077

- Kellermeyer, L., Harnke, B., & Knight, S. (2018). Covidence and rayyan. *Journal of the Medical Library Association*, 106(4). <https://doi.org/10.5195/jmla.2018.513>
- Kourkouta, L., & Papathanasiou, I. V. (2014). Communication in nursing practice. *Materia socio-medica*, 26(1), 65–67 <https://doi.org/10.5455/msm.2014.26.65-67>
- Kuhnert, K. W., & Lewis, P. (1987). Transactional and transformational leadership: A constructive/developmental analysis. *The Academy of Management Review*, 12(4), 648–657. <https://doi.org/10.2307/258070>
- Lee, R., Beckford, D., Jakabne, L., Hirst, L., Cordon, C., Quan, S., & Blythe, J. (2021). Multiorganizational Partnerships: A Mechanism for Increasing the Employment of Internationally Educated Nurses. *Nursing Leadership (1910-622X)*, 34(3).
- Magee, S. Symposium Learning. *What is Experiential Leadership in 2021 (and How it Works)*. (Retrieved November 25, 2023, from https://symposiumlearning.com/what-is-experiential-leadership/#Foundation_of_shared_value)
- McHugh, M. L. (2012a). Interrater Reliability: The kappa statistic. *Biochemia Medica*, 276–282. <https://doi.org/10.11613/bm.2012.031>
- Middleton, F. (2023, June 22). *The 4 types of reliability: Definitions, examples, methods*. Scribbr. <https://www.scribbr.com/methodology/types-of-reliability/>
- Meuter, R. F., Gallois, C., Segalowitz, N. S., Ryder, A. G., & Hocking, J. (2015). Overcoming language barriers in Healthcare: A protocol for investigating safe and effective communication when patients or clinicians use a second language. *BMC Health Services Research*, 15(1). <https://doi.org/10.1186/s12913-015-1024-8>
- Mroz, J. E., Yoerger, M., & Allen, J. A. (2018). Leadership in workplace meetings: The intersection of leadership styles and follower gender. *Journal of Leadership & Organizational Studies*, 25(3), 309–322. <https://doi.org/10.1177/1548051817750542>
- NEWTON, S., PILLAY, J., & HIGGINBOTTOM, G. (2011). The migration and transitioning experiences of internationally educated nurses: A global perspective. *Journal of Nursing Management*, 20(4), 534–550. <https://doi.org/10.1111/j.1365-2834.2011.01222.x>

- Norouzinia, R., Aghabarari, M., Shiri, M., Karimi, M., & Samami, E. (2016). Communication barriers perceived by nurses and patients. *Global Journal of Health Science*, 8(6), 65. <https://doi.org/10.5539/gjhs.v8n6p65>
- O'Callaghan, C., Loukas, P., Brady, M., & Perry, A. (2018). Exploring the experiences of internationally and locally qualified nurses working in a culturally diverse environment. *Australian Journal of Advanced Nursing, The*, 36(2), 23-34.
- Oecd, & Union, E. (2022, December 20). *Availability of nurses*. OECD iLibrary. https://www.oecd-ilibrary.org/social-issues-migration-health/health-at-a-glance-europe-2022_368ee27e-en
- Papadopoulos, I., Shea, S., Taylor, G., Pezzella, A., & Foley, L. (2016). Developing tools to promote culturally competent compassion, courage, and Intercultural Communication in Healthcare. *Journal of Compassionate Health Care*, 3(1). <https://doi.org/10.1186/s40639-016-0019-6>
- Ramji, Z. (2016). *Beyond Transition: Understanding Workplace Integration of Internationally Educated Nurses-A Qualitative Case Study* (Doctoral dissertation, Université d'Ottawa/University of Ottawa).
- Ribeiro, N., Duarte, A. P., Filipe, R., & Torres de Oliveira, R. (2020). How Authentic Leadership Promotes Individual Creativity: The Mediating Role of Affective Commitment. *Journal of Leadership & Organizational Studies*, 27(2), 189-202. <https://doi.org/10.1177/1548051819842796>
- Schaubroeck, J., Lam, S.S. and Cha, S.E. (2007), “Embracing transformational leadership: Team values and the impact of leader behavior on team performance ” , *Journal of Applied Psychology* , Vol. 92 No. 4, pp. 1020-1030.
- Snyder, H. (2019). Literature Review as a Research Methodology: An Overview and Guidelines. *Journal of Business Research*, 104, 333-339. <https://doi.org/10.1016/j.jbusres.2019.07.039>
- Squires A. (2018). Strategies for overcoming language barriers in healthcare. *Nursing management*, 49(4), 20–27. <https://doi.org/10.1097/01.NUMA.0000531166.24481.15>
- Stanko TL, Gibson CB. The role of cultural elements in virtual teams. In Bhaght RS, Steers RM, editors. *Cambridge handbook of culture organizations and work*. Cambridge: Cambridge University Press; 2009. pp. 273–304.

- Strömquist, S. (2010). *Skrivboken : Skrivprocess, skrivråd och skrivstrategier*. (6 uppl.). Gleerups Utbildning AB.
- Teixeira, G., Lucas, P., & Gaspar, F. (2022). International Portuguese Nurse Leaders' Insights for Multicultural Nursing. *International journal of environmental research and public health*, 19(19), 12144. <https://doi.org/10.3390/ijerph191912144>
- Tello, L. Y. (2021, March 9). *Covidence: A game changer for systemic reviews*. D. <https://dlib.berkeley.edu/news/covidence-game-changer-systemic-reviews>
- Torlak, N. G., Demir, A., & Budur, T. (2021). Decision-making, leadership and performance links in private education institutes. *Rajagiri Management Journal*. <https://doi.org/10.1108/RAMJ-10-2020-0061>
- Tranfield, D., Denyer, D., & Smart, P. (2003). Towards a methodology for developing evidence-informed management knowledge by means of systematic review. *British journal of management*, 14(3), 207-222. 10.19030/jss.v6i1.8244.
- Ward, V., House, A., & Hamer, S. (2009). Developing a framework for transferring knowledge into action: a thematic analysis of the literature. *Journal of health services research & policy*, 14(3), 156-16
- Wolcott, K., Llamado, S., & Mace, D. (2013). Integration of internationally educated nurses into the U.S. Workforce. *Journal for nurses in professional development*, 29(5), 263–268. <https://doi.org/10.1097/01.NND.0000433145.43933.98>
- Wong, G., Greenhalgh, T., Westhorp, G., Buckingham, J., & Pawson, R. (2013). RAMESES publication standards: Meta-narrative reviews. *Journal of Advanced Nursing*, 69(5), 987-1004.