Japanese American Nursing Education Leadership

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Abstract

Why are there so few Japanese-American Nursing Education leaders in the United States when Asians in general are considered the "model minority"? Several reasons point to the cultural and value differences of an Eastern versus Western perspective. Many who have addressed this issue in other professional fields explain this phenomenon as the bamboo ceiling. This article provides the experiences of two Japanese American Nurse Leaders framed through a theoretical framework proposed by Bolman and Deal (1991), which seems to relate to their "human resource leadership" style and the strong belief and empowerment of others. These leadership types develop symbols and cultures to shape human behavior with the shared mission and identity of the organization in mind which is in concert with the Japanese American cultural values of collectivism. Explanation and recommendations for future leaders are provided along with examples by two nurse leaders which may provide better insight into an answer to the question of "Why so few?"

Some would ask: "why are there so few Asian Americans in executive or administrative positions?" given the proportion of Asian Americans working in the healthcare/professional work force. The bamboo ceiling phenomenon was offered as an explanation by Jane Hyun who authored: *Breaking the Bamboo Ceiling: Career Strategies for Asians* (Hyun, 2005). In her book she identified barriers and issues many Asian Americans face, such as stereotypes and racism, and also offered solutions to these barriers. According to Hyun, the bamboo ceiling is a combination of culture, individual, and organizational factors that interfere with the career progression of Asian Americans within organizations. Raising the conscious awareness of this phenomenon led many professionals to discuss the ceiling concept. These discussions led to commonly held stereotypes that Asian Americans "lack leadership potential" and "lack communication skills" which were not supported by Asian Americans' job performance and/or qualifications (Fisher, 2005).

In the United States, Asians are often viewed as the "model minority" perceived to be quiet, family-oriented, hard-working, high achieving, passive, and submissive. While in the short term these traits may be viewed as advantageous, the long-term effect is the impediment of progression up the corporate or academic ladder. This may explain Asians career progression to middle management positions, but rarely do they become executives. Many of these stereotypes may be rooted in cultural misunderstandings including the thinking that all Asians exist as a monolithic community, meaning all Asians possess similar cultural specific values which are the underlying cause of behaviors displayed in the workplace. For those who accept these stereotypes, the idea of the smart, hard-working model minority creates an implicit bias that Asian Americans are great thinkers and doers, but lack assertiveness, vision, and interpersonal skills to be successful organizational leaders (Li, 2014).

Asian American women, in particular, also face a distinct set of additional barriers in the workplace. Events in recent U.S. history shaped perceptions that Asian American women are outsiders, ultra-feminine lotus blossoms, and dragon ladies. Many of these stereotypes are perpetuated in mass media, which reinforces two dichotomist stereotypical

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images of Asian American women: "the lotus blossom" who is shy and diminutive while the portrayal of the "the dragon lady" is viewed as "wicked and devious," neither is conducive to leading an organization (Li, 2014). Historically, the founding fathers and leaders of America envisioned a country for "white Christians" and not a place where multiracial or multicultural groups would co-exist. The history of exclusion may help to shade light on the current perspective of Asian American women, specifically Japanese American women, in leadership positions today.

Demographic and Ethnohistorical Background of Japanese-American Nurse Leaders

Japanese migrated to the United States (U.S.) in significant numbers following the social, political, and cultural changes of the Meiji Restoration. Migration to Hawaiʻi started as early as 1868. Japanese workers were sought out by industries, but as their numbers grew and they gained much success in the area of farming, Americans grew fearful of a "yellow peril" (i.e., East Asians would be a danger to Western society; Yang, n.d.). This led to the *Gentleman's Agreement* between the U.S. and Japanese Governments which ended the immigration of Japanese men, but Japanese women and children were allowed to remain in the United States (Nakanishi & Nishida, 1995). Because there were no new immigrants from Japan allowed into America after 1907, the immigrants or Issei (first generation) were those born before 1924. Naturalization laws, passed in 1790 and amended in 1870, excluded Asians from citizenship until 1952 when the Walter-McCarran Act removed race-based requirements for naturalization. Like other immigrants, the Japanese came to the U.S. for a better life, but not all intended to remain here permanently.

