

Non-Traditional Roles of Iranian Senior Nurse Managers in Developing the Profession: A Qualitative Study

Houman Manoochehri¹, PhD; Hamideh Azimi Lolaty¹, MSc; Parkhideh Hassani¹, PhD; Seyed Afshin Shorofi², PhD; Paul Arbon³, PhD

¹Department of Nursing, Shahid Beheshti University of Medical Sciences, Tehran, Iran;

²Department of Nursing, Mazandaran University of Medical Sciences, Sari, Iran, and Adjunct Research Fellow, Flinders University, Adelaide, Australia;

³School of Nursing and Midwifery, Flinders University, Adelaide, Australia

Corresponding author:

Hamideh Azimi Lolaty, MSc; Shahid Beheshti University of Medical Sciences, Vali-Asr Street, Next to Niyayesh Highway, Zip Code:1985717443, Tehran, Iran

Tel: +98 21 88655366; **Fax:** +98 21 88202521; **Email:** azimihamideh@gmail.com

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ABSTRACT

Background

The traditional roles of managers are insufficient in today's evolving healthcare market. Therefore, they need to improve management practices through playing new roles. So the present study aimed to explore the roles of nurse managers in the context of Iranian health care system.

Methods

A qualitative content analysis with semi-structured interviews was used in this study. The study settings included the Ministry of Health and Medical Education, Nursing and Midwifery Schools, public hospitals, and Nursing Associations in Tehran, Iran. A purposive sample of twenty six nurse managers was recruited in this study.

Results

The main theme found was "socio-political roles", with the five subcategories as roles: "managing boundaries", "integrator", "convincing agent of change", "governance of the profession", and "promotion of the profession". The study indicated by playing socio-political roles nurse managers gained many advantages for the profession.

Conclusion

While studies have focused on the traditional roles of nursing managers, the concept of socio-political roles opens a new field of work. Hence, should be made to pay close attention to the significant roles of nursing managers in the current context of health care. In keeping pace with changes and by enacting their socio-political roles, nursing managers can facilitate the achievement of major professional and healthcare goals.

KEYWORDS: Nurse's Role; Nurse Manager; Qualitative Research; Roles

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INTRODUCTION

Today's modern health care is located in a paradoxical,¹ multi-dimensional and constantly changing environment. Nurses are respected and trusted healthcare professionals,² and nursing leaders have a great deal of duties in healthcare.^{3,4} In addition, the traditional roles of nursing managers are insufficient in today's evolving healthcare market. Therefore, they need to improve management practices by playing new roles.⁵

The essence of management is achieving goals through coordination of the work done by others. The classic definition of management is as follows: "planning, organizing, commanding, coordinating, and controlling the work of a group of employees."² Later, Mintzberg has developed a comprehensive empirical picture of the nature of managerial work through observing and recording what managers actually do. He described the managerial job in terms of several roles.⁶

The significant impact of context was emphasized in nursing by White's advanced socio-political knowledge that developed the nursing practice in the world of society, community life, culture, economics and politics.⁷ An overview of nursing history showed that nursing work had been affected by several economic, historical and cultural factors.^{8,9} Iranian nursing has undergone much changes since 1940s, which have been correlated to the changes in the social values, and Iran's political environment.¹⁰

In the current context of Iran's health care system, nursing profession deals with many issues that originate from physician-centered culture and other negative socio-cultural and structural factors that have affected Iranian nursing profession, such as poor social status and image.^{9,11} Recently, Iranian nursing has witnessed advancements in both education and practice. Despite this progress, there is still much to do in order to build the capacity and capability of the profession.¹² With respect to these challenges and professional

issues, many researchers have emphasized the significant role of nursing managers and leaders.¹³⁻¹⁵

In the current healthcare environment, studies of the roles of nursing managers are limited and inadequate. Even though, there are studies about nursing leadership/management, the real concept of nurse manager roles with regard to the current health care context is missing.^{5,16} To understand what an effective nursing manager needs to do in a rapidly changing health care environment, there is a need to study what nursing managers actually do. Therefore, the aim of this study was to explore and describe the non-traditional roles of nursing managers in the current context of Iranian healthcare.

