Winning the War for Talent in the Nursing Profession: Embrace Iceberg Demographics

James H. Johnson, Jr., PhD
William Rand Kenan, Jr. Distinguished Professor
Kenan-Flagler Business School
University of North Carolina at Chapel Hill

G. Rumay Alexander, EdD, RN, FAAN
Clinical Professor
School of Nursing
University of North Carolina at Chapel Hill
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WINNING THE WAR FOR TALENT IN THE NURSING PROFESSION: EMBRACE ICEBERG DEMOGRAPHICS

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Abstract

Supreme Court decisions on reproductive rights and affirmative action inadvertently afford the nursing profession a propitious opportunity to capitalize on the nation’s rich mosaic of iceberg demographic identities—inhaled and acquired traits that may not be visibly apparent—to address pressing worker shortages and other workplace conundrums.

Introduction and Critical Background

Profound changes in the size, composition, and geographic distribution of the U.S. population, as described in prior research (Alexander & Johnson, 2021; Johnson, Bonds, and Parnell, 2021; Johnson, 2023), are partly responsible for the nursing profession’s current workforce challenges (Aiken & Cheng, 2008; Kurtzman et al. 2022). Further complicating matters, the COVID-19 crisis and climate change-induced adverse weather events (Johnson, Parnell, and Bonds, 2022a, 2022b), combined with politically polarizing Supreme Court decisions and controversial state level policies in culture war issues like abortion, same-sex marriage, and affirmative action (Johnson & Parnell, 2023; Schlobohm & Johnson, 2023), have sparked growing labor activism—walkouts, strikes, resignations, silent quitting, and pushback on post-COVID-19 return to office mandates—in nursing and the health care professions generally as well as other sectors of the U.S. economy (Gooch, 2023; Grantham-Phillips, 2023).

Given divided government and gridlock in U.S. politics (Lopez, 2020), public opinion polls reveal that Americans are turning to companies with purpose and ethics—firms with what we have defined as “reputational equity” (Johnson & Bonds, 2020)—to lead us through the profound anxiety and crises we are currently facing as a nation. Following the senseless murder of George Floyd and partly in response to growing labor unrest, we developed a checklist of policies, strategies, tactics, procedures, and practices that some private sector firms—in an effort to create and maintain reputational equity—are adopting and implementing to recruit and retain talent. The activities in the checklist span four organizational domains: leader behaviors/demonstrated commitment; workplace culture and climate; talent recruitment, development, and retention; and community engagement and support (see Table 1 in Johnson & Bonds, 2020).
More recently, we applied the reputational equity checklist to the nursing profession, noting specifically that (Johnson, Alexander, & Bonds, 2021, p. 1)

*...to create reputational equity, the nursing leadership must undertake a comprehensive DEIB [Diversity, Equity, Inclusion, & Belonging] audit of the entire nursing profession ecosystem. That is, they must critically review and evaluate policies, procedures, and practices that govern the day-to-day operations of professional schools that train and produce the nursing workforce. The same must be done for the various components of the U.S. health-care system that rely on the talent the nursing education, training, and certifying systems produce.*

For each of the four organizational domains in our reputational equity checklist (Johnson & Bonds, 2020), we also highlighted strategies, policies, tactics, procedures, and practices that should be pursued in the nursing profession (Johnson, Alexander, & Bonds, 2021), shown in Table 1.