Japanese living in America made great contributions in the area of agriculture, particularly in California and Hawaiʻi. They introduced sophisticated irrigation methods that allowed the cultivation of fruits, vegetables, and flowers on marginal lands (Nakanishi & Nishida, 1995). Most of these Issei lost their agricultural properties during World War II when many were interned while their sons (*Nissei* or second generation) enlisted to serve in the military. In Hawaiʻi, Japanese Americans are the largest sub population in the State (Pew Research Center, 2012). The influx during the period of 1890–1924 was largely those working in the pineapple and sugar cane fields and who later started small businesses. Unlike other immigrants, Japanese Americans identify

themselves by the generation in which they were born. The *issei* were the first generation to come to the United States, the *nissei* were the second, the *sansei*, the third, the *yonsei*, the fourth, the *gosei*, the fifth, and the *rokusei*, the sixth generation (Hashizume & Takano, 1993). Each generation becomes less familiar influenced by values, norms, and customs of their home country, and this should be taken into consideration when individuals interact with Japanese Americans from particular generations. Hawaiʻi, unlike other states, is a microcosm of people from different diasporas of the Pacific Basin. Many retained their original cultural practices, but most assimilated/acculturated and blended into the State's distinct culture.

Japanese Americans' Unique Beliefs and Values Related to Leadership

Although distanced from their country of origin by several generations, cultural and spiritual values influenced by Confucianism, Taoism, Shintoism, and Buddhism are still present, but not as prominent as in earlier generations. These all influence how people respond to each other, those of different genders, and "insiders vs outsiders" to the culture. This patriarchal and hierarchical organizational framework of Asian cultures also influences Japanese-American women's leadership roles and behaviors.

Early researchers, Johnson, Marsella, and Johnson (1974) identified themes related to leadership in Japanese Americans. These four themes are (1) a strong sense of gender differences, (2) concern for hierarchy and status that manifests as deference to authority, (3) self-effacement, and (4) importance of nonverbal communication (Ishida & Inouye, 1999). These contribute to harmonious relationships, collaborations, respect for authority, loyalty, honor, and shame, and relate to a communication style that may baffle Westerners. The culture of "anticipatory perception" (Kim, Umemoto, & Atkinson, 2001) where verbal communication is held to a minimum and implicit, nonverbal, and intuitive communication is valued is incomprehensible or foreign to others who expect explicit, verbal, and rational interactions. These differences in style may contribute to perceptions of non-participating or lack of interest on the part of the Japanese American participant in an interaction.

Social Structural Factors Underlying and Influencing Leadership

Social factors influencing leadership of Japanese women are related to gender, education, and

politics. Leadership in Japan was male-dominated, until the age of modernization beginning around 1868. While continuing to gain status in Japan and elsewhere, Japanese women to this day face a "bamboo" ceiling of sorts, even in the U.S. mainland. This concept of hierarchy for gender and status manifests as self-abasement, modesty, and good manners that others perceive as self-effacing and open to misunderstanding. Although changing with each generation, the challenging of someone in authority is seen as impolite, causing the other person to "lose face" (Ishida & Inouye, 1999).

Education is a priority and highly valued. One example of this value is how mothers do not require housework if children "study hard." Another example includes the expectation that the eldest may sometimes forego their own education to work and support the younger sibling's attainment of a college degree. Once obtained, education opened the doors to opportunities which would not have been possible to the immigrant, plantation workers.

World War II had a great impact on political advancement for Japanese Americans. Following the attack on Pearl Harbor, President Roosevelt issued Executive Order 9066 which allowed the military to circumvent constitutional safeguards in the name of national defense. The order set in motion the displacement of 120,000 Japanese Americans living on the west coast. The displaced Japanese, half of whom were children, were interned for up to four years without due process of the law. The effects of interment had long lasting health effects on those imprisoned, such as two times greater incidence of heart diseases and premature deaths (Weglyn, 1976). After the war, the first generation of Japanese suffered the most, losing homes, farm lands, and businesses in addition to suffering from emotional loss of self-respect. Their second and third generation children and grandchildren forged on to position themselves as leaders in the Japanese American communities. In 2016, the U.S. Department of Labor reported Japanese Americans make up 0.2 percent of the total population, with 77.6 percent of whom speak English. Over fifty percent of the Japanese Americans hold at least a bachelor's degree. Japanese make up 2.4% of the unemployed population with 8.4% living in poverty.