MATERIALS AND METHODS

This is a qualitative study using content analysis method. Content analysis method was used because it is a content sensitive content method with meanings, intentions, consequences and context.¹⁷ The present study was conducted during 2011-2012. Using purposive sampling, we interviewed 26 nursing managers working at the Ministry of Health and Medical Education, nursing and midwifery schools, hospitals, and nursing associations in Iran. These nurses were chosen as they had a range of experiences in achieving goals within the country's health care system and had key positions in Iran's healthcare system. Because senior-level managers are responsible for establishing objectives and strategies to achieve higher performance, they do various roles to meet the challenges of a complex, changing environment.¹⁸

Semi-structured interviews were conducted in one stage in order to solicit data. The interviews focused on determining the tasks needed to perform their roles under current working organizational and environmental conditions. The interview questions were about managers' performance and their strategies for achieving organizational and professional goals. The duration of interviews ranged from 45 to 90 minutes.

Interviews continued until data saturation was achieved, attested by the repetitious information gained from the last three interviews.¹⁹

In order to increase the depth of understanding, the first author made (N=4) observations as a non-participant in the participants' workplaces and also attended a decision-making and counseling meeting, arranged by the Ministry of Health and Medical Education. Notes were taken during the observations to inform the data analysis process.

The interviews were analyzed using the Graneheim and Lundman Content Analysis Method.²⁰ The unit of analysis was an interview text concerning nurse managers' experiences. The participants' experiences and perceptions were evoked by asking questions such as "Could you please tell me about your managerial experience?", and "How do you make an attempt to improve your profession?"

The interviews were read and reread several times to obtain a sense of the whole. The interview text was subsequently divided into meaning units that were condensed to abstracted and labeled codes. The codes were then grouped together to form categories and subcategories. Five categories and sixteen subcategories, which constituted the manifest content, emerged from the analysis. The analysis process was continuously reviewed by the research team through reflection and discussion for agreement about sorting the codes and to ensure clear difference between the categories. In addition, meaning units within all subcategories were checked for accuracy and minor revisions were made later. Finally, the latent content revealed into a main theme, which was "socio-political roles".

Credibility, conformability, dependability, and transferability of the results were employed for the purpose of trustworthiness.¹⁹ Credibility was established through prolonged engagement to gain the participants' trust; revisions made by the participants as a member check; debriefing with two expert

supervisors and four academic staff as a peer check; and maximum variation in sampling to gain a broad range of participants' views and experiences. For conformability and dependability, the researchers recorded an audit trail for the replication of the study by future researchers. Transferability was addressed using a clear description of culture and concept, purposeful sampling, data collection, process of analysis and sufficient quotes recorded to ensure that the findings fit the data.

Ethics approval was obtained from the Research Ethics Committee of where the study took place. All participants were given information regarding the purpose of the study and they were also informed that participation is voluntary. They were requested to sign an informed consent form prior to the study and all the participants were assured that their anonymity would be guaranteed. All interviews were performed in a private room to ensure confidentiality in the participants' workplace.

RESULTS

Table 1 depicts the demographic characteristics of the nursing managers. This content analysis revealed the non-traditional roles of the managers as "socio-political roles" that were played out in response to the demands of the current health care environment and the motivation among nurse managers to build on and improve the profession. Table 2 shows the main theme, categories and subcategories.

Managing Boundaries

The "managing boundaries" theme reflects the efforts of the managers as communication developers, mediators of relations, traders, balancers, and negotiators in protecting and developing the borders of the profession.