### Table 1: Nursing Profession Reputational Equity Checklist

<table>
<thead>
<tr>
<th>Intervention Domain</th>
<th>Strategies, Policies, Tactics, Procedures &amp; Practices</th>
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<tbody>
<tr>
<td><strong>Leader behaviors &amp; commitments</strong></td>
<td>• Housing allowances in scholarship and fellowship packages to support diverse nursing student recruitment &amp; retention</td>
</tr>
<tr>
<td></td>
<td>• Invest in affordable housing to recruit &amp; retain nurses in hospitals &amp; other health care settings</td>
</tr>
<tr>
<td><strong>Talent recruitment, development &amp; retentions</strong></td>
<td>• Advocate for immigration reforms supporting temporary visas for foreign-born nurses and place-based visas to help rural health systems recruit nurses from abroad</td>
</tr>
<tr>
<td></td>
<td>• Concentrated efforts to recruit male nurses</td>
</tr>
<tr>
<td><strong>Workplace culture &amp; climate</strong></td>
<td>• Address stereotyping, bias, &amp; discriminatory treatment of males in nursing education programs &amp; work settings</td>
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<tr>
<td></td>
<td>• Establish and support caregiving networks</td>
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<tr>
<td></td>
<td>• Encourage DEIB courageous conversations</td>
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<tr>
<td><strong>Community engagement &amp; support</strong></td>
<td>• Support mental wellness, food security, and residential stability for nursing workforce</td>
</tr>
<tr>
<td></td>
<td>• Establish nursing career pipeline program in schools with large historically marginalized student populations</td>
</tr>
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Despite recent attacks on diversity and inclusion initiatives in both public and private sector organizations (Butler, 2023; Chronicle Staff, 2023; Grantham-Phillips, 2023; Guynn, 2023; Hsu, 2023; The Conference Board, 2023), we assert that member organizations in the nursing profession must adopt the activities in the checklist “to demonstrate that they are inclusive and equitable places to work with civically engaged leaders that are poised and willing to address society's most pressing ills, including systemic racism” (Johnson & Bonds, 2020, p.1). Adopting the promising practices will enable
the nursing profession and public and private sector organizations that employ nurses to proactively re-engineer their workplace culture and climate so that they become employers of choice, organizations where everybody wants to work (recruitment) and no one wants to leave (retention) (Johnson & Bonds, 2020; Argo & Sheikh, 2023).

**Reimagining Talent Management**

More specifically, to win the war for talent in a labor market that is both browning (more racially and ethnically diverse) and graying (aging due to extended longevity and declining fertility) (Johnson, 2023; Johnson, Bonds, and Parnell, 2021), the nursing profession must redesign HR policies and practices to imbue current employees with not only a feeling of inclusion but also a strong sense of belonging in the workplace (Argo & Sheikh, 2023). Popularly stated, the nursing profession must strive to create workplaces where employees feel that have been invited to the dance and the DJ is playing their types of music!

Additionally, the nursing profession must reimagine talent recruitment so that it aligns with the re-engineered employee-centric workplace culture and climate. Building on the lessons learned from the COVID-19 crisis, this will require the nursing profession to identify trusted messengers and develop trusted messages that convey, through a multi-channel communication strategy that reaches the five generations that currently make up the U.S. workforce (Sonnenberg, 2023), the virtues of working in a profession with reputational equity, that is, where belonging and wellbeing are demonstrated core values for both employees and patients (Johnson, Bonds, and Alexander, 2021; Johnson, Bonds, Parnell, and Bright, 2021).

**Embracing Iceberg Demographics**

Winning the war for talent requires the nursing profession not only to embrace but also to invest—purposefully and intentionally—in our nation's demographic diversity as a strategic imperative. However, given the Supreme Court's shortsighted decisions on affirmative action and reproductive rights (Johnson & Parnell, 2023), the nursing profession also must adopt the iceberg model of diversity (Johnson, Bonds, and Alexander, 2021; Think Up Consulting, n.d.). Nursing HR professionals must move beyond race, ethnicity, and gender—the 30% of an individual’s demographic identity that is visible—in talent retention and recruitment. They must devise, instead, workforce development strategies that leverage the 70% of inherited and acquired traits and experiences in the nation’s working age population that are not readily apparent but, properly understood and accommodated, can be value-added assets in the workplace (Johnson & Parnell, 2023; Sutorius, 2022).

Figure 1 graphically depicts iceberg demographic indicators that are common in the U.S. working age population. As we have noted elsewhere (Johnson, Bonds, and Parnell, 2021), given forecasted continued slowing total U.S. total population growth and non-Hispanic white population decline as well as other disruptive demographic trends, including premature deaths of despair among prime working age individuals (Case & Deaton, 2020), embracing and accommodating these and other iceberg identities is a strategic necessity for the nursing profession (Alexander & Johnson, 2021).
For illustrative purposes, we briefly explain why workplace accommodations are important to attract and retain talent representing three of these iceberg demographic identities—the mixed-race population, menopausal women, and working age individuals with cognitive impairments.

