

Mentoring for Black Nurses – A retrospective report



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The Canadian Black Nurses Alliance seeks to foster an alliance across Canada of Black Nursing leaders that cover the full spectrum of nursing. These Black Nursing leaders will foster mentorship relationships with aspiring Black Nurses and Black nursing students. This is not a simple task, but we are committed to elevating nursing within the Black community by being at the various tables and arenas.



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Executive Summary

Despite their critical contributions to healthcare, Black nurses continue to face systemic barriers such as racism, discrimination, and a lack of tailored support systems, forcing them to navigate obstacles at every stage of their careers. This report delves into the unique challenges faced by Black nursing students and professionals in Canada, emphasizing the critical role of mentorship in healthcare, particularly within the nursing profession. By evaluating existing mentorship frameworks and programs, the report identifies significant gaps in their ability to adequately support Black nurses. It highlights the Canadian Black Nurses Alliance's (CBNA) initiatives as a promising approach that addresses these gaps. Finally, the report provides actionable recommendations to strengthen and expand mentorship initiatives, aiming to enhance the professional development, retention, and overall well-being of Black nurses across the country.

Context

The nursing workforce in Canada is regulated at the provincial and territorial levels, with Registered Nurses (RNs) playing a critical role across hospitals, long-term care facilities, community health centres, and private practices. In 2023, the number of RNs employed in Canada increased to 259,276, marking an annual growth rate of 1.6%. The data suggests that Black individuals are well-represented in nursing compared to their overall presence in the Canadian workforce, with evidence pointing to a continued increase in their representation within the field.

However, Black nurses continue to encounter systemic challenges that hinder their education, career progression, and overall workplace experience. Within nursing education, research highlights experiences of exclusion and discrimination in clinical placements. Many Black nursing students report feeling isolated in their programs and struggling to find mentorship or faculty support. Financial constraints further complicate their ability to complete their studies, as many must balance employment with coursework, increasing the risk of burnout and attrition.

In the workforce, Black nurses frequently report being subjected to bias from colleagues, patients, and supervisors, which affects their professional experiences and progression into leadership roles. They often face heightened scrutiny of their skills and qualifications, leading to a lack of trust in their expertise and increased pressure to prove their competence. A lack of institutional support further exacerbates these challenges. Even those who attain leadership positions often encounter additional challenges, including a lack of peer support, racial bias in

evaluations, and the expectation to navigate their racial identity in ways that white colleagues do not.

The role of mentorship

Mentorship is a vital component of healthcare. By facilitating knowledge transfer between experienced professionals and early-career practitioners, mentorship enhances clinical skills, leadership competencies, and decision-making. It also plays a critical role in supporting healthcare workers' well-being, particularly in high-stress environments, by providing strategies for managing workload and preventing burnout. Evidence suggests that healthcare professionals engaged in mentoring relationships experience lower stress levels and greater job satisfaction.

In nursing, mentorship is known to support clinical skill development, professional growth, and career advancement. It offers early-career nurses numerous benefits, including increased confidence, job satisfaction, and smoother integration into the workforce, alongside personalized career guidance and personal development. However, there is ambiguity in defining mentorship in nursing, and mentorship models vary widely — ranging from those that prioritize the growth and development of mentees to those that focus on organizational benefits such as staff retention and succession planning. While frameworks from organizations like the Canadian Nurses Association provide structured tools and guidelines, they often fail to account for systemic inequities, particularly for Black and racialized nurses.

The lack of equity considerations in mentorship frameworks and program design contributes to critical gaps in practice and implementation. Existing mentorship programs in Canada play a vital role in supporting nurses at all career stages, helping them build essential skills, navigate workplace challenges, and transition into leadership roles. These initiatives serve Internationally Educated Nurses (IENs), early-career nurses, mid-career professionals, and nursing students by providing career guidance, networking opportunities, and skill development. However, most rely on informal feedback rather than formal evaluation, making it difficult to assess their impact. A glaring omission is the profound lack of targeted initiatives addressing the unique needs of Black and racialized nurses.

Case study: The Canadian Black nurses alliance's mentorship programs

The CBNA is one of the few organizations addressing this gap, developing a mentorship framework to better support Black nurses and nursing students. However, greater investment and evaluation are needed to ensure mentorship initiatives effectively address the systemic

barriers Black nurses face in education and the workforce. Qualitative feedback from CBNA's programming suggests mentorship has had a significant impact on both Black mentors and mentees. Participants joined the program with diverse motivations, including career guidance, emotional support, networking opportunities, and a deeper understanding of the Black nursing experience. Many shared that their experiences in the program led to increased confidence, a stronger sense of community, and greater clarity in their career pathways, highlighting the powerful role that Black mentorship plays in fostering personal and professional growth.

Conclusions and recommendations

To enhance mentorship opportunities for Black nurses in Canada, this report presents key recommendations aimed at fostering deeper institutionalization and more robust evaluation of Black-focused mentorship programs:

- Establish formal, long-term mentorship programs within healthcare organizations and professional associations, ensuring sustained funding and infrastructure beyond informal or volunteer-based models.
- Integrate mentorship into nursing education by providing structured support for Black nursing students to enhance retention, reduce isolation, and foster early professional development.
- Expand leadership-focused mentorship pathways to support Black nurses in advancing into executive and specialty roles.
- Enhance evaluation through competency-based frameworks by assessing mentorship effectiveness in career growth, retention, and leadership development. Implement race-disaggregated data collection and continuous feedback mechanisms to improve program impact and accessibility.

Context

As the demand for healthcare services continues to grow, gaining a comprehensive understanding of the nursing workforce has become increasingly critical. Such insights are essential not only for addressing systemic challenges but also for promoting equitable representation within the profession. The following sections offer an overview of the nursing workforce, with a particular focus on the systemic barriers that Black nurses encounter in both educational and employment settings.

Profile of the nursing workforce in Canada

In Canada, the nursing profession serves as a cornerstone of the healthcare system, playing a critical role in delivering patient care across diverse settings, including hospitals, long-term care facilities, community health centers, and private practices. The profession is regulated by provincial and territorial bodies, which ensure that nurses meet standardized educational and practice requirements.¹ According to the latest data from the Canadian Institute for Health Information, the number of Registered Nurses (RNs) employed in 2023 increased to 259,276, representing an annual growth rate of 1.6%. While modest gains were observed across most sectors, including hospitals (0.4%), long-term care (1.7%), and private nursing agencies (2.1%), community health agencies saw a slight decline (0.2%). The overall RN supply grew by 2%, surpassing the 1% growth recorded in 2022.²

As of 2021, Black individuals made up 4.3% of the total workforce in Canada.³ However, their representation within nursing occupations varies significantly, with some roles having higher participation rates while others show an underrepresentation. Table 1 provides a breakdown of workforce representation by racial group across four key nursing occupations. The data reveals that Black individuals are notably present in licensed practical nursing, where they account for 9.24% of the workforce, more than double their overall workforce representation. They also make up 6.63% of registered nurses and registered psychiatric nurses. However, their representation is lower in nurse practitioner roles (3.53%), which require additional education and specialization, and in nursing coordinators and supervisors (5.73%), which involve leadership and management responsibilities.

Table 1. Representation by racial group in nursing

Occupation	White	Black	Other Racialized Groups
Registered nurses and registered psychiatric nurses	73.0%	6.63%	20.3%
Nurse practitioners	84.5%	3.53%	11.9%
Licensed practical nurses	67.8%	9.24%	23.0%
Nursing coordinators and supervisors	78.7%	5.73%	15.6%

Source: Statistics Canada. (2023, May 10). *Visible minority by occupation, highest level of education and generation status: Canada, provinces and territories*.

<https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=9810033001&utm>

A closer look at Internationally Educated Nurses (IENs), who are playing an increasingly critical role in addressing Canada's nursing shortage, offers further context. In 2023, IENs accounted for 68% of the net increase in the RN supply, contributing 6,256 new RNs to the workforce.⁴ A recent study focusing on IENs revealed that 84% of immigrant nurses working in Canada originate from the Global South, with the Philippines (30%), Africa (15%), the Caribbean (15%) and India (8%) being the primary regions of origin.⁵ In other words, most IENs are racialized (68%) and, of these, 30% come from countries with majority Black populations. However, systemic barriers such as complex licensing processes, credential recognition, and discriminatory practices continue to hinder their integration.⁶

The policy barriers encountered by IENs in Canada are well-documented.⁷ To practice in the country, IENs must navigate a multi-step pathway that includes credential assessment, language proficiency testing, bridging programs, and regulatory examinations. The credential recognition process, in particular, is often protracted and expensive, demanding extensive documentation of education, training, and professional experience. These hurdles make it challenging to align foreign qualifications with Canadian standards, frequently resulting in underemployment and significant delays in integrating into the healthcare workforce. Such barriers not only hinder the professional aspirations of IENs but also exacerbate the existing shortages in Canada's healthcare system.

Even after overcoming the initial barriers to entry, many IENs continue to face substantial challenges in the workplace, with racialized IENs often being subjected to discrimination, exclusion, and biases that hinder their professional experiences and opportunities. For example, qualitative study involving 140 interviews with IENs and International Medical Graduates (IMGs) in Canada highlighted a troubling pattern of workplace discrimination.⁸ Unlike IMGs, who often

benefit from their higher status in the medical profession, IENs frequently face challenges such as having their competence questioned, enduring derogatory remarks, or even encountering aggressive behavior from coworkers, management, and patients. While physicians generally report fewer issues and enjoy greater respect, IENs struggle with a pervasive sense of “otherness,” often needing to work harder to prove their qualifications and facing a professional hierarchy that privileges Canadian-trained, white, and English-speaking nurses.