Japanese Americans in Hawai'i rose politically after World War I, mainly due to the GI bill and thanks to a democratic governor (J.A. Burns) who supported Japanese Americans and other minorities in politics and leadership. To this day, Japanese Americans largely lean toward the Democratic Party, with a small percentage declaring they are Republicans. They are evenly divided in their views of the role of government; equal numbers prefer smaller government compared to "bigger" government. Approximately three-quarters of the Japanese American population reported to be registered and participated in the 2008 elections. In terms of their acceptance of homosexuality, most are accepting; specifically, six in ten Japanese Americans claim that homosexuality should be accepted as should abortion (Pew Research Center, 2012). Previously, lack of income to attend private schools and stringent admission criteria, made it difficult to get admitted to better schools. Now, they reflect the population. Japanese American women have risen to political power with the Democratic Party and serve or have served in the State and Federal houses of representative and senate.

Until recently, in academia and other institutions, Asians were found mainly in middle management positions with a few in the top categories. Of 560 deans identified by the American Association of Colleges of Nursing's (AACNs) data (AACN, 1998), Asian or Pacific Islanders comprise only 0.9%, and no particular Asian group is listed (United States Census Bureau, 2017). Finding information on leadership roles of Japanese American is particularly difficult because the U.S. Census does not desegregate Asian American/Pacific Islander sub-categories. This tendency affects specific Asian ethnic groups inclusion on boards, research programs, grants, and other positions that require minority status.

Nursing in Cultural Contexts and Leadership Influences on Patient Outcomes

In the U.S., views on nursing as the most trusted profession exist (Norman, 2016). Although nursing as a profession has increased in stature and pay, it continues to be viewed as a "women's" profession, and the different educational preparation for nurses makes it difficult for the public to distinguish among the levels of nursing. In the U.S., as in Hawai'i, nurses have a positive image as being "caring" but their status is still below that of physicians, with the exception of advanced practice nurses. Nurse practitioners or advanced practice nurses are viewed in a positive light but not necessarily above or equal to physicians (Donelan, DesRoches, Dittus, & Buerhaus, 2013).

Schmieding (2000) found no disaggregated data related to specific percentages of Japanese Americans in the American Organization of Nurse Executives, the Division of Nursing's clinical practice

roles, or National Institutes of Health (NIH) awardees. Without data relevant to different Asian ethnic sub-categories, it is difficult to determine the impact of specific groups on patient outcomes as a result of their leadership.

Experience of Two Japanese American Nurse Leaders in Hawai'i and the U.S.

Our Personal Leadership Journey

Two examples of leadership trajectories along different academic areas are discussed below. One involves a path towards leadership in research and another leadership in academics.

Case 1: Ascending the ranks to researcher

My path towards research began with the honors program in college where we were required to complete a senior honor's research thesis. A senior psychiatric nursing faculty mentored me in my junior year when I won a monetary prize for my thesis. She and another faculty encouraged me into a research trajectory and further education. In graduate school on the mainland, I was required to complete a research thesis and research projects in almost every course. This added to my interest when I also had to complete another Master's thesis and dissertation because I changed my major to psychology. Our family traveled extensively after graduation, where I worked as a staff nurse at George Washington University (GWU) Hospital, taught at the University of Pittsburgh and Maryland (UMD), then enrolled in UMD for the Ph.D. in Human Development. Unfortunate events occurred and my Ph.D. data was lost. After working another year as a Clinical Nurse Specialist (CNS) on a Federal Alcohol and Substance Abuse grant, I started teaching at the University of Hawai'i. I decided to return to school to finish and selected child psychology because of my personal interest in the development of my children.