**Mixed-Race Identities**

The U.S. mixed-race population is one of the nation’s most rapidly growing demographic groups, increasing by 33.8 million or 276% between 2010 and 2020 (Rico, Jacobs, and Cortiz, 2023; Parker, et al., 2015). By comparison, the U.S. total population grew by 7.4 percent (22.7 million) during this period (Johnson, Bonds, and Parnell, 2021). And during the pandemic, while the U.S. total population increased by 0.5 percent (1.8 million), the nation’s mixed-race population grew by 5 percent (406,548) (Johnson, Bonds, and Parnell, 2021). Contributing to the “browning” of America, mixed-race population growth is driven primarily by immigration from Asia, Latin America, and the Middle East and intermarriage between individuals from various countries in these regions and American Whites, Blacks, and other native-born people of color (Rico, Jacobs, and Cortiz, 2023; Parker, et al., 2015).
This population does not fit into the race and ethnic categories that HR units typically use to sort employees. Moreover, all too often, very little, if any, attention is devoted to the diverse backgrounds, cultural experiences, and other invisible attributes of mixed-race employees that can add value in the new world of work. Consequently, it is not uncommon for mixed-race individuals to express strong feelings of not fitting in or belonging in organizations (von Numers, 2023; Vox First Person, 2021). Given the mixed race population accounted for nearly one-quarter of U.S. net population growth during the pandemic and their share of future growth is projected to be even greater (Parker, et al., 2015), it is vitally important for the nursing profession to develop accommodations to intentionally recruit and retain talent from this iceberg demographic (Mohan, 2020).

**Menopausal Women**

Because men are doing so poorly in America society today (including giving up on pursuing a college education) (Cerullo, 2022; Cowan, 2018; Kahloon, 2023; Prakash, 2022), women increasingly are occupying pivotal roles in the paid workforce across nearly all sectors and occupations in the American economy (Almedia & Estep, 2023; Schram & Figueiredo, 2020; BLS, 2021). Consequently, firms will have to do more than they have in the past to accommodate women, including becoming menopausal friendly workplaces (Otterman, 2023).

Research indicates that 75% of women will experience menopausal symptoms at some point and 25% will experience serious symptoms (D’Angelo, et al., 2023). Although some women reach menopause before the age of 40, 51 reportedly is the average when women begin to experience menopausal related health problems, which include brain fog, mood changes, hot flashes, weight gain, insomnia, low energy levels, and low libido (D’Angelo, et al., 2023; Vanderzalm, Deschenes, & Kunyk, 2023; Aldermore Bank, 2022).

Why is this an important talent recruitment and retention issue (Castrillon, 2023; Bright Horizons, n.d.)? Because an estimated 60 percent of women of menopausal age are in the workforce and the majority reportedly are unwilling to share information about their menopausal related health problems with their manager or supervisor and other work colleagues (D’Angelo, et al., 2023; Vanderzalm, Deschenes, and Kunyk, 2023). Moreover, 1 in every 5 menopausal women contemplates leaving the workforce given their symptoms (D’Angelo, et al., 2023; Castrillon, 2023). As one writer put it, “…menopause isn’t something just women need to know about—men should be aware too so they can support colleagues, friends and family” (Aldermore Bank, 2022). Moving forward, the role of women—of all ages—in the workforce will be vitally important given declining male labor force participation (Prakash, 2022).

**Cognitive Impairments**

Research confirms that the number of U.S. working age people with a disability who are employed increased by an estimated 1.5 million since 2020 when the COVID-19 pandemic began (Li, et al., 2023; Deitz, 2022). Much of this increase is thought to be due to long COVID which has led to an accelerated increase in cognitive impairments concentrated mainly in young adults under age 40. As one writer states, “there are more Americans who say they have serious cognitive problems—with remembering, concentrating, or making decisions—than anytime in the last 15 years” (Paris, 2023). Describing the symptoms, which can range from mild to debilitating, a young software engineer reportedly said, “I felt like I was permanently hung over, drunk, high and in a brain freeze all at once” (Paris, 2023). While brain fog is a common symptom, some research suggest that long COVID may cause neurovascular changes resulting in brain injury (Deitz, 2022; Paris, 2023).
Commenting on the labor market implications of the documented increase in disabled workers since the beginning of the COVID crisis, a federal reserve bank researcher noted (Deitz, 2022),

...these disabled workers can benefit from workplace accommodations to help them remain productive and stay on the job, particularly as the majority deal with fatigue and brain fog, the hallmarks of long COVID.

He goes on to note that flexible scheduling and telework may be reasonable accommodations for workers suffering from long COVID.

Additional information and rationales for including these three and other iceberg demographic identities in the nursing profession’s workforce strategy can be accessed from the hyperlinks in Table 2.