As a communication developer, the managers attempted to improve professional dignity by expanding relations with social bodies. For instance, the head of one of the nursing and midwifery schools said, "When

Table 1: Demographic Characteristics of the Interviewees (N=26)

Variable	Frequency/mean(SD)
<i>Current position of the managers</i>	
Ministry of Health and Medical Education	8 (30.77%)
Nursing And Midwifery Colleges	9 (34.62%)
Matrons At Hospitals	3 (11.54%)
Iranian Nursing Organization	4 (15.38%)
Nursing Associations	2 (7.69%)
<i>Sex</i>	
Female	15 (57.69%)
Male	11 (42.31%)
<i>Level of education</i>	
BS	5 (19.23%)
MSc	7 (26.99)
PhD	14 (53.85%)
Mean (SD) years of managerial experience	10.84 (7.90)
Mean (SD) years of professional experiences	25.57 (10.91)

Table 2: Summary of Categories and Sub-Categories of the socio-political roles theme

Categories	Subcategories
Managing boundaries	Communication developers
	Mediators of relations
	Traders
	Balancers
	Negotiators
Integrator	Integrating knowledge
	Integrating new health-related concepts
	Integrating human resources
	Integrating formal and informal professional organizations.
Convincing agent of change	Understanding of the forces
	Encouraging of the forces
Governance of the profession	Permanent presence
	Professional vigilance
Promotion of the profession	Providing qualitative services
	Using mass media
	Developing political communications

I am in the university, I have the chance to communicate with different policymakers. I try to take advantage of this condition” (M 6). Another manager mentioned, “We communicate with the university authorities, members of parliament, as well as the mayors to earn more facilitates for the profession” (M 18). These statements clarified the orientation of the managers to the significant role of communication with influential persons.

Expanding the borders of nursing profession internationally was another function as a communication developer. According to a participant, “I made a connection with the

ICN representative and I arranged for the ICN delegate to visit a couple of hospitals, nursing and midwifery schools and academic staff. These efforts had an impact on our nursing position in the international level” .

When the managers faced with job conflicts, they behaved as a mediator to establish a mutual trust in order to resolve the conflicts. One of the participants stated, “In one side, we negotiated with the university authorities. Likewise, on the other side we spoke to students to make them aware of the political situation. This manner was very effective” (M 2).

Trader role played as an accessory role requires bargaining between two systems to gain resources for the nursing service and to strengthen the professionalization of nursing. Efforts to gain mutual benefits were a significant feature. One of the participants stated, "We communicated with the city politicians; then, we supported and provided them with an opportunity to talk to the students and spread their propaganda. Now, we feel that if such relationship or transaction did not exist, we could not even afford to install a billboard in the school entrance for those unfamiliar students with the address" (M 2).

A balancer role was played to maintain balance and stability to preserve a peaceful environment. "In the first time after Iran's revolution, we were under heavy pressures from the university authorities to materialize the students' demands; we had to make a balance between opposing forces by listening to them, meeting their representatives and allowing them to speak freely to have peaceful atmosphere at the university" (M 14).

Based on data analysis, a negotiator role is related to the nurse managers' efforts in achieving necessary resources and profession-related facilities. The most important way of negotiation was evidence-based negotiation to convince the high level managers. "I've always experienced this, when I speak with evidence. I have always achieved my goals" (M 26). "I believe that when you don't have any power, you must be able to convince the authorities. For example, we received the primary agreement for the establishment of the Iranian Nursing Organization' (INO) by this way. We always strive to convince policy makers by providing them with some evidence for our professional demands" (M16).

Integrator

This role refers to understanding the participants' experiences and efforts in integrating knowledge, new health-related concepts, human resources, linking to formal and informal professional organizations.

Integrating new health-related concepts in the profession was expressed for example by one participant, "I'm very concerned about new issues. I always look for something new. I always review articles and look for applicable terms such as justice and disparities in health which are new. We also always communicate with other professionals and get some new ideas and use them in our profession. This process resulted in a common language between us" (M 16).

Another integrating strategy was internalizing managerial experiences and striving for uniting nurses; it was stated by some participants. One participant said, "I believe that managerial experience helped me converge forces rather than diverge them. That means when you internalize your experiences and use them, then you can make the system congruent with yourself" (M 6).