Anti-Black racism permeates the nursing profession in Canada, affecting both Canadian-born nurses and IENs. Despite being overrepresented in some nursing roles relative to their share of the total workforce, Black individuals continue to encounter systemic barriers in education and employment that create unique obstacles not faced by their white counterparts. These challenges shape their experiences in the profession, influencing career progression, workplace dynamics, and overall well-being. The next section will delve deeper into the issue of anti-Black racism within the nursing profession.

Barriers for Black nurses

Historically, structural racism barred Black individuals from accessing nursing education and professional opportunities. For instance, Black students were excluded from Canadian nursing schools as late as the early 1940s, as the profession was predominately reserved for young, single, white women.⁹ Although overt exclusionary practices have diminished, covert forms of discrimination and anti-Black racism persist, shaping the professional landscape for Black nurses.¹⁰ Recognizing the pervasive impact of anti-Black racism, prominent nursing organizations, including the Canadian Nurses Association (CNA) and the Registered Nurses’ Association of Ontario (RNAO), have publicly denounced anti-Black racism and discrimination in the profession.^{11, 12}

Barriers in education

The representation of Black student nurses in Canada remains poorly understood due to significant gaps in race-based data collection. Moreover, research often excludes students who withdraw or do not complete their nursing programs, which limits the ability to fully analyze the factors affecting retention and success. This exclusion creates an incomplete picture, as the experiences of those who leave their programs, often linked to systemic barriers, are not adequately captured. Despite these limitations, qualitative studies offer critical insights into the systemic issues at play.

One prominent barrier is the experience of discrimination and exclusion within nursing programs. For instance, research on bullying during clinical placements reveals that Black

nursing students feel ignored or marginalized by their white peers and faculty members.¹³ This sense of exclusion fosters feelings of isolation, undermining their confidence and creating a learning environment that can hinder academic and professional growth. Other students expressed that their racial identity forces them to develop a “tough skin” to navigate these challenges and endure the microaggressions they receive.

Research also raises significant concerns about the structure and content of nursing education, particularly its reliance on a Eurocentric foundation that perpetuates stereotypes, prejudice, and discrimination against equity-deserving groups, including Black communities.¹⁴ This narrow focus fails to equip students with the knowledge and skills needed to provide culturally competent care to historically marginalized populations. For years, the experiences, contributions, and even the existence of Black nurses in Canada were largely excluded from nursing education, creating a critical gap in training. Only recently have steps been taken to address these shortcomings.¹⁵

Beyond discrimination, additional structural barriers significantly hinder the success of Black nursing students. Financial constraints are a major challenge, as many students struggle to afford tuition, textbooks, and other educational materials. This financial burden is often compounded by the need to balance work and studies, which can lead to burnout and difficulties in maintaining a healthy work-life balance. Furthermore, the lack of mentorship and support systems tailored to the unique experiences of Black students exacerbates these challenges.¹⁶ Without access to role models or advocates who understand their struggles, Black students may feel isolated and unsupported, which can negatively impact their academic performance and mental health.

Barriers in the workforce

Access to employment

Systemic and unconscious biases profoundly impact the hiring of Black individuals across Canada, contributing to the undervaluation of their social and emotional skills and limiting their career opportunities.¹⁷ The nursing profession is no exception. For example, the RNAO’s Black Nurses Task Force (BNTF) report highlights how these biases are deeply embedded in nursing education and employment practices.¹⁸ Black nursing students are often stereotyped as less capable or “lazy” compared to their white peers, affecting the quality of references they receive.

Systemic racism also influences clinical placements, with Black students frequently excluded from highly regarded opportunities in areas such as labour and delivery, intensive care units (ICU), and neonatal intensive care units (NICU). Instead, they are often directed to roles with

limited growth potential, such as long-term care facilities. Black nurses are acutely aware of these racial disparities—so much so that 63.6% considered using an ‘English’ name on their resumes to improve their interview prospects.¹⁹

Studies show that mentorship plays a critical role in helping Black nurses access employment opportunities, especially in fields like nursing, where networks and referrals significantly influence hiring processes.²⁰ Mentors often provide access to unadvertised job openings and encourage mentees to apply for higher-level roles, even when they feel underprepared. Such support is pivotal in the transition from education to employment. Effective mentorship also expands professional networks, connecting mentees with influential individuals and creating pathways to job offers or targeted invitations to apply for specific roles. Additionally, mentors help mentees develop essential skills, offer constructive feedback, and build the confidence needed to thrive in job applications and performance evaluations. For Black women, in particular, mentors can act as advocates within hiring committees and offer references that help counteract bias and discrimination. However, a systemic lack of formal mentorship opportunities for Black nurses continues to limit access to these critical career development supports, limiting the opportunities to employment and advancement that are more readily offered to their white counterparts.^{21,22}

Workplace environment

Even when Black nurses secure employment, systemic challenges within the workplace often impede their professional growth, job satisfaction, and overall well-being.^{23,24} Research examining anti-Black racism in Canada’s healthcare system reveals that Black nurses often encounter discrimination through the attitudes of colleagues, patients, and leaders.²⁵ For example, many face prejudiced comments about their appearance, such as being told their natural hair is “unprofessional” and having their qualifications questioned.^{26,27} Additionally, Black nurses report experiencing refusals of care and differential treatment from patients, particularly white patients, who express a preference for white nurses and doubt their competence due to racial stereotypes.^{28,29} Systemic inequities in the application of workplace standards amplify these challenges, with Black nurses often facing harsher consequences for mistakes compared to their white colleagues.³⁰ These disparities are reflected in Ontario, where 88.3% of Black nurses report experiencing racism and discrimination in their roles. Furthermore, 60.5% indicated feeling uncomfortable or very uncomfortable in workplace settings due to their race, colour, or ethnicity.³¹

Black nurses also report a lack of support in the workplace, particularly from managerial staff. Many fear that voicing concerns may lead to being perceived as “arrogant,” perpetuating harmful stereotypes and further isolating them.³² This reluctance to speak out is reflected in a

RNAO's report, which found that the majority of respondents left experiences of racism unreported due to fears of retaliation or further marginalization.³³ Many also expressed uncertainty about how to address these issues, unsure of who to contact or what actions would be taken by Human Resources or nursing unions.³⁴ Even when incidents are reported, such as a patient using a racial slur, complaints are often met with dismissive or vague responses, leaving Black nurses feeling unsupported and unheard.³⁵ The cumulative impact of these experiences takes a significant toll on mental health, with RNAO's study revealing that nearly 63% of respondents reported increased stress, depression, and anxiety due to discrimination and microaggressions.³⁶ Over time, these repeated interactions contribute to feelings of being "less than" and diminished self-worth.³⁷

Barriers to advancement

Black nurses often encounter a series of obstacles that impede their access to leadership roles, with barriers that make advancement anything but straightforward. Many report feeling overlooked and undervalued, often being assigned more physically demanding and strenuous roles.³⁸ This consistent lack of recognition diminishes their motivation to pursue professional growth. Over time, this leads many to adopt a mindset of simply meeting the minimum requirements of their roles, which negatively impacts their engagement, job satisfaction, and overall sense of belonging within the workplace.

Research highlights that, compared to their white counterparts, Black nurses are significantly less likely to advance into leadership positions.³⁹ Contributing factors include limited access to mentorship, fewer professional development opportunities, and pervasive implicit bias. Research has further demonstrated that within the nursing profession, healthcare employers are resistant to making changes in leadership selection processes.⁴⁰ This stagnation is exacerbated by nursing leadership theories and frameworks that often fail to incorporate race-based considerations, with Black women often rendered invisible.⁴¹

Even when Black nurses do achieve leadership roles, they continue to face distinct challenges. These include a lack of peer support, experiences of unfair treatment related to their race, and the complex task of navigating their racial identity in predominantly white professional environments.⁴² Moreover, because Black nurses often face heightened scrutiny of their qualifications, they are particularly vulnerable to upward harassment. This form of workplace mistreatment occurs when subordinates challenge, undermine, or obstruct the leadership of those in supervisory roles through behaviours such as resistance, non-compliance, and persistent questioning of decisions.⁴³ Upward harassment and bullying not only lead to physical and psychological impacts on those receiving the mistreatment but also contribute to a toxic

workplace culture, diminished patient experiences, and high turnover rates among newly graduated nurses.⁴⁴

The Role of Mentorship

The literature highlights mentorship as a reciprocal and collaborative relationship, where individuals work toward shared goals with mutual accountability for outcomes.^{45,46,47} It is widely recognized as a dynamic process in which a seasoned professional offers guidance, role modelling, and psychological support to someone with less experience.⁴⁸ While not a cure-all, mentorship holds significant potential to equip Black nurses with essential skills, help them navigate barriers, and foster support networks and pathways for career advancement. However, as this section will explore, such programs are unevenly distributed and often lack targeted design and implementation for the specific needs of Black nurses, which limits their accessibility and overall impact.

Benefits of mentorship in healthcare

Mentorship plays a critical role in healthcare, enhancing workforce performance, driving engagement, and promoting continuous learning.⁴⁹ By connecting experienced professionals with novice practitioners, mentorship facilitates the exchange of knowledge, skills, and leadership competencies to the next generation of healthcare workers.⁵⁰ This exchange not only strengthens individual capabilities but can also foster a culture of collaboration within the healthcare system.

