

ABSTRACT

THE SECRET RECIPE: TO LEADERSHIP AND CAREER PATHWAY SUCCESS IN DIETETICS

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This dissertation focused on leaders within the dietetics profession and allowed their “voice” to be heard related to their specific personal and lived experiences throughout their own career pathways. A total of twenty participants (eighteen women and two men) were selected for this qualitative research study. I completed twenty in-depth face-to-face and phone interviews, which each lasted approximately 90 minutes. Narrative inquiry analysis was used to identify some of the key themes that emerged from the findings.

A total of five key themes emerged as they related to participants’ career pathway and leadership development. Mentoring was one theme that emerged; the participants shared how family, education, and professional colleagues influenced their career pathway development. A second theme was career pathways, which focused on traditional and non-traditional pathways toward becoming a Registered Dietitian Nutritionist (RDN) and how certain issues/events caused career pathway shifts to occur. The third theme related to specific successes and barriers faced by these participants in their family, educational, and professional lives and how these impacted their own career pathway development. The fourth theme related to personality styles. I used participants’ self-reported assessments and my own personal interpretation to identify how

certain distinct traits emerged and related to the types of career pathways they chose. The last theme focused on participants' personal journey to leadership, the successes and challenges they faced, styles of leadership, and words of wisdom for future leaders.

There exist many leaders within the dietetics profession, but their voices have not been conveyed in the professional research literature. Due to the ever-changing landscape of the allied healthcare professions, the field of nutrition as a whole needs to focus on gaining a better understanding about leadership. These findings can provide some key insights into areas where future development and leadership training should be focused in order to create empowered nutrition professionals who are relevant and can make an impact on our society's future nutrition, health, and well-being.

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THE SECRET RECIPE: TO LEADERSHIP AND CAREER

PATHWAY SUCCESS IN DIETETICS

BY

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My mother has especially exhibited to me the importance of being a wonderful mother and wife and also demonstrated the ability to balance all of the tasks associated with work and family responsibilities. You are truly an inspiration to me and I hope that my daughter Ashley will also have the same loving and nurturing relationship that we have shared with one another.

Even though my daughter Ashley Sochacki is very young, someday I hope that she will consider some of the key findings from this research and believe that the opportunities for career success are limitless as long as you follow your dreams and your heart.

DEDICATION

To my parents, Mr. and Mrs. John and Presentacion Milas, and my daughter, Ashley Sochacki

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PREFACE

I would like to share a story about the career pathway processes of an exemplary woman, Mrs. Morgan Jones, to provide a backdrop for the other stories presented in this dissertation.

Morgan Jones has been a practicing Renal Dietitian for the last 17 years, and recently she was elected President of the state association for the Academy of Nutrition and Dietetics.

Throughout her personal career she has been involved in leadership opportunities, where she has gained both personal and professional fulfillment by serving as a volunteer leader and has had a significant impact upon the continuing education opportunities of others: through programming events for other dietitians, serving as a political advocate for the profession's lobbying efforts and other committee positions (membership recruitment, National Nutrition Month, Food Pantries), just to name a few.

Mrs. Jones stated that she was initially drawn towards the dietetics profession because of her interest in food and healthcare. If someone had to describe Mrs. Jones they would portray her as nurturing, caring, dedicated, and highly motivated to excel at whatever tasks she is given. Therefore, the field of dietetics seemed to be a perfect fit for her, where she could gain a more scientific understanding of food and also make a difference in the lives of others by practicing as a clinical dietitian. During her undergraduate studies, several of her close family relatives developed significant health problems (diabetes and cancer); based on the educational training she gained about nutrition, she was able to provide these family members with a starting point of nutritional knowledge so that they could make changes and improve their overall health status.

Throughout her entire academic career Mrs. Jones was highly involved in volunteer opportunities (she served as President of the Nutrition Club on campus for three consecutive years) and also was ranked at the top of her class in nutrition. Upon graduation, she decided to attend graduate school, where she earned a master's degree in clinical nutrition. Through each of her internship and graduate school experiences she valued the personal difference that she was able to make in other peoples' lives by educating them on the proper dietary recommendations needed for them to achieve a healthier and more enjoyable life.