Attempting to integrate and promote collaboration among professional organizations was among the activities of the participants, required for growth and improvement of the profession according to their beliefs. "These are professional identity organizations. We must go for unity not rejection. If they form a union, they can greatly help. They all have strengths and weaknesses. They are directed toward pooling of forces"(M 15).

Convincing Agent of Change

The theme refers to the role of managers in directing human resources in change processes. This role playing was enacted through a well-developed understanding of the forces involved, recognizing and understanding them through systematic thinking, and encouraging them to favor the change.

Trying to understand and having empathy with human resources were revealed in participants' comments. One participant said, "Now, I agree to what they say and I try to pay close attention to their feelings and emotions. I will work with them for the sake of change"(M 6).

Helping to achieve self-awareness was another managers' effort in dealing with

change. One participant said, “When I want to make a change in my organization, this decision confronts me with some opposing forces. Well, a good management strategy is to concord them with helping someone to know himself” (M 15).

Keeping forces in the change process is another effort of a manager; a participant commented, “Finally, we should modify this process and not put a heavy burden on people. An organization is only good when it collects all types of forces” (M 6).

The study also revealed other strategies used to convince forces for organizational changes, including increasing awareness about the changes, designing a professional outlook, clarifying and being honest with workforces and promoting “collective sympathy”.

Governance of the Profession

This subcategory refers to supervision on profession, where managers monitor the professional situation through permanent presence in different fields and by their professional vigilance.

The participants referred to the role of constant presence in different care situations or health units to achieve professional goals. One participant said, “Even though I don’t have any work to do, I go to the parliament to talk to the senators and every 6 months I prepare a report for the health committee of the parliament” (M 22).

Professional vigilance has been an important aspect mentioned by the participants in professional supervision. Attention to planning before crisis is an aspect of professional vigilance. In this respect, one participant stated, “Always, I say that we can reduce the real source of anxiety in this way. When we have a strong backup and move ahead by exact planning, there is no longer need to be agitated by the events” (M 14). Another participant said, “I always hear news especially those related to people’s health; I always read newspapers and I don’t sleep before I read it” (M 20).

Being alert was one of the important

issues; a participant said, “We should be alert and not optimistic at all” (M12). Another participant said, “I’ve always tried to consider probabilities. In my opinion, a manager should take every opportunity to justify his/her demands” (M 20).

Promotion of the Profession

Promotion of the profession is another socio-political role. The participants believed that one of the ways for professional development and health promotion is constant proposition of one’s profession to society. In this regard, presenting the profession to the society in different ways including providing qualitative services, using mass media for introducing the profession to the society, developing political communications with different and influential institutions and heads of society were some strategies that fulfill this responsibility.

In this regard the participants said,

“I always tried to provide and focus on quality of my work in any position; by this, I try think, I could go to my clients’ minds” (M 8).

“I think we need much work to do for presenting our profession in the society; in our plans one way is the use of mass media” (M 22).

Efforts to present professional abilities are another strategy in this regard. One participant stated “when the earthquake happened in Bam, we urgently recruited many nurse volunteers so that we could present our ability to manage people’s needs in emergency events” (M 22). Another person said “Our main movements for professionalism were to be in the mind of both people and the country’s policymakers” (M 5).

Creating sensitivity among nurses and continuing it by managers was a strategy to take responsibility for social transformation. In this respect, a participant stated, “If we keep the nurses interested and sensitive enough to follow up their professional issues spontaneously, the issues will give or take their place in the society” (M -1).

DISCUSSION

The findings revealed that the nursing managers

played multiple and newly identified roles that they have always done but were not well articulated in the past. The study aimed to explore and describe non-traditional roles of senior nurse managers in the study context. Socio-political roles are identified as a suitable theme to summarize the nurse managers struggles to overcome various nursing profession challenges. The study findings emphasized that roles were often context-related, i.e. they originated from interaction of the managers with socio-political context. This is a finding worth to be considered in future management and educational programs in nursing. The socio-political roles included “managing boundaries”, “integrator”, “convincing agent of change”, “governance of the profession” and “promotion of the profession”.