Healthcare professionals face significant challenges, including high levels of burnout, psychological stress, and depression,⁵¹ and led to increased absenteeism which were exacerbated by the COVID-19 pandemic.⁵² Mentorship emerges as a vital support system in this context, equipping healthcare professionals with practical strategies for time management, prioritization, and self-care. Evidence from a cross-sectional study indicates that healthcare workers engaged in mentoring relationships were significantly less likely to report burnout compared to peers without such support.⁵³

Beyond individual well-being, mentorship has the potential to contribute to patient care quality and clinical decision-making.⁵⁴ For early-career healthcare professionals, mentors provide valuable guidance in refining their clinical judgment, gaining exposure to diverse medical cases, and developing problem-solving skills.⁵⁵ Additionally, mentorship helps cultivate essential soft skills, such as empathy, communication, and teamwork, all of which contribute to more effective and compassionate patient care.⁵⁶

The value of mentorship can be particularly pronounced for equity-deserving groups, but its impact depends on how it is structured. For example, a study on the Black Physicians of Canada Mentorship Program, which paired Black early-career physicians with Black mentors, found that the program helped to increase confidence, improve navigation of systemic barriers, and provide valuable career guidance.⁵⁷ Its success was driven by a mentorship model that connects individuals with mentors who share similar racial backgrounds and lived experiences, providing perspectives and support often absent in traditional mentorship programs.⁵⁸ There is a body of literature emphasizing that for mentorship to be effective, institutions must critically examine how race, power, and systemic inequities shape mentoring relationships. This includes ensuring that mentors and mentees are matched in ways that foster culturally relevant relationships and provide meaningful support.⁵⁹

The role of mentorship in nursing

As a regulated profession, nursing has well-established competency frameworks, standardized exams, and practicum requirements.⁶⁰ Given its strong emphasis on experiential learning, or “learning by doing,” mentorship and coaching play a particularly important role in supporting skill development and career progression in nursing.⁶¹ Research widely acknowledges the significant benefits of mentorship for early career nurses, such as improved confidence, increased job satisfaction, feelings of belonging, successful integration into the workforce, career guidance, career advancement, and personal growth.^{62, 63} Mentorship can occur at every stage of a nursing career, offering valuable support during key transitions, such as moving from education to practice, integrating IENs into the Canadian workforce, and advancing mid-career nurses into leadership roles.^{64, 65} Mentorship has also occasionally been used as a strategy to improve retention within the nursing workforce.⁶⁶

However, there remains ambiguity around the definitions, roles, and expectations of mentorship in nursing. For example, mentorship and preceptorship are often used interchangeably, despite representing distinct relationships. Preceptors provide structured, short-term guidance focused on skill development and role acclimation, typically during onboarding or training periods. Mentorship, on the other hand, often extends beyond task-specific training to include long-term guidance, career development, and holistic support for mentees’ personal and professional growth.⁶⁷

Mentee-mentor relationships can take on various forms, including apprenticeship, cloning, nurturing, and friendship.⁶⁸ These categories reflect a range of approaches to guidance and support, from skill-based learning (apprenticeship) to more personal and relational support (friendship). Moreover, mentorship can be informal or structured, each with its advantages and

limitations. Informal mentorship often arises organically, fostering flexibility and personalized guidance. However, such relationships typically depend on chance connections, placing the onus on mentees to proactively seek out mentors who align with their goals and interests. Structured mentorship programs, on the other hand, can be leveraged to address accessibility by systematically pairing mentors and mentees, thereby creating opportunities for equity-deserving individuals. While these programs can be designed to foster inclusivity, diversity considerations are often overlooked in their implementation. Additionally, they may lack the personal touch of informal mentorship, risk feeling formulaic, and demand administrative effort to maintain.⁶⁹

The literature presents diverse views on the primary beneficiaries of mentorship. One common approach is the mentor-mentee dyad, which emphasizes the personal and professional development of mentees, particularly early-career nurses with limited experience.⁷⁰ While mentee-centered, its success often depends on institutional support to provide structure and resources. Alternatively, some perspectives conceptualize nursing mentorship as a triadic relationship involving the mentor, the mentee, and the employing organization.⁷¹ This framework places emphasis on the organizational benefits of mentorship, including retention, succession planning, and promotion.⁷²

A literature review of mentorship programs in nursing explored the different models aimed at supporting skill development, career advancement, and professional well-being.⁷³ A systematic search of academic and clinical research databases revealed seven distinct mentorship models. Table 2 provides an overview of each model, highlighting their respective strengths and limitations.

Table 2. Overview of mentorship models

Mentorship Model	Description	Strengths	Limitations
Dyad Mentorship	One-on-one pairing with an experienced mentor, emphasizing reciprocal engagement.	Structured, tailored to specific specialties, focused on professional development.	Success depends on compatibility and requires institutional support.
Peer Mentorship	Members of similar rank mentor each other collaboratively, fostering shared learning.	Encourages collaboration, provides emotional support, strengthens professional relationships.	Lacks clear structure.
Group Mentorship	A single mentor supports	Maximizes resources, builds a	Less individualized attention,

Mentorship Model	Description	Strengths	Limitations
	multiple mentees, promoting community learning.	sense of community, encourages discussion and ongoing support.	success depends on group dynamics and engagement.
Constellation Mentorship	A mentee has multiple mentors, allowing for diverse perspectives and expanded professional networks.	Offers diverse insights, enhances networking, broadens professional development.	Effectiveness depends on the availability of multiple mentors.
Distance Mentorship	Mentors and mentees connect digitally via email, video conferencing, and online platforms.	Increases accessibility for those in remote or under-resourced areas.	Lacks personal connection, limits opportunities for ad hoc interactions.
Learning Partnership Mentorship	Focuses on shared ownership of learning and mutual respect, fostering professional growth through collaboration.	Encourages mutual learning, promotes a sense of community.	Lacks clear learning objectives, impact difficult to measure.
Highly Relevant Mentorship	Provides on-demand, task-specific mentorship rather than relying on a structured curriculum.	Timely, practical, aligns with institutional needs.	Requires strong mentor-mentee alignment, effectiveness depends on institutional buy-in.

Source: Adapted from Nowell, L., Norris, J. M., Mrklas, K., & White, D. E. (2017). A literature review of mentorship programs in academic nursing. *Journal of Professional Nursing*, 33(5), 334-344.
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Addressing equity, diversity, and inclusion gaps in mentorship frameworks and programming

Professional bodies have undertaken efforts to clarify the ambiguity surrounding mentorship in nursing. The Canadian Nurses Association's (CNA) Certification Mentorship Toolkit, for example, is a comprehensive resource designed to assist experienced, certified nurses in supporting colleagues preparing for CNA certification exams.⁷⁴ It equips mentors with essential tools and strategies to build effective relationships with mentees. The toolkit emphasizes key mentor competencies, such as effective communication and coaching, and offers guidance on flexible

mentorship formats, including group and distance mentoring, to accommodate diverse learning needs. Practical resources within the toolkit, such as mentorship agreements, progress tracking templates, and evaluation forms, ensure structure and focus throughout the mentorship process. The Ontario Nurses Association's (ONA) Mentor Toolkit also offers a structured approach to mentorship, with a particular focus on supporting leaders who guide new members in unionized positions. It offers step-by-step plans and sample documents and outlines the key competencies and accountabilities required for leadership roles.⁷⁵

However, while these resources provide clear guidelines and practical strategies, they fall short in offering equity-focused approaches and do not include evaluation methods that account for race-based participation and outcomes. This gap is particularly concerning, as it compromises the ability of mentorship practices to effectively meet the diverse needs of participants.⁷⁶ The unique challenges faced by Black and racialized nurses, coupled with evidence showing how diversity considerations positively impact mentor-mentee dynamics, highlight the critical need for more inclusive and equity-focused mentorship approaches. Moreover, the inherent subjectivity in assessing practice and experiential learning introduces additional risks of bias.⁷⁷ Without intentional efforts to address these gaps, mentorship programs risk perpetuating inequities rather than fostering inclusivity in the profession.

Unconscious bias, shaped by past experiences and societal stereotypes, inevitably influences mentoring relationships. When these biases remain unrecognized and unaddressed, whether related to race, gender, sexual orientation, or other aspects of identity, they can lead to misunderstandings, miscommunications, and a breakdown of trust between mentors and mentees from diverse backgrounds.⁷⁸ The erosion of trust is particularly pronounced between racialized mentees and white mentors, where research has highlighted sociocultural disconnects.⁷⁹ Cultural mistrust and a reluctance to openly discuss race can create barriers to building reciprocal relationships, where both mentors and mentees learn from and support each other.⁸⁰ Studies on unconscious bias training for STEMM (Science, Technology, Engineering, Mathematics, and Medicine) professionals underscore the importance of addressing these biases to foster trust and improve mentorship experiences.⁸¹

However, while interventions such as unconscious bias training may be valuable, they often fail to fully address the distinct challenges faced by racialized individuals. For example, the experiences of Black nurses are shaped by systemic factors such as economic disparity, intergenerational trauma, and anti-Black racism, all of which demand unique approaches in mentorship. When mentorship frameworks do not consider these systemic barriers, existing inequities can be reinforced, making it even more difficult for Black nurses to advance and succeed.^{82, 83, 84, 85} Racial concordance between mentors and mentees, where both share similar

cultural and racial backgrounds, can play a critical role in overcoming these barriers. Indeed, research clearly demonstrates that shared experiences and perspectives can enhance mutual understanding, build deeper trust, and provide more meaningful support in navigating systemic inequities.