When Mrs. Jones graduated with her master's degree, she immediately knew that she wanted to become a clinical dietitian that dealt with high-risk population groups. She wanted to deal with a population group that really needed the nutritional interventions and strategies that she could provide to them in this capacity. Mrs. Jones therefore worked in several hospital settings (intensive care unit, infectious diseases, and the dialysis/transplant clinics). After working for several years in these different areas, she decided that she wanted to focus solely on renal dialysis/transplant patients. She stated that she chose this area because every day these patients are faced with life-or-death challenges, and the nutritional component of their healthcare plan is of critical importance to their ability to establish and maintain a satisfying and healthy life.

During her professional experiences as a renal dietitian, Mrs. Jones volunteered at the district and state association levels of the Academy of Nutrition and Dietetics. She held many positions within both of these organizations, but the constant force that motivated her to continue to stay involved was the camaraderie gained by working alongside other dietetic practitioners and the personal satisfaction of knowing that her "voice" was being heard for the profession and

that she was making a difference in various mentoring/educational offerings to other dietitians. It may seem that Mrs. Jones has led a very satisfying personal and professional life, but she stated that it was not an easy road for her to navigate.

Mrs. Jones discussed how the field of dietetics is constantly changing and is becoming more diverse in relation to ethnicity and gender. She identified herself as a woman of color, a wife, a parent, a caregiver to other family members, and a full-time dietitian, all while being able to continue volunteering her time and energy to the profession that she is passionate about. In her words, “Leadership is a quality that should be encouraged by all new, young, and current registered dietitians. In order for our profession to remain competitive with other allied-healthcare professions we need to nurture and promote leadership qualities among one another; because the more voices we have will not only strengthen but support our profession for the future of healthcare and beyond.”

CHAPTER 1

INTRODUCTION

Background

The involvement of women within the workforce has dramatically changed. With women working in and outside the home, their involvement and career pathway development has dramatically changed over the years (Whitmarsh & Wentworth, 2012). Due to this change, the career aspirations of women have led to a growing interest focused on their career pathway development. A variety of factors such as gender, socioeconomic status, race, educational level, parents' occupation, and parental expectations played a major role in the career aspirations of women and their pathway development (Domenico & Jones, 2006; Whitmarsh & Wentworth, 2012).

Women in the Workforce

Throughout history, working women were often regarded as immoral and unfeminine objects of pity (Domenico & Jones, 2006). In some cases working women were even identified as being negligent mothers. By choosing to have a career, women often faced challenges due to their responsibilities as being head of their households (Domenico & Jones, 2006). They were expected to continue to perform their responsibilities as wife and mother in addition to their professional responsibilities.

Historically, it was believed that a woman's place "was in the home," where she was responsible for the caring of her husband and children. Some of the earliest cases of women

working outside the home date back prior to the Industrial Revolution, when women assisted their husbands as business partners, but often received little or no pay (Domenico & Jones, 2006). By the middle of the nineteenth century, women started to become more involved in teaching, nursing, and clerical work. Domenico and Jones (2006) noted that in 1890, less than 3% of married women held jobs outside the home. By 1900, 25% of all women participated in the workforce and by 1910 nearly 7.5 million women held jobs outside the home. As a result of World War II and the shortage of available men for the workforce, women were hired for jobs previously unavailable to them such as skilled labor and union jobs in addition to female-oriented jobs. The labor market participation of women continued to increase from 30% in 1950 to more than 50% in 1980. By the early 1990s, women's participation rates had a brief lapse but soon began to rise again by 1994 (Domenico & Jones, 2006). By the mid 1990s approximately 46% of the U.S. workforce was female.

According to the U.S. Bureau of Labor Statistics (BLS) (2014), women have increasingly attained higher levels of education: among women ages 25 to 64 who are in the labor force, the proportion with a college degree more than tripled from 1970 to 2012. Women's earnings compared to the earnings of men have also seen growth over time. In 1979, women working full time earned 62 percent of what men earned; in 2012, women's earnings were 81 percent of men's.

In regard to wage-earning comparisons between women and men (BLS, 2014), in 2012, women who worked full time in wage and salary jobs had median usual weekly earnings of \$691, which represented 81 percent of men's median weekly earnings (\$854). Among women, earnings were higher for Asians (\$770) and Whites (\$710) than for Blacks (\$599) and Hispanics

(\$521). Women's-to-men's earnings ratios were higher for Blacks (90 percent) and Hispanics (88 percent) than for Whites (81 percent) and Asians (73 percent). By looking at these current statistics it remains apparent that despite attaining higher levels of education and greater participation in the workforce than previously, women still are faced with obstacles such as lower wages in comparison to men.