After completing my degree, I worked as a psychologist at various child development and disabilities agencies and received a call to return to the university as a nursing faculty. My 23 years in academics were the most rewarding and fulfilling. I was able to write grants, teach, do research, mentor students and faculty, and meet incredible people in the research sector, both nurses and other disciplines. Because of these activities I gained more responsibility as Graduate Chair, Director of Nursing Research, Ph.D. coordinator, and eventually Associate Dean for Research. I was the State Board of Nursing's Chair when prescriptive authority for nurses was passed. I

am also a founding member of the Asian American Pacific Islander Nursing Association, and have served on the NINR Advisory Council, SAMHSA's Ethnic Minority Fellowship Program's Advisory Committee, and other boards.

My introduction to leadership and policy began in Washington DC, and my mentor was the Executive Legislative Aid (Dr. Patrick DeLeon) to the Senator from Hawai'i, the Honorable Daniel K. Inouye (no relation). This relationship continues to this day, and without that support and mentorship I would not have achieved what I have. Dr. DeLeon and the Senator were very supportive of nursing and psychology (my two majors); through the summer experience, I learned what impact someone could have on the health of thousands through legislation and policy.

Although I did not recognize it then, Senator Inouye supported me in the "just doing it" mentality. Because of a Department of Defense bill I helped put together for the Senator, we developed a lasting professional relationship, and I was one of many he mentored throughout his years in Washington. Other mentors included two faculty (Budzinsky and Heitkemper) members from the University of Washington. One had approached me to write a grant with her which resulted in my spending part of a summer joining her in a biofeedback and self-management workshop that formulated my research foci for over 25 years. The other served on my advisory committee for a Center Grant and has supported me and my research to this day. Both supported and encouraged me throughout the years from a distance.

Case 2: Ascending the ranks to Dean

When I was a student in a nursing course offered by the Dean of the School of Nursing at the University of Hawai'i, I decided I wanted to be "just like her." This must have been a fleeting thought at the time, but looking back I can pinpoint the idea of becoming a Dean to my senior year in nursing school and her influence on my decision. Funny, the thought never crossed my mind again as I set out to become a clinician. I returned to school to complete my duel master degrees (one in nursing and the other in public health) with the goal of becoming an expert clinician and administrator (emphasis on administration) to increase my options in nursing after graduation. Upon graduation, I took a position with a not-profit organization to become the Director of Health Services for the Pacific Rim. I established regularly scheduled health education offerings. Within three years, my department of 1,500 volunteers and seven paid staff was budget neutral. My Chief Executive Officer

(CEO) was a "gentle giant" who gave me the freedom I needed to develop as a leader in this role. Working with volunteers as the main source of manpower required the development of a different skill set than dealing with paid staff. This management job also required that I work with volunteers in disaster operations both within the islands and abroad. Managing large shelters posed its own set of challenges, having to deal with multiple organizations to coordinate roles and functions.

Moving to the mainland from Hawai'i in my 30s, I had no idea that I would eventually end up in academia. Teaching in academia was not where I remotely desired to be, but after looking for work in a metropolitan city in the western U.S., I ended up at a School of Nursing. After completing my doctorate and with tenure in hand, I took on an administrative position (MSN coordinator) and knew this was where I wanted to be if I was going to spend the rest of my professional career in academia. I developed a program with St Jude College in the Philippines to fast track foreign medical doctors who earned their BSN through a family nurse practitioner program. This program provided the revenue for travel funds for faculty to attend conferences as attendees or as presenters.

I took a few courses in leadership and character skills building classes, but realized having a voice at the administrative table was not always an easy thing to do as a Japanese female who was taught to be not seen and not heard. I knew a mentor would help immensely, so I sought a mentor who could coach me in areas I needed to refine. In addition, my husband has been a mentor for most of my adult life, and a male faculty peer provided guidance to extend my influence nationally. I eventually became a department chair for the Physiologic Department in the SON and truly enjoyed my time in this role. This role taught me how to deal administratively with faculty, providing them with resources and helping them to develop as educators, researchers, and clinicians. My love for administration allowed me to consider moving to the next level of administration in academia.