For example, research on mentorship programs designed for Black medical learners and early career physicians found that mentees paired with mentors from similar racial or ethnic backgrounds reported a stronger sense of belonging and felt more comfortable and secure discussing sensitive topics.⁸⁶ Similarly, a study exploring Black women nurse leaders' perception of mentoring in academic nursing revealed that shared racial or ethnic backgrounds between mentors and mentees led to stronger connections, greater feelings of being understood, and increased comfort in receiving critical feedback.⁸⁷ Having mentors who share lived experiences and understand systemic challenges was particularly valuable to these mentees, as they could offer candid insights and practical advice on navigating the obstacles they face.⁸⁸

Mentorship programs are seldom subject to formal evaluation, and when evaluations do occur, they often lack meaningful diversity and inclusion metrics. Many programs focus on general outcomes, such as participation satisfaction, without examining whether these benefits are evenly distributed across different groups. Incorporating race-based data and other equity-focused measures into evaluations is crucial. These metrics can provide valuable insights into experiences of racialized groups, highlight gaps in support, and identify opportunities to improve mentorship practices for Black individuals.^{89, 90} It is imperative that data collection is purposeful and focused on generating actionable insights. This requires data governance protocols and adopting methods that ensure strict privacy protections while maintaining a strong commitment to a do-no-harm approach.

Overview of mentorship programs in Canada

The lack of equity considerations in mentorship frameworks and program design contributes to critical gaps in effectively supporting diverse nursing professionals. To provide a clearer understanding of the current landscape, this section offers an overview of existing mentorship programs in nursing across Canada. Appendix 1 presents a detailed breakdown of mentorship initiatives at both national and regional levels, highlighting programs tailored to specific groups such as nursing students, professionals at different career stages, and Internationally Educated Nurses (IENs).

Mentorship programs for nurses in Canada typically follow a dyad model, pairing nursing students or practicing nurses with experienced professionals to develop both technical and soft skills. Many programs offer structured support, including skill development, networking

opportunities, and professional guidance. At the national level, the Canadian Nurses Association (CNA) supports mentoring through its CNA Certification Mentorship Program, which recruits nurses with over three years of experience to provide guidance to certification candidates. The program offers flexible mentorship formats, including individual, online, and group mentoring, ensuring that candidates receive the support they need to navigate the certification process effectively.

University-led initiatives also play a crucial role in supporting nursing students. Programs such as McGill University's Nursing Peer Mentorship Program, University of British Columbia's Nursing Mentorship Program, and the University of Calgary's NurseMentor program pair students with experienced nurses or alumni, offering valuable opportunities for career guidance and professional growth.^{91,92,93} Dalhousie University's Community of Black Students in Nursing (CBSN) creates a vital space for peer support and mentorship, specifically designed by and for students of Black or African descent.⁹⁴ This group welcomes undergraduate and graduate students, prospective nursing students, and recent graduates, fostering a sense of community and belonging. Many university-based mentorship programs also incorporate networking opportunities, career workshops, and panel discussions with industry professionals, which help students gain exposure to different nursing specialties, expand their professional networks, and build confidence as they transition into the workforce.

Early-career nurses benefit from programs such as the Ontario Ministry of Health's Nursing Graduate Guarantee Program, Ottawa Hospital's Clinical Coach Initiative, and PEI Health's Transition to Practice Program.^{95, 96, 97} These initiatives offer structured mentorship, practical skill-building, and professional networking opportunities, helping new nurses develop confidence, critical thinking, and time management skills as they transition into their roles. Mid-career nurses are supported through initiatives like the Lakeridge Health Nurse Mentor Initiative, which was developed in response to workforce retention challenges, burnout, and stress exacerbated by the COVID-19 pandemic.⁹⁸ These programs provide ongoing education, professional development, and peer support to help nurses sustain their careers.

Specialized programs for IENs, including the Canadian Association of Schools of Nursing (CASN) IEN Mentorship Program, CARE Centre for IEN Mentorship Program, and Sunnybrook Health Sciences Centre IEN Career Pathway, provide critical support in navigating the regulatory, professional, and cultural challenges of working in the Canadian healthcare system.^{99,100,101} These programs offer guidance on licensing processes, professional communication, and workplace culture, helping IENs develop the skills and knowledge needed to transition into registered nursing roles. Through mentorship, participants gain practical insights, career

guidance, and access to professional networks, ensuring a smoother integration into clinical practice.

While these programs demonstrate a commitment to supporting nurses at various stages of their careers, there remains a significant gap in evaluating program effectiveness. Many initiatives rely on anecdotal feedback and testimonials rather than formal evaluations, making it difficult to determine which approaches are most effective, for whom, and under what circumstances. Moreover, the scarcity of programs specifically designed for Black nurses represents a missed opportunity to address their unique needs and challenges. Bridging these gaps calls for a deliberate focus on equity and inclusion within mentorship programs. In the next section, we spotlight the Canadian Black Nurses Alliance (CBNA) and examine how its initiatives cultivate mentorship practices that support the professional growth and personal well-being of Black nurses in Canada.

Case Study: Canadian Black Nurses Alliance's Mentorship Programs

The CBNA was established with the mission to serve, mentor, and uplift Canadian Black nurses through the strength of community. Adopting a two-tier approach, CBNA supports both practicing professional nurses and nursing students. It has established multiple academic chapters at universities across Canada, with Alberta being the first provincial chapter. CBNA currently encompasses 500 registered members and over 1,000 unregistered members nationwide. The organization collaborates with a wide range of partners, including the RNAO, Alberta Health Authorities, 15 CBNA Academic Chapters across Canada, the Alberta Association of Nurses, the Canadian Nurses Association, Black Nurses Leading Change, and the College of Nurses of Ontario.

Canadian Black Nurses Alliance programming

Since its founding in July 2020, CBNA has developed and implemented a variety of programs and networking activities based on consultations with members about their needs and preferences. Rooted in its commitment to supporting Black nurses and students, these initiatives include mentorship programs and speaker series, providing a platform to foster professional growth among the Black nursing community.

Among its key initiatives, the CBNA Professional Mentorship Program (PMP), launched in June 2022, supports Black nursing professionals across Canada by pairing mentees with experienced Black nurse mentors. Designed to foster professional development, provide career guidance, and build a supportive community, the program combines in-person and virtual engagement to facilitate meaningful connections. The third cohort of PMP began in November 2024 and is set to conclude in May 2025, continuing CBNA's commitment to strengthening mentorship opportunities for Black nurses.

Complementing the PMP, CBNA also supports Black nursing students through the Black Nurses and Students Allied for Success (BNSAS) undergraduate mentorship program. Established in January 2023 in partnership with McMaster University's School of Nursing, BNSAS connects Black nursing students with experienced Black registered nurses for mentorship. The first cohort, which ran from January to July 2023, included 14 mentors and 15 mentees, while the second cohort, which concluded in July 2024, involved 6 mentors and 6 mentees. With the program set

to expand, the third cohort will begin in May 2025, continuing its mission to provide Black nursing students with the guidance, connections, and confidence needed to succeed.

Beyond mentorship, CBNA fosters professional growth and leadership through a variety of initiatives. The Black Voices in Nursing (BVIN) speaker series provides a platform for Black nurses to share their career journeys and inspire others, while the Diverse Voices in Leadership series encourages Black nurses to pursue management, leadership, and board roles, promoting greater representation in decision-making spaces.

Canadian Black Nurses Alliance framework

To support the development of its mentorship programs, CBNA focused on building an overarching framework based on input from members and insights drawn from lived Black experiences within the nursing community. These insights helped define concrete objectives, outlined in Table 3, which guide the program’s structured approach to supporting mentees in achieving their goals. By prioritizing the development of essential skills such as communication, networking, and leadership, CBNA aims to empower mentees to build a strong professional identity and chart a clear path for their career advancement.

Table 3. Canadian Black Nurses Alliance goals and approach

Goals	Approach
Strengthen communication skills—written and verbal	Development of an executive summary <ul style="list-style-type: none"> • Elevator pitch • Interview prep • Branding • Resume improvement tips
Build professional network	<ul style="list-style-type: none"> • Introducing mentee to individuals, organizations, spaces that would provide exposure
Empowering mentees to rise above obstacles and challenges they have faced or may face	<ul style="list-style-type: none"> • Experiential tips for success • Empirical, industry tips for success
Identification and development of professional goals	<ul style="list-style-type: none"> • Professional Development Plan (PDP) • SMART goals
Establish a working philosophy to guide career	Develop and refine leadership philosophy Define the type of profession you want to be and the principles that will guide you
Expand your perspective of your career journey	Identify new ways of doing and being Identify passions and possibilities outside the typical box of nursing career possibility

Goals	Approach
	Identify and strategize how to use, develop and build skills and marketability

Qualitative insights

As the CBNA’s mentorship programs comprise small cohorts, the quantitative data is limited and, therefore, excluded from analysis. However, the qualitative feedback suggests that mentorship has had a significant impact on both Black mentors and mentees.

Program participants expressed a variety of motivations for joining the CBNA mentorship program, including seeking career guidance, emotional support, networking opportunities, and deeper insights into the Black nursing experience. Across both mentorship programs, mentees highlighted the importance of having Black role models who could offer inspiration and practical advice for navigating their careers. One mentee, for example, shared their hope *“to connect with Black professionals and see [themselves] in their position.”*

Nursing students particularly valued emotional support as they prepared to enter the nursing profession after graduation. An undergraduate mentee expressed their desire for *“availability to ask questions in a safe space and having the opportunity to address any nursing concerns that [they] may have.”* Similarly, participants in the PMP sought role models to guide their career planning, with some mentees placing a greater emphasis on networking. Overall, motivations for joining the mentorship programs were rooted in building connections and fostering a sense of community, both for personal support and for career advancement.