Table 2: Sources of Information about Iceberg Demographic Identities

<table>
<thead>
<tr>
<th>Iceberg Identities</th>
<th>Additional Information</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>2. <a href="https://stateline.org/2022/05/13/multiracial-residents-are-changing-the-face-of-the-us/">https://stateline.org/2022/05/13/multiracial-residents-are-changing-the-face-of-the-us/</a></td>
</tr>
<tr>
<td></td>
<td>5. <a href="https://www.inclusiveemployers.co.uk/blog/how-to-support-multiracial-community/">https://www.inclusiveemployers.co.uk/blog/how-to-support-multiracial-community/</a></td>
</tr>
<tr>
<td>Neurodiverse</td>
<td>1. <a href="https://hbr.org/2017/05/neurodiversity-as-a-competitive-advantage">https://hbr.org/2017/05/neurodiversity-as-a-competitive-advantage</a></td>
</tr>
<tr>
<td>Foreign born</td>
<td>1. <a href="https://www.cbo.gov/publication/58939#:~:text=About%2045%20million%20people%20living,were%20born%20in%20other%20countries">https://www.cbo.gov/publication/58939#:~:text=About%2045%20million%20people%20living,were%20born%20in%20other%20countries</a>.</td>
</tr>
<tr>
<td>Demographic</td>
<td>Resources</td>
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[https://williamsinstitute.law.ucla.edu/visualization/lgbt-stats/?topic=LGBT#density](https://williamsinstitute.law.ucla.edu/visualization/lgbt-stats/?topic=LGBT#density) |
[https://www.aarp.org/work/caregiving-resources/](https://www.aarp.org/work/caregiving-resources/)  
[https://hpi.georgetown.edu/workplace/](https://hpi.georgetown.edu/workplace/) |
| Grief Stricken | [https://hbr.org/2019/07/when-a-colleague-is-grieving](https://hbr.org/2019/07/when-a-colleague-is-grieving)  
[https://www.worklifepartnership.org/food-insecurity/](https://www.worklifepartnership.org/food-insecurity/) |
[https://bipartisanpolicy.org/report/housing-supply-and-homelessness/?gad_source=1&gclid=CjwKCAiAx_GqBhBQIwALDNzIk11LeuRZPaRoZitYd9HfIbG-pYOUZOTkUDzVoKG4I_3n51SLujrRoCzakQAvD_BwE](https://bipartisanpolicy.org/report/housing-supply-and-homelessness/?gad_source=1&gclid=CjwKCAiAx_GqBhBQIwALDNzIk11LeuRZPaRoZitYd9HfIbG-pYOUZOTkUDzVoKG4I_3n51SLujrRoCzakQAvD_BwE) |
| Moonlighters | [https://www.shrm.org/resourcesandtools/hr-topics/employee-relations/pages/moonlightingworkers.aspx](https://www.shrm.org/resourcesandtools/hr-topics/employee-relations/pages/moonlightingworkers.aspx)  
| Generations  | [https://www.betterup.com/blog/generations-in-the-workplace#:~:text=As%20of%202023%2C%20there%20are%20five%20categories%20by%20decade.](https://www.betterup.com/blog/generations-in-the-workplace#:~:text=As%20of%202023%2C%20there%20are%20five%20categories%20by%20decade.)  
[https://www.shrm.org/executive/resources/articles/pages/five-generations-how-leaders-adapt.aspx](https://www.shrm.org/executive/resources/articles/pages/five-generations-how-leaders-adapt.aspx) |

Source: compiled by authors.
Recommendations

To succeed in the intense competition for talent in the U.S. economy today, we recommend that public and private sector organizations in the nursing profession take the following steps, which should be pursued in serial order:

- Conduct pulse surveys to determine the prevalence of these and other iceberg demographic identities within the existing workforce.

- Based on the range and prevalence of iceberg demographic identities, create employee resource groups and solicit input from the various groups regarding what can be done to better accommodate them in the workplace (i.e., make them feel like they belong). Enhanced engagement is highly correlated with worker retention and productivity as well as firm profitability.

- Institute the required accommodations to increase worker retention rates and leverage the diverse iceberg demographic employee resource groups as trusted messengers in marketing and advertising to recruit new workers with similar iceberg identities.

Given current workforce challenges and the tight U.S. labor market, it is strategically important for the nursing profession to move swiftly and act with purposeful intentionality in pursuing these recommendations. Firms in other economic sectors have already begun to embrace the iceberg model of talent recruitment and retention—for example, rebranding themselves as menopausal friendly workplaces (Otterman, 2023). Ample opportunities exist, given the richness of our nation's diverse identities, for the nursing profession to achieve greater reputational equity in the ongoing fierce war for talent by taking the steps outlined above to reinvent itself as the employer of choice “where everybody wants to work and nobody wants to leave” (Johnson & Bonds, 2020, p. 4).
References Cited


Bright Horizons (n.d.). How to be a Menopause Friendly Employer and Why It’s Important. https://www.brighthorizons.co.uk/family-zone/family-resources/additional-resources/female-life-stages/menopause-friendly-employer


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