Wanting to be a Dean, I knew I had to recognize what my skill set was so that I could find a fit for a School of Nursing where I would be successful. My love for business, my desire to create/innovate, and my drive to become a leader led me to apply to a small private School of Nursing. I built this SON literally from the ground up; that is, overseeing the laying of floors, the purchase and delivery of all of the furniture for the scientific, skills and simulation labs and all classrooms. I developed many of the policies and procedures and hired the faculty and academic staff. Today (two years into this position), I have students in four nursing cohorts taking nursing courses and another 300 students in general education classes.

My leadership learning continues with the mentorship from the Chief Operating Officer (COO) of Nursing. She has extensive experience in leadership positions and her guidance has helped me to further refine my leadership skills. Life-long learning in nursing is also true if you are in a nursing leadership position, so I continue reading leadership/management books as well as take courses in this area. I continue to work on my communication skills and will frequently ask for feedback from my peers/staff and my COO.

Overall, my leadership abilities were refined over several decades. Not being a "natural" leader, I knew I had to overcome the Asian stereotypical characteristics if I wanted to hold a senior level position in administration. I learned clear communication and transparency were key to being successful. Finding ways to accentuate my direct communication style helped me become a more effective leader. I also spent considerable time searching to understand the "whys" of my position within the context of the School of Nursing. Understanding my "why" helped me set my vision for the organization. I also learned that the organizational vision will not be achieved during my tenure; my job is to set the trajectory, so those working for the organization continue to move toward that very illusive vision.

Advantages and Challenges in Our Leadership Journey

"Challenges" may include barriers, obstacles, hindrances, obstructions, difficulties, and impediments, all of which occur in academia, and manifest in different ways for many Asian American faculty members. Micro aggression was not a term used previously, but is recognized as a subtle, and sometimes not as subtle, prejudicial behaviors in supervisors and peers from other ethnic groups (Sue, Bucceri, Lin, Nadal, & Torino, 2007). It could be in the form of statements from the majority group such as "We'll take the leadership role on the grant/project and let the 'worker bees' (the Asian faculty) do the work." Another example was a senior faculty from another discipline who asked for collaboration with nurses, social workers, and public health colleagues. After an agreement was made that we would all act as co-investigators and he would be the primary

investigator, he submitted the grant without us listed as co-investigators. This was after substantial work and networking were done identifying a specific group for the project and helping develop contacts and the protocol based on my background with the Department of Health. The principal investigator did not share the final submission, but when funded, he said I would be a "consultant." There was no mention of my role in the development of the project. Despite approaching the leadership with this dilemma, nothing was done to rectify the situation.

Another challenge most Asian American women experience is the perception of being categorized as less ambitious, quieter, and reticent. Acting outside of this stereotype, they sometimes are thought of as aggressive or the "B" word. When negotiating a salary, raise, or position, supervisors are surprised that Asians are asking for equal pay for equal work. According to the Pew Research Center in 2015, hourly earnings for Asian and white women were higher than those of black and Hispanic women and higher than for black and Hispanic males (Patten, 2016).

Overcoming Challenges in the Journey

In many ways, growing up in the U.S. as a Japanese American female posed challenges for someone who aspires to become a leader in academia. For one, being female in a family with patriarchal values, childhood was one where the girls in the family were mostly invisible. While education was valued, the idea of not overshadowing your spouse (i.e., receiving more education than your spouse) and being a good mother, was subtle, but clear. Mentoring to gain leadership skills was almost nonexistent in the home environment as a woman's place in life was as a household manager and overseeing the care of the children in the home.

Japanese Americans and other Asian Americans are distinct in visual appearance and voice unlike other groups that can blend in or "pass." Moving into academia, a Japanese American female, along with other visible minorities, must overcome the barrier of being different, she must also acculturate to the norms of being an American female leader who is frequently viewed as being an assertive extrovert with refined communication skills that are tempered with finesse. While Caucasian women in the U.S. have transcended the leadership echelon in many job positions, Japanese women must deal with both the cultural, sociopolitical values they were raised with in addition to being poorly understood in a society where Asian minorities are one of the smallest minority

groups living in the United States. Kim (2011) postulates several reasons why Asians, despite having high educational levels, are less likely than white Americans to advance to management positions. One is the fact that most people perceive Asians as foreign and outsiders; another is that although they are perceived as good workers and technically proficient, they are perceived as followers rather than good leaders (Kim, 2011). These perceptions influence people's behavior. Several recent examples include being asked "how long have we been in this country," and "when were we returning to Japan." Or the previous example provided about working on grants, illustrates how advantage can be taken without fear or reprisal.