Key insights from the program demonstrate the broad benefits of Black mentorship, including enhanced confidence, strengthened emotional support, and a more defined career pathway. Mentees consistently emphasized how the program offered a vital support system and a safe space *“where [they] did not feel guilty going to this person for guidance or support.”* This emotional backing played a crucial role in boosting their confidence, enabling them to navigate the challenges of nursing school with greater assurance.

Mentors brought a unique perspective to the program, drawing from their own experiences of lacking support during their educational journeys. This understanding profoundly shaped their approach, allowing them to provide meaningful support to mentees. Beyond individual guidance, the mentorship programs also fostered a strong sense of belonging within the Black nursing community. One mentee noted, *“I like the idea of having a group to go back to, grow with, and be able to problem solve with.”* Additionally, mentorship provided practical guidance

for professional development. Mentees appreciated the program's role in offering a clearer vision of their career paths, sharing that it *"made [their] next steps very clear."*

Conclusions and Recommendations

While mentorship alone cannot resolve structural and systemic inequities, it serves as a powerful tool for skill development, professional growth, and workplace inclusion. By fostering supportive relationships, mentorship can help Black nurses navigate barriers in education, employment, and career advancement. The following recommendations focus on expanding, institutionalizing, and strengthening mentorship programs to ensure Black nurses receive the guidance and opportunities necessary to thrive in the profession.

- **Establish formal and sustainable mentorship programs:** Develop dedicated mentorship initiatives for Black nursing students and professionals within healthcare organizations and professional associations. Ensure programs are long-term, institutionally embedded, and supported by sustained funding and infrastructure, moving beyond informal or volunteer-based models. To be impactful, there needs to be a consideration of the value of mentorship relationships that connect mentees with mentors who share similar racial or cultural backgrounds.
- **Strengthen mentorship in nursing education:** Provide mentorship for Black nursing students to support retention, reduce isolation, and foster early professional development.
- **Build leadership-focused mentorship pathways:** Create targeted mentorship programs for Black nurses aspiring to leadership roles, offering guidance on career advancement, executive decision-making, and professional development. Support Black nurses entering specialty fields to increase representation in advanced practice and executive leadership.
- **Strengthen evaluation of mentorship programs through competency-based frameworks:** Develop competency-based frameworks to assess the effectiveness of mentorship programs in advancing career growth, retention, and leadership development for Black nurses. Implement race-disaggregated data collection to track participation rates, measure program impact, and identify gaps in access and effectiveness.

Appendix 1: Mentorship Programs for Nurses in Canada

Program	Region	Program Description	Targeted Group
Canadian Associations of Schools of Nursing (CASN) - IEN Mentorship Program (IENMP)	National	Launched in 2024 to improve the retention and integration of Internationally Educated Nurses (IENs) into the Canadian workforce. Employer partners match working IENs with staff nurse mentors in a three-month residency program. The program offers four virtual simulations for technical skills and three online workshops for communication and critical thinking skills. The program is free of cost and has been offered on two occasions to date.	IENs
Canadian Council of Cardiovascular Nurses (CCCN) - Mentorship Program	National	A national initiative for early career nurses in cardiovascular nursing. The purpose of the program is to provide peer-to-peer mentoring and ignite passion for cardiovascular nurses.	Early career nurses
Canadian Nurses Association - Certification Mentorship Program	National	The Certification Mentorship Program offers support and assistance to certification candidates. Nurse mentors hold CNA certification and have a minimum of three years' experience in their chosen nurse practice specialty.	Nursing certification candidates
Alberta Health Services - Nursing Mentorship Network	Alberta	Launched in 2021 at the height of the COVID-19 pandemic to help nurses connect, collaborate, and find support. In addition to mentorship opportunities, the program provides monthly community of practice sessions.	Nurses and midwives
CARE Centre for Internationally Educated Nurses - Mentorship Program	Ontario	The objective is to increase IENs' understanding of the scope of practice in a healthcare setting and familiarize them with the language and culture of the Canadian workplace. The program is delivered in collaboration with a variety of healthcare organizations around Ontario, including Sunnybrook Health Sciences Centre, Unity Health Toronto, and CAMH. Two streams are offered to participants: Virtual Mentoring and Observational Job Shadowing.	IENs
Ontario Ministry of Health - Clinical	Ontario	Supports newly graduated nurses who are transitioning into the workforce, IENs, and nurses seeking to upskill. Participating nurses learn	Early career nurses;

Program	Region	Program Description	Targeted Group
Scholar Program		technical, communication, problem-solving, and management skills from Clinical Scholars, who are nurses with frontline experience employed in supernumerary positions. The program is available to all 141 publicly funded hospitals in Ontario.	IENs; nurses seeking to upskill
Ontario Ministry of Health - Nursing Graduate Guarantee Program	Ontario	Supports new Registered Nurses and Registered Practical Nurses who are within 12 months of registering with the College of Nurses of Ontario (CNO) by providing them with a temporary full-time employment opportunity. Mentorship is included in the program, where experienced nurses are assigned to participating nurses to support their professional development.	Early career nurses
Sunnybrook Health Sciences Centre - Internationally Educated Nurses (IEN) Career Pathway	Ontario	Helps IENs start their healthcare careers and transition into registered nursing positions. Sunnybrook operates the program in collaboration with Ontario Health and the College of Nurses of Ontario (CNO). The program provides career path mentorship to IENs through five components: Cultural Integration, Language Proficiency, Nursing Skills Development, Supervised Practice Experience Program, and Building Community.	IENs
Ontario Black Nurses' Network (OBNN)	Ontario	Provides professional development and mentorship opportunities to its members. Services include career development workshops, resume reviews, and job opportunities.	Black nurses
PEI Health - Transition to Practice Program	Prince Edward Island	Supports newly graduated Registered Nurses (RNs) and Licensed Practical Nurses (LPNs) employed at Health PEI throughout their first year of practice and beyond. Mentorship is the key component of the program, accompanied by ongoing education in their practice area and on-call support. Newly graduated nurses meet with experienced nurse mentors on a biweekly basis to discuss education specific to the nurse's new area of practice. The program also offers education sessions facilitated by a Transition to Practice Coordinator.	Early career nurses
Saskatchewan Association of Nurse Practitioners - Mentorship Program	Saskatchewan	Provides support and valuable advice to new Nurse Practitioners (NPs) at a critical point in their careers. Mentees in the program have the opportunity to seek guidance from their mentors on all areas of the nursing profession, including career transition, clinical resources, procedural skills, and work-life balance.	Early career nurses

Program	Region	Program Description	Targeted Group
Hamilton Health Sciences - Internationally Educated Nurse Program	Hamilton, Ontario	A workforce integration program that helps registered nurses and registered practical nurses integrate into Hamilton Health Sciences (HHS) hospital and other healthcare organizations. The program provides mentorship to IENs by equipping them with the clinical and communication skills needed for the nursing profession in the Canadian workplace.	IENs
Lakeridge Health - Nurse Mentor Initiative	Durham Region, Ontario	Between October 2022 and June 2023, the initiative aimed to grow and sustain its nursing staff. The program was created in response to stress and burnout and low retention among nursing staff during the COVID-19 pandemic. The initiative was available to bedside nursing staff to assist their educational and clinical support. Nursing staff reported afterwards that the program was helpful for their education and skills development.	Mid-career nurses
Community of Black Students in Nursing (CBSN)	Halifax	Established within Dalhousie's School of Nursing, CBSN is a peer support and mentoring group created by and for students of Black or African descent. The group is open to students at all levels of the nursing program, including undergraduate and graduate students, as well as prospective nursing students and recent graduates.	Black students
McGill University - Nursing Peer Mentorship Program (NPMP)	Montreal	Supports junior-year undergraduate students as they incorporate into the school and transition into a university-based professional program. Junior-year undergraduate student mentees are paired with senior-year undergraduate student mentors or graduate student mentors.	Nursing students
Ottawa Hospital - Clinical Coach Initiative	Ottawa	Developed to meet the needs of novice nurses, such as critical thinking and time management. The Clinical Coaches are a group of retired nurses who are keen to lend their expertise to early career nurses. The initiative started as a small pilot project with six Clinical Coaches in 2022 and has now expanded to 14 Clinical Coaches throughout various departments at the Ottawa Hospital.	Early career nurses
UBC Nursing - Mentorship Program	Vancouver	Designed to help senior undergraduate nursing students enhance their professional and career development. The program pairs students with UBC Nursing alumni to share experiences, explore and define career paths and expand professional networks.	Nursing students
University of Calgary - NurseMentor	Calgary	Engages with alumni to support undergraduate nursing students in their development. Student mentees are matched with alumni mentors, and the pairs are encouraged to connect twice a month.	Nursing students