According to BLS (2014) findings, women accounted for more than half of all workers within several industry sectors: financial activities (53 percent), education and health services (75 percent), leisure and hospitality (51 percent), and other services (52 percent). However, women were substantially underrepresented (relative to their share of total employment) in agriculture (26 percent), mining (13 percent), construction (9 percent), manufacturing (29 percent), and transportation and utilities (23 percent). Unfortunately, disproportionate rates of employment opportunities still exist for women. Based on these statistics, women are still employed predominantly in female-focused professions such as healthcare and education.

In today's society women working outside the home are no longer considered deviations from the norm; they are the norm within the workforce (Domenico & Jones, 2006). However, the need for working mothers to balance their responsibilities is a task being faced by many women in today's society. Issues such as longer life expectancies, changing marriage patterns, and improvements in and acceptance of birth control methods have been influential in affecting women's level of participation within the workforce (Whitmarsh, Brown, Cooper, Hawkins-Rodgers, & Wentworth, 2007). As discussed by Whitmarsh et al. (2012; 2007), women are faced with choosing to make personal compromises in order to find a compatible match while maintaining full-time employment and family responsibilities. These researchers identified three

life patterns to describe the relationships that exist between women's careers and their family lives: "(1) unitrack, a career or work history without the added role of motherhood, (2) sequential, an initial career/work history followed by an interruption for a focus on the responsibilities of motherhood with a reentry to career and the world of work, and (3) multi-track, the juggling of the expectations associated with full-time employment with the responsibilities of motherhood" (p. 230).

According to the BLS (2011), in general, mothers with children 6 to 17 years of age are more likely to participate in the labor force (77.2 percent in March 2010) than mothers with children under 6 years of age (64.2 percent). Also, unmarried mothers (never married, divorced, separated, or widowed) tend to have higher participation rates than married mothers. In March 2010, 74.9 percent of unmarried mothers were in the labor force, compared with 69.7 percent of married mothers.

Career Choices (Gender, Influencers and Encouragers)

In some career pathway aspirations, women have been shown to choose careers that remain deeply embedded in tradition and are more fitting to balance work and family responsibilities. A few examples of these professions can be identified as education (teachers), and healthcare professions (nursing, social-work, dietitians) (Whitmarsh et al., 2012).

However, women who ventured outside of gender-circumscribed roles indicated that they received encouragement from outside their families, such as by teachers, professors, and guidance counselors. Also, the influence of co-workers and bosses played motivational roles in influencing women to achieve success in their current career paths. In addition, Whitmarsh et al. (2012; 2007) stated that for women in dual-career marriages to be successful they relied on

spousal support where their marital partnership relied on responsibilities of the family and home being shared among one another.

Another important factor that cannot be overlooked and will be investigated within this study is related to the centrality of relationships with others and how they may affect a woman's perceptions and life decisions regarding career development. Cook, Heppner, & O'Brien (2005) stated that white women and women of color are often faced with the responsibility of maintaining key relationships within families and communities, and perform a disproportionate share of home maintenance and child-care tasks (compared to men), which can heavily influence their own career decision making and what they perceive are the needs of their families.

Cook et al. (2005) and Whitmarsh et al. (2007; 2012) discussed how positive reinforcement from significant others played an important role in the career development pathways of women. For example, women who predominantly choose female-dominated careers such as teaching or social work identified that their parents sent strong messages to them during their early years that these were excellent career choices for women (Cook et al., 2005). In contrast, women who chose to venture outside of gender-specific careers often stated that they received career encouragement outside of their families by others who assisted them by providing support and mentoring to them.

Some of the most influential career encouragers for women come from support outside of their families such as professors, guidance counselors, coworkers, and bosses (Whitmarsh et al., 2007). Additionally, women from both the female-dominated and gender-neutral career path have identified that support from their spouses was crucial to succeed in a dual-career marriage where marital partnership and responsibilities are shared (Whitmarsh et al., 2007). Additionally,

within the area of career development there are certain encouragers that were identified as being influential for the success of working women (Whitmarsh et al., 2007). Whitmarsh et al. (2007) discussed how positive reinforcement from significant others can greatly influence the success of working women in their career aspirations.