The study revealed that by “managing boundaries” the nurse managers tried to protect and develop the profession. This role is similar to “strategist” in Zuckerman and Dowling’s study. They believed that the managers must have a two-way approach, both influence and react to the environment. They also pointed out that the managers must strategically identify and evaluate developments in the environment that may affect the organization.¹⁸

Contemporary nursing leadership has both internal and external focus. A study among nurse managers revealed that nurse leaders were performing an interpretation and translation role in others to bridge the gap between the policy context and nursing practice. Therefore, they believed the nature of nursing leadership is ‘bi-cultural’. This study also revealed that the nurse managers also do this role by accessory roles, as mentioned earlier, for developing a link between internal and external environment, ensuring the stability of the organization, and achieving professional/ organizational goals.²¹

The theme “integrator” introduced another role in the study context. It is a creative role. The study showed the nursing managers struggle to integrate and transform

knowledge, new health-related concepts, human resources, governmental and non-governmental professional organizations. Feldman also emphasized the ability of integration; he believed that future leaders should easily adapt the new and different ideas and have the capacity to integrate new and dissimilar ideas subsequently. They will be able to lead their followers not by power, but by ideas and opinion.²² In nursing, there is emphasis on some integrative strategies for organizational capacity-building such as the integration of health promotion knowledge across organizations and communities as well as integrated organizational support for associated policies and procedures.²³ Other studies revealed another creative managers’ role as “innovator” and as “designer”.^{18,24}

Some studies showed that nursing leaders were important participants in making the workplace creative and productive²³ and considered them as a change agent.^{24,25} The “Convincing agent of change” also reflects this role that is played by Iranian manager nurses. In addition, this role is similar to “producer”, “facilitator” and “disturbance handler” in other studies on managers’ new roles in different disciplines for adaptation with change.¹⁸

In this study, through the governance role, nursing managers can carefully monitor the profession and regulate it. “Monitoring” was considered by Quinn et al. and Mintzberg as a role for managers.¹⁸ This study revealed that by “professional vigilance”, the nurse managers could monitor the status of the profession. Although professional vigilance was defined as a state of attention, with maximum physiological and psychological readiness for actions and the ability to assess and respond to risk and it has been seen as the essence of caring in nursing.²⁶ In this study, professional vigilance has been considered as awareness, sensitivity and readiness to action on professional issues.

In this study, it was revealed that the participants have made efforts on promotion of the profession. In Iran, like the West

and East Asia, despite changes in nursing practice, education, and research, social image of nursing has not been improved and it is recognized as a major concern in many studies.²⁷⁻²⁹ Also studies in Iranians' context, like other countries, showed that despite the positive attitude of nurses about their ability in practicing health issues, they are dissatisfied about their social status.^{15,30} Hence, socializing is considered essential in nursing promotion.²⁸ This study revealed that the nurse managers felt that it is their responsibility to motivate social mandate of the nursing profession; they directed their efforts to bring up careers in society, link social problems to professional solutions, use different ways of activating nursing in the society, and increase social awareness about nursing social responsibility.

The significant role of nursing manager in directing the profession to health care goals is inevitable. The study revealed the Iranian nursing managers had sufficient orientation about professional context and functioned appropriately by playing socio-political roles in dealing with many issues as to the profession. By these roles, they protect, develop, improve, govern and promote the profession.

Although we studied nurse managers in the policy making level, the results showed a cumulative nature of experiences stemming from other managerial levels. Hence, the results can be generalized to other managerial levels such as nursing executives or ward managers.

CONCLUSION

While studies have focused on traditional roles of nurse managers and the concepts of leadership as well as management, we attempted to delineate the non-traditional roles of nurse managers in directing the profession in turbulent and competitive healthcare environment. The findings have implications for nursing management and educational programs in preparing the nurse managers for the future. It is suggested that further

studies be conducted amongst other levels of nursing managers regarding the way to deal with professional issues in order to provide a complete picture of nursing roles and factors influencing the profession.

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