References

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- ¹ Marchildon, G. P., & Bossert, T. J. (2018). Federalism and decentralization in the health care sector. *Occasional paper series*, (24), 22. <https://www.forumfed.org/document/federalism-decentralization-health-care-sector-number-24/>
- ² Canadian Institute for Health Information. (2024, July 25). *Registered nurses*. <https://www.cihi.ca/en/registered-nurses>
- ³ Domey, N., & Patsiurko, N. (2024, October 25). *The Diversity of the Black Populations in Canada, 2021: A Sociodemographic Portrait*. Statistics Canada. <https://www150.statcan.gc.ca/n1/pub/89-657-x/89-657-x2024005-eng.htm>
- ⁴ Canadian Institute for Health Information. (n.d.). *Registered nurses*. <https://www.cihi.ca/en/registered-nurses>
- ⁵ Onagbeboma, O., & Broughton, S. (2023). Internationally-Educated Nurses: The Challenges for Recognition. *Canadian Diversity Magazine*, 19(4). https://fsc-ccf.ca/wp-content/uploads/2024/03/Canadian-Diversity_Vol19No42024_EN.pdf
- ⁶ Crea-Arsenio, M., Baumann, A., & Blythe, J. (2023). The changing profile of the internationally educated nurse workforce: Post-pandemic implications for health human resource planning. *Healthcare Management Forum*, 36(6), 388-392. <https://doi.org/10.1177/08404704231198026>
- ⁷ Onagbeboma, O., & Broughton, S. (2023). Internationally-Educated Nurses: The Challenges for Recognition. *Canadian Diversity Magazine*, 19(4). https://fsc-ccf.ca/wp-content/uploads/2024/03/Canadian-Diversity_Vol19No42024_EN.pdf
- ⁸ Neiterman, E., & Bourgeault, I. L. (2015). The shield of professional status: Comparing internationally educated nurses' and international medical graduates' experiences of discrimination. *Health: An Interdisciplinary Journal for the Social Study of Health, Illness and Medicine*, 19(6), 615–634. <https://doi.org/10.1177/1363459314567788>
- ⁹ CASN. (2023). *Promoting anti racism in nursing education in Canada*. <https://www.casn.ca/wp-content/uploads/2023/05/Promoting-Anti-Racism-in-Nursing-Education-in-Canada.pdf>
- ¹⁰ Zappas, M., Walton-Moss, B., Sanchez, C., Hildebrand, J., & Kirkland, T. (2021). The Decolonization of Nursing Education. *J Nurse Practice*, 17(2), 225-229. <https://doi.org/10.1016/j.nurpra.2020.11.006>
- ¹¹ Jefferies, K. (2020, May 11). Recognizing history of Black nurses a first step to addressing racism and discrimination in nursing. *The Conversation*. <https://theconversation.com/recognizing-history-of-black-nurses-a-first-step-to-addressing-racism-and-discrimination-in-nursing-125538>
- ¹² Registered Nurses Association of Ontario. (2022, February 8). *Nursing report calls to end anti-Black racism and discrimination within the profession*. <https://rnao.ca/news/media-releases/nursing-report-calls-to-end-anti-black-racism-and-discrimination-within-the>
- ¹³ Luhanga, F., Puplampu, V., Arvidson, S., & Ogunade, A. (2020). Nursing students' experiences of bullying in clinical practice. *Journal of Nursing Education and Practice*, 10(3), 89-92. <https://doi.org/10.5430/jnep.v10n3p89>
- ¹⁴ Jefferies, K., States, C., MacLennan, V., Helwig, M., Gahagan, J., Bernard, W.T., Macdonald, M., Murphy, G.T., & Martin-Misener, R. (2022). Black nurses in the nursing profession in Canada: a scoping review. *International Journal for Equity in Health*, 21(102). <https://doi.org/10.1186/s12939-022-01673-w>
- ¹⁵ Jefferies, K., States, C., MacLennan, V., Helwig, M., Gahagan, J., Bernard, W.T., Macdonald, M., Murphy, G.T., & Martin-Misener, R. (2022). Black nurses in the nursing profession in Canada: a scoping review. *International Journal for Equity in Health*, 21(102). <https://doi.org/10.1186/s12939-022-01673-w>

-
- ¹⁶ Luhanga, F., Maposa, S., Puplampu, V., & Abudu, E. (2023). "Let's call a spade a spade. My barrier is being a black student": Challenges for black undergraduate nursing students in a Western Canadian Province. *Canadian Journal of Nursing Research*, 55(4), 457-471. <https://doi.org/10.1177/08445621231198632>
- ¹⁷ The Conference Board of Canada. (2023, November 16). *Levelling the Playing Field for Black Canadians: A Call to Action for Leaders*. https://fsc-ccf.ca/wp-content/uploads/2023/11/levelling-the-playing-field_2023.pdf
- ¹⁸ Registered Nurses' Association of Ontario (RNAO). *Black Nurses Task Force Report: Acknowledging, Addressing and Tackling Anti-Black Racism and Discrimination Within the Nursing Profession*. https://rnao.ca/sites/default/files/2022-02/Black_Nurses_Task_Force_report.pdf
- ¹⁹ Registered Nurses' Association of Ontario (RNAO). *Black Nurses Task Force Report: Acknowledging, Addressing and Tackling Anti-Black Racism and Discrimination Within the Nursing Profession*. https://rnao.ca/sites/default/files/2022-02/Black_Nurses_Task_Force_report.pdf
- ²⁰ Iheduru-Anderson KC., & Shingles RR. (2023). Mentoring Experience for Career Advancement: The perspectives of Black Women Academic Nurse Leaders. *Global Qualitative Nursing Research*, 10. <https://doi.org/10.1177/23333936231155051>
- ²¹ Perumal, R., & Singh, M.(2022). Mentorship in nursing in Canada – A scoping review. *Nurse Education in Practice*, 65, 103461. <https://doi.org/10.1016/j.nepr.2022.103461>
- ²² Registered Nurses' Association of Ontario (RNAO). *Black Nurses Task Force Report: Acknowledging, Addressing and Tackling Anti-Black Racism and Discrimination Within the Nursing Profession*. https://rnao.ca/sites/default/files/2022-02/Black_Nurses_Task_Force_report.pdf
- ²³ Brandford, A., Fernander, A., Rayens, M. K., & Mudd-Martin, G. (2023). Examining race-based discrimination, depression, and occupational stress in Black registered nurses. *Nursing Administration Quarterly*, 47(2), 126-135. <https://doi.org/10.1097/NAQ.0000000000000570>
- ²⁴ Cooper Brathwaite, A., Versailles, D., Juüdi-Hope, D. A., Coppin, M., Jefferies, K., Bradley, R., Campbell, R., Garraway, C.T., Obewu, O.A.T., LaRonde-Ogilvie, C., Sinclair, D., Groom, B., Punia, H., & Grinspun, D. (2022). Black nurses in action: A social movement to end racism and discrimination. *Nursing Inquiry*, 29(1), e12482. <https://doi.org/10.1111/nin.12482>
- ²⁵ Prendergast, N., Boakye, P., Bailey, A., Igwenagu, H., & Burnett-Ffrench, T. (2023). Anti-Black racism: Gaining insight into the experiences of Black nurses in Canada. *Nursing Inquiry*, 31(2). <https://doi.org/10.1111/nin.12604>
- ²⁶ Cox, G., Sobrany, S., Jenkins, E., Cledwyn Musipa, & Darbyshire, P. (2021). Will nurse leaders help eradicate "hair racism" from nursing and health services? *Journal of Nursing Management*, 29(7), 2014–2017. <https://doi.org/10.1111/jonm.13286>
- ²⁷ Boateng, G., & Brown, K. (2021). "Go back to your country": Exploring nurses' experiences of workplace conflict involving patients and patients' family members in two Canadian cities. *Nursing Inquiry*, 29(1). <https://doi.org/10.1111/nin.12444>
- ²⁸ Prendergast, N., Boakye, P., Bailey, A., Igwenagu, H., & Burnett-Ffrench, T. (2023). Anti-Black racism: Gaining insight into the experiences of Black nurses in Canada. *Nursing Inquiry*, 31(2). <https://doi.org/10.1111/nin.12604>
- ²⁹ University of Toronto Joint Centre for Bioethics. (2024, April 24). *Navigating Discriminatory Requests & Refusals of Healthcare Providers* [Seminar Series]. Youtube. <https://www.youtube.com/watch?v=rCgTby6Dd-M>
- ³⁰ Prendergast, N., Boakye, P., Bailey, A., Igwenagu, H., & Burnett-Ffrench, T. (2023). Anti-Black racism: Gaining insight into the experiences of Black nurses in Canada. *Nursing Inquiry*, 31(2). <https://doi.org/10.1111/nin.12604>
- ³¹ Registered Nurses' Association of Ontario (RNAO). *Black Nurses Task Force Report: Acknowledging, Addressing and Tackling Anti-Black Racism and Discrimination Within the Nursing Profession*. https://rnao.ca/sites/default/files/2022-02/Black_Nurses_Task_Force_report.pdf