A Dutch study using Leadership Categorization Theory (Gundemir, Homan, deDreu, & van Vugt, 2014) found leadership traits are more strongly associated with White-majority than ethnic minorities. This also may be related to self-endorsement of these perceptions and result in the minority group not seeking leadership roles or a self-fulfilling prophesy for minorities.

Another significant challenge is that Japanese women desiring leadership positions also have problems finding mentors to help them overcome the stereotypes held by those who hire individuals into leadership position. Stanley, Capers, and Berlin (2007) discuss culturally sensitive mentoring and professional linkages outside the University. However, few programs exist for mentoring different minority groups with even fewer for Asian Americans.

Theoretical Frame for Women's Leadership

Our experiences with leadership have stemmed from values from our culture which influence our attitudes and behaviors to not "stick out," but be assertive in a way that is not seen as aggressive by the culture. Perhaps the model of leadership which works best is described by Helgesen (1995) by the term "web of inclusion." This describes how women lead from the center with authority emerging from connections to people which fosters a team approach. This aligns with the values in collective cultures. In relating this to the framework proposed by Bolman and Deal (1991), what seems to relate to the "web of inclusion" is their "human resource leadership" style with the strong belief and empowerment of others. These leaders develop symbols and culture to shape human behavior with a shared mission and identity of the organization in mind. One factor which may not be as prominent, is the visibility and accessibility that are in

conflict to the not "sticking out" value in Asians and older Japanese Americans. Our roles have been different by virtue of the position we occupied, but guided by the leadership framework most aligned with Japanese American values. Others may have different experiences and goals for themselves and choose leadership framework that suites their personality and values.

Suggestions for Future Japanese-American Women Leaders

We were fortunate to have had mentors to work with during our careers, but have also interacted with others. Others may have sought out their own mentors or were paired up with one in an organized manner, such as at mentoring workshops. While mentors could be Japanese or other Asian Americans, others who can help are leaders in the field who can offer different perspectives other than nursing. There are very few Japanese American leaders available to mentor others, but those who are, have been very willing to do so. One needs to forego the reticence, ask for help, and accept it gladly.

Asian American leaders should be alert to and recognize leadership qualities in other Asian Americans and provide mentoring for those who may follow or believe the maxim of "prove yourself, and wait for opportunities" instead of asking for promotion and recognition. Asian Americans must also acculturate to the "western mindset" of leadership. Extending oneself by attending social events to meet other nurse leaders, getting to know them, and allowing them to know who you are demystifies the "model minority" stereotype of Asian Americans.

Discussion and Recommendations

Nurses who are interested in leadership roles need to ask themselves what they value and enjoy in their profession and where they want to be in 3, 5, 10, or 20 years. The path will be different if you have a passion for research, academics, leadership, practice, or others. While examples of our passion for research and academia were discussed, they may be different for someone more interested in administration or practice.

If you desire a position in administration, consider how your current position prepares you for an administrative role. Working with a mentor or taking a course can assist in assessment of your strengths and challenges. Find leadership programs which can help you achieve or modify your goals if you are unable to obtain an administrative position in an institution of first choice. Investigate institutions that have diversity training and mentoring of diverse faculty and if unavailable, seek assistance in finding outside mentors or coaches. You may also seek out mid-range or short-term leadership opportunities such as volunteering to lead major initiatives in the workplace.

Furthermore, more disaggregated data for specific ethnic groups will give researchers and policy makers information for research, practice, and educational needs of this population. Building an inclusive organization is a long process but can lead to recognition of different leadership styles and diverse communication patterns.

Finally, building upon cultural strengths and values such as inclusiveness and collectivism along with politeness which may be seen as a strength or challenge, can reveal and enhance the true nature of Japanese American leadership style. While acculturation and assimilation are important, accepting and building upon ones strengths are equally helpful.

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