-
- ³² Jefferies, K., States, C., MacLennan, V., Helwig, M., Gahagan, J., Bernard, W.T., Macdonald, M., Murphy, G.T., & Martin-Misener, R. (2022). Black nurses in the nursing profession in Canada: a scoping review. *International Journal for Equity in Health*, 21(102). <https://doi.org/10.1186/s12939-022-01673-w>
- ³³ Registered Nurses' Association of Ontario (RNAO). *Black Nurses Task Force Report: Acknowledging, Addressing and Tackling Anti-Black Racism and Discrimination Within the Nursing Profession*. [https://rnao.ca/sites/default/files/2022-02/Black Nurses Task Force report.pdf](https://rnao.ca/sites/default/files/2022-02/Black_Nurses_Task_Force_report.pdf)
- ³⁴ Registered Nurses' Association of Ontario (RNAO). *Black Nurses Task Force Report: Acknowledging, Addressing and Tackling Anti-Black Racism and Discrimination Within the Nursing Profession*. [https://rnao.ca/sites/default/files/2022-02/Black Nurses Task Force report.pdf](https://rnao.ca/sites/default/files/2022-02/Black_Nurses_Task_Force_report.pdf)
- ³⁵ Prendergast, N., Boakye, P., Bailey, A., Igwenagu, H., & Burnett-Ffrench, T. (2023). Anti-Black racism: Gaining insight into the experiences of Black nurses in Canada. *Nursing Inquiry*, 31(2). <https://doi.org/10.1111/nin.12604>
- ³⁶ Registered Nurses' Association of Ontario (RNAO). *Black Nurses Task Force Report: Acknowledging, Addressing and Tackling Anti-Black Racism and Discrimination Within the Nursing Profession*. [https://rnao.ca/sites/default/files/2022-02/Black Nurses Task Force report.pdf](https://rnao.ca/sites/default/files/2022-02/Black_Nurses_Task_Force_report.pdf)
- ³⁷ Prendergast, N., Boakye, P., Bailey, A., Igwenagu, H., & Burnett-Ffrench, T. (2023). Anti-Black racism: Gaining insight into the experiences of Black nurses in Canada. *Nursing Inquiry*, 31(2). <https://doi.org/10.1111/nin.12604>
- ³⁸ Jefferies, K., States, C., MacLennan, V., Helwig, M., Gahagan, J., Bernard, W.T., Macdonald, M., Murphy, G.T., & Martin-Misener, R. (2022). Black nurses in the nursing profession in Canada: a scoping review. *International Journal for Equity in Health*, 21(102). <https://doi.org/10.1186/s12939-022-01673-w>
- ³⁹ Jefferies, K., Aston, M., & Tomblin, G. (2018). Black Nurse Leaders in the Canadian Healthcare System. *Nursing Leadership (1910-622X)*, 31(4), 50-56. <https://doi.org/10.12927/cjnl.2019.25756>
- ⁴⁰ Bouabdillah, N., Holmes, D., & Tourigny, J. (2016). Visible minority nurses and vertical mobility in hospitals. *Recherche en soins infirmiers*, 127(4), 71-81. <https://doi.org/10.3917/rsi.127.0071>
- ⁴¹ Jefferies, K., Goldberg, L., Aston, M., & Tomblin Murphy, G. (2018). Understanding the invisibility of black nurse leaders using a black feminist poststructuralist framework. *Journal of Clinical Nursing*, 27(15-16), 3225-3234. <https://doi.org/10.1111/jocn.14505>
- ⁴² Jefferies, K., States, C., MacLennan, V., Helwig, M., Gahagan, J., Bernard, W.T., Macdonald, M., Murphy, G.T., & Martin-Misener, R. (2022). Black nurses in the nursing profession in Canada: a scoping review. *International Journal for Equity in Health*, 21(102). <https://doi.org/10.1186/s12939-022-01673-w>
- ⁴³ Busby, L., Patrick, L., & Gaudine, A. (2022). Upwards workplace bullying: A literature review. *Sage Open*, 12(1), 21582440221085008.
- ⁴⁴ Parsons, K., Gaudine, A., Patrick, L., & Busby, L. (2022). Nurse leaders' experiences of upwards violence in the workplace: A qualitative systematic review. *JB1 evidence synthesis*, 20(5), 1243-1274.
- ⁴⁵ Perumal, R., & Singh, M. (2022). Mentorship in nursing in Canada – A scoping review. *Nurse Education in Practice*, 65, 103461. <https://doi.org/10.1016/j.nepr.2022.103461>
- ⁴⁶ Hansman, C. A. (2017). Adult learning theories in mentoring relationships and models. *Theory and practice of adult and higher education*, 215, 241.
- ⁴⁷ Mullen, C. A., & Fletcher, S. J. (2012). Sage handbook of mentoring and coaching in education.
- ⁴⁸ Wang, Y., Hu, S., Yao, J. et al. (2024). Clinical nursing mentors' motivation, attitude, and practice for mentoring and factors associated with them. *BMC Nurs* 23, 76. <https://doi.org/10.1186/s12912-024-01757-8>
- ⁴⁹ Burgess, A., van Diggele, C., & Mellis, C. (2018). Mentorship in the health professions: a review. *The clinical teacher*, 15(3), 197-202. <https://doi.org/10.1111/tct.12756>

-
- ⁵⁰ Wu, J., & Olagunju, A. T. (2024). Mentorship in medical education: reflections on the importance of both unofficial and official mentorship programs. *BMC Medical Education*, 24(1), 1233. <https://doi.org/10.1186/s12909-024-06248-7>
- ⁵¹ Macaron, M. M., Segun-Omosehin, O. A., Matar, R. H., Beran, A., Nakanishi, H., Than, C. A., & Abulseoud, O. A. (2023). A systematic review and meta analysis on burnout in physicians during the COVID-19 pandemic: A hidden healthcare crisis. *Frontiers in Psychiatry*, 13, 1071397. <https://doi.org/10.3389/fpsy.2022.1071397>
- ⁵² Singh, J., Poon, D. E., Alvarez, E., Anderson, L., Verschoor, C. P., Sutton, A., Zendo, Z., Piggott, T., Apatu, E., Churipuy, D., Culbert, I., & Hopkins, J. P. (2024). Burnout among public health workers in Canada: a cross-sectional study. *BMC Public Health*, 24(1), 48. <https://doi.org/10.1186/s12889-023-17572-w>
- ⁵³ Cavanaugh, K., Cline, D., Belfer, B., Chang, S., Thoman, E., Pickard, T., & Holladay, C. L. (2022). The positive impact of mentoring on burnout: Organizational research and best practices. *Journal of Interprofessional Education & Practice*, 28, 100521. <https://doi.org/10.1016/j.xjep.2022.100521>
- ⁵⁴ Burgess, A., van Diggele, C., & Mellis, C. (2018). Mentorship in the health professions: a review. *The clinical teacher*, 15(3), 197-202. <https://doi.org/10.1111/tct.12756>
- ⁵⁵ Taylor, D. C., Hettrich, C. M., Dickens, J. F., & Doty, J. (2023). Coaching, Mentorship, and Leadership in Medicine: Empowering the Development of Patient-Centered Care. *Clinics in Sports Medicine*, 42(2), xv-xviii. <https://doi.org/10.1016/j.csm.2023.01.001>
- ⁵⁶ Perumal, R., & Singh, M. (2022). Mentorship in nursing in Canada – A scoping review. *Nurse Education in Practice*, 65, 103461. <https://doi.org/10.1016/j.nepr.2022.103461>
- ⁵⁷ Chikaodili Obetta, Menezes, A., Chandran, N., Onaope Egbedeyi, Taghavi, M., Modupe Tunde-Bypass, Yu, C., Csilla Kalocsai, Umberin Najeeb, Rukia Swaleh, & Norris, M. (2024). Mentoring Matters: Evaluating The Black Physicians of Canada Mentorship Program. *MedRxiv (Cold Spring Harbor Laboratory)*. <https://doi.org/10.1101/2024.12.07.24318652>
- ⁵⁸ Chikaodili Obetta, Menezes, A., Chandran, N., Onaope Egbedeyi, Taghavi, M., Modupe Tunde-Bypass, Yu, C., Csilla Kalocsai, Umberin Najeeb, Rukia Swaleh, & Norris, M. (2024). Mentoring Matters: Evaluating The Black Physicians of Canada Mentorship Program. *MedRxiv (Cold Spring Harbor Laboratory)*. <https://doi.org/10.1101/2024.12.07.24318652>
- ⁵⁹ Iheduru-Anderson, K. C., & Shingles, R. R. (2023). Mentoring Experience for Career Advancement: The perspectives of Black Women Academic Nurse Leaders. *Global Qualitative Nursing Research*, 10. <https://doi.org/10.1177/23333936231155051>
- ⁶⁰ College of Nurses Ontario (2019). *Entry to practice competencies for registered nurses*. <https://www.cno.org/globalassets/docs/reg/41037-entry-to-practice-competencies-2020.pdf>
- ⁶¹ Jacobs, S. (2018). An analysis of the evolution of mentorship in nursing. *International Journal of Mentoring and Coaching in Education*, 7(2), 155-176. <https://doi.org/10.1108/IJMCE-06-2017-0042>
- ⁶² Nowell, L., White, D. E., Mrklas, K., & Norris, J. M. (2015). Mentorship in nursing academia: a systematic review protocol. *Systematic reviews*, 4, 1-9. <https://doi.org/10.1186/s13643-015-0007-5>
- ⁶³ Perumal, R. V., & Singh, M. D. (2022). Mentorship in nursing in Canada—A scoping review. *Nurse Education in Practice*, 65, 103461. <https://doi.org/10.1016/j.nepr.2022.103461>
- ⁶⁴ Nowell, L. (2019). Mentorship in nursing academia: A qualitative study and call to action. *Journal of Nursing Education and Practice*, 9(3), 85-94. <https://doi.org/10.1186/s13643-015-0007-5>
- ⁶⁵ Bélanger-Hardy, É., Palmer, K. S., Kokorelias, K. M., Chan, C., & Law, S. (2023). Easing the Nursing Shortage: Tools for Retaining Nurses through Mentorship. *Nursing Leadership (1910-622X)*, 36(2), 17-26. <https://doi.org/10.12927/cjnl.2023.27206>
- ⁶⁶ Health Canada. (2024). *Nursing Retention Toolkit: Improving the working lives of nurses in Canada*. <https://www.canada.ca/content/dam/hc-sc/documents/services/health-care-system/health-human-resources/nursing-retention-toolkit-improving-working-lives-nurses/nursing-retention-toolkit-improving-working-lives-nurses.pdf>

-
- ⁶⁷ Health Canada. (2024). *Nursing Retention Toolkit: Improving the working lives of nurses in Canada*. <https://www.canada.ca/content/dam/hc-sc/documents/services/health-care-system/health-human-resources/nursing-retention-toolkit-improving-working-lives-nurses/nursing-retention-toolkit-improving-working-lives-nurses.pdf>
- ⁶⁸ Olaolorunpo, O. (2019). Mentoring in nursing: A concept analysis. *International Journal of Caring Sciences*, 12(1), 142-148. https://www.researchgate.net/publication/332949895_Mentoring_in_Nursing_A_concept_Analysis
- ⁶⁹ Wu, J., & Olagunju, A. T. (2024). Mentorship in medical education: reflections on the importance of both unofficial and official mentorship programs. *BMC Medical Education*, 24(1), 1233. <https://doi.org/10.1186/s12909-024-06248-7>
- ⁷⁰ Weese, M. M., Jakubik, L. D., Eliades, A. B., & Huth, J. J. (2015). Mentoring practices benefiting pediatric nurses. *Journal of Pediatric Nursing*, 30(2), 385-394. <https://doi.org/10.1016/j.pedn.2014.07.011>
- ⁷¹ Dolan, D. M., & Willson, P. (2019). Triad mentoring model: Framing an academic-clinical partnership practicum. *Journal of Nursing Education*, 58(8), 463-467. <https://doi.org/10.3928/01484834-20190719-05>
- ⁷² Weese, M. M., Jakubik, L. D., Eliades, A. B., & Huth, J. J. (2015). Mentoring practices benefiting pediatric nurses. *Journal of Pediatric Nursing*, 30(2), 385-394. <https://doi.org/10.1016/j.pedn.2014.07.011>
- ⁷³ Nowell, L., Norris, J. M., Mrklas, K., & White, D. E. (2017). A literature review of mentorship programs in academic nursing. *Journal of Professional Nursing*, 33(5), 334-344. <https://doi.org/10.1016/j.profnurs.2017.02.007>
- ⁷⁴ Canadian Nurses Association. (2021). *Certification Mentorship Toolkit*. https://hl-prod-ca-oc-download.s3-ca-central-1.amazonaws.com/CNA/2f975e7e-4a40-45ca-863c-5ebf0a138d5e/UploadedImages/documents/17_0874_Certification_Mentorship_Toolkit_2021_EN_Copy.pdf
- ⁷⁵ Ontario Nurses' Association. (2024). *The Mentor Toolkit*. https://www.ona.org/wp-content/uploads/2024/09/ona_mentortoolkit_20240319.pdf
- ⁷⁶ Luukkonen, A. L., Kuivila, H., Kaarlela, V., Koskenranta, M., Kaučič, B. M., Riklikiene, O., Vizcaya-Moreno, F., Pérez-Cañaveras, R.M., Filej, B., Oikarainen, A., Kääriäinen, M., & Mikkonen, K. (2023). Mentors' cultural competence at mentoring culturally and linguistically diverse nursing students in clinical practice: an international cross-sectional study. *Nurse education in practice*, 70, 103658. <https://doi.org/10.1016/j.nepr.2023.103658>
- ⁷⁷ Canadian Nurses Association. (2021). *Certification Mentorship Toolkit*. https://hl-prod-ca-oc-download.s3-ca-central-1.amazonaws.com/CNA/2f975e7e-4a40-45ca-863c-5ebf0a138d5e/UploadedImages/documents/17_0874_Certification_Mentorship_Toolkit_2021_EN_Copy.pdf
- ⁷⁸ Hill, S. E., Ward, W. L., Seay, A., & Buzenski, J. (2022). The nature and evolution of the mentoring relationship in academic health centers. *Journal of Clinical Psychology in Medical Settings*, 29(3), 557-569. <https://doi.org/10.1007/s10880-022-09893-6>
- ⁷⁹ Egbedeyi, O., El-Hadi, H., Madzima, T. R., Semalulu, T., Tunde-Byass, M., & Swaleh, R. (2022). Assessing the need for Black mentorship within residency training in Canada. *CMAJ*, 194(42), E1455-E1459. <https://doi.org/10.1503/cmaj.212124>
- ⁸⁰ Egbedeyi, O., El-Hadi, H., Madzima, T. R., Semalulu, T., Tunde-Byass, M., & Swaleh, R. (2022). Assessing the need for Black mentorship within residency training in Canada. *CMAJ*, 194(42), E1455-E1459. <https://doi.org/10.1503/cmaj.212124>
- ⁸¹ Javier, D., Solis, L. G., Paul, M. F., Thompson, E. L., Maynard, G., Latif, Z., Stinson, K., Ahmed, T., & Vishwanatha, J. K. (2022). Implementation of an unconscious bias course for the National Research Mentoring Network. *BMC Medical Education*, 22(1). <https://doi.org/10.1186/s12909-022-03466-9>

-
- ⁸² Social Research and Demonstration Corporation. (2021). *Barriers to employment and training for equity-seeking groups*. <https://www.srdc.org/media/553157/training-barriers-for-equity-seeking-groups-final-report.pdf>
- ⁸³ Obetta, C., Menezes, A., Chandran, N., Egbedeyi, O., Taghavi, M., Tunde-Byass, M., Yu, C., Kalocsai, C., Najeeb, U., Swaleh, R., & Norris, M. (2024). Mentoring Matters: Evaluating The Black Physicians of Canada Mentorship Program. *MedRxiv*, 2024-12. <https://doi.org/10.1101/2024.12.07.24318652>
- ⁸⁴ Bouabdillah, N., Perron, A., & Holmes, D. (2021). Career advancement: The experiences of minority nurses in accessing leadership positions in a tertiary care setting. *Witness: The Canadian Journal of Critical Nursing Discourse*, 3(1), 73-84. <https://doi.org/10.25071/2291-5796.79>
- ⁸⁵ Nelson, Y. M., Bundy, J., Harmon, E., Hammond, L., Robinson, K., Lyons, N., Vessels, R., Bush, K., & Thomas-Payne, D. (2023). Factors affecting the advancement of Black nurses into leadership roles: A scoping review. *Nursing Outlook*, 71(4), 102000. <https://doi.org/10.1016/j.outlook.2023.102000>
- ⁸⁶ Chikaodili Obetta, Menezes, A., Chandran, N., Onaope Egbedeyi, Taghavi, M., Modupe Tunde-Byass, Yu, C., Csilla Kalocsai, Umberin Najeeb, Rukia Swaleh, & Norris, M. (2024). Mentoring Matters: Evaluating The Black Physicians of Canada Mentorship Program. *MedRxiv (Cold Spring Harbor Laboratory)*. <https://doi.org/10.1101/2024.12.07.24318652>
- ⁸⁷ Iheduru-Anderson, K. C., & Shingles, R. R. (2023). Mentoring Experience for Career Advancement: The perspectives of Black Women Academic Nurse Leaders. *Global Qualitative Nursing Research*, 10. <https://doi.org/10.1177/23333936231155051>
- ⁸⁸ Iheduru-Anderson, K. C., & Shingles, R. R. (2023). Mentoring Experience for Career Advancement: The perspectives of Black Women Academic Nurse Leaders. *Global Qualitative Nursing Research*, 10. <https://doi.org/10.1177/23333936231155051>
- ⁸⁹ University of Waterloo. (n.d.). *Professional and academic development and mentorship*. <https://uwaterloo.ca/presidents-anti-racism-taskforce/professional-and-academic-development>
- ⁹⁰ Menezes, A., Arora, N., Sobchak, C., Mercado, M., McDonald, M., Monteiro, S., Semalulu, T., Agarwal, G., Archie, S., & DARE Group Collaborative. (2023). The McMaster Racialized Resident Mentorship Program Evaluation Protocol: Evaluating a racialized resident to racialized staff physician mentorship network on resident sense of belonging and medical training outcomes. *MedRxiv*, 2023-09. <https://doi.org/10.1101/2023.09.10.23295329>
- ⁹¹ McGill University. (n.d.). *Nursing Peer Mentorship Program (NPMP)*. <https://www.mcgill.ca/nursing/students/student-resources/nursing-peer-mentorship-program-npmp>
- ⁹² University of British Columbia. (n.d.). *Mentorship program*. <https://nursing.ubc.ca/mentorship-program>
- ⁹³ University of Calgary. (n.d.). *NurseMentor: support & guidance for Nursing undergraduates*. <https://nursing.ucalgary.ca/alumni-donors/get-involved/nursementor>
- ⁹⁴ Dalhousie University. (n.d.). *Community of Black Students in Nursing (CBSN)*. https://www.dal.ca/faculty/health/nursing/about/Student_Equity_Coalition/community-of-black-students-in-nursing--cbsn-.html
- ⁹⁵ Ontario Ministry of Health. (2024, April). *2024/25 Guidelines for Participation in the Nursing Graduate Guarantee (NGG) Program*. <https://www.ontario.ca/files/2024-05/moh-2023-24-guidelines-participation-nursing-graduate-guarantee-program-en-2024-05-06.pdf>
- ⁹⁶ The Ottawa Hospital. (2024). *Nursing annual report 2023*. <https://www.ottawahospital.on.ca/en/documents/2024/05/nursing-annual-report.pdf/>
- ⁹⁷ Prince Edward Island Health. (n.d.). *Transition to Practice Program*. <https://www.princeedwardisland.ca/en/information/health-pe/transition-to-practice-program>
- ⁹⁸ Registered Nurses Association of Ontario. (n.d.). *Nurse Mentor Initiative*. <https://rnao.ca/bpg/get-involved/acpf/nurse-mentor-initiative>

⁹⁹ Canadian Association of Schools of Nursing. (2024). *IEN Mentorship Program*. https://cnei-icie.casn.ca/content/user_files/2024/08/CASN-IENMP-Brochure-08-24-EN.pdf

¹⁰⁰ CARE Centre for Internationally Educated Nurses. (n.d.). *Mentoring Program*. <https://care4nurses.org/mentorship-programs/>

¹⁰¹ Sunnybrook Health Sciences Centre. (n.d.). *Internationally Educated Nurse (IEN) pathway at Sunnybrook*. <https://sunnybrook.ca/content/?page=careers-internationally-trained-nurses>