The career development of women can be identified as occurring within a specific cultural context, where the unspoken values, customs, and norms of society may influence what career paths are appropriate and inappropriate choices for young girls and adolescent women (Cook et al., 2005; Whitmarsh et al., 2007; 2012). For example, when children enter adolescence they begin to develop a sense of identity and may question where they fit within the occupational world (Cook et al., 2005). Despite attempts to overcome gender-related career barriers, certain underlying worldviews still exist. As Apple (2010) observed, the world today can still be divided into two distinct yet complementary spheres: the female (domestic) sphere and the male (public) sphere. Domenico and Jones (2006) noted that, based on the barriers women face, their entry as professionals may be more difficult for them than men. It has been suggested that women are underrepresented in science and technology as a result of lower teacher expectations for females' achievements in these fields (Cook et al, 2005). This sense of passive discrimination can occur within the classroom where a female student is neither encourage nor discouraged to succeed, but instead is ignored (Cook et al., 2005; Whitmarsh et al., 2012; 2007).

From Home Economics to Nutritional Sciences

The history of nutritional sciences during the late 19th and early 20th centuries is an accurate representation of how gender segregation resulted in the opening of new avenues for women in science but also made it difficult for them to advance or succeed. Home economics evolved from a concept of Victorian domesticity championed by Catharine Beecher to the formal home economics movement that was launched by Ellen Richards during the early 20th century (Stage & Vincenti, 1997).

The emergence of the home economics movement has been influenced by both politics and domesticity throughout women's history. Historians often attribute the beginning of this movement to Catherine Beecher. Beecher created the "Treatise on Domestic Economy for the Use of Young Ladies at Home" (1841), known as one of the classics among home economics literature. Beecher was focused on contrasting the privileges and responsibilities that existed between American women and European women and the necessity of including preparations for matrimony in the curriculum. These included topics focused on health, clothing, cleanliness, and cooking lessons (Craig, 1945).

Toward the end of the nineteenth century, courses related to domestic economy were part of the required curriculum of several influential land grant colleges. When Iowa State University opened in 1869, each woman student was required to work two hours per day in the dining room, pantry, or kitchen. This was soon followed by more formal instruction in home economics in 1872 with a series of lectures specific to cooking, house furnishing, care of children and the sick, physiology, and domestic chemistry (Craig, 1945; Stage & Vincenti, 1997).

By 1907 there were eight colleges offering courses for training of teachers of “domestic science”; these were:

Connecticut Agricultural College at Storrs, Iowa State College of Agriculture, Michigan State Agricultural College, Oklahoma Agricultural and Mechanical College, Agricultural College of Colorado, Agricultural College of Utah, Washington State College, and Utah State College. (Craig, 1945)

During the early 19th century in the Western world, women were still expected to remain as wives and mothers where their duties were focused on home tasks such as feeding their families wholesome meals. At the same time, new discoveries within the agricultural sciences and physiology were starting to appear. Therefore, in order to be sufficient at her duties a modern mother needed to become more familiar with science (Apple, 2010). The need to educate women about contemporary scientific knowledge started the growth of modern cookbooks, women’s magazines, and the development of home economics, especially the science of nutrition. As a result, science teachers developed home economics curricula for the primary and secondary schools to provide girls with a “science course” to lay a foundation for successful homemaking (Apple, 2010). However, women were not content to remain limited to solely home economics curricula and this started the movement towards women engaging in higher education in nutrition science.

One of the key turning points in the history of home economics in the twentieth century was led by Ellen Richards, who created the Lake Placid Conferences (1899-1907). This initial pioneer group of home economists were faced with the issue of defining home economics as a profession. The Lake Placid Conferences resulted in the creation of the American Home Economics Association (AHEA) in 1909, which was a pivotal point in changing the direction of

home economics away from the domestic economy that was advocated by Catharine Beecher (Craig, 1945; Stage & Vincenti, 1997). During the first Lake Placid meeting in 1899 the main order of business was to define “home economics.” The selection of a profession name was of importance because different terms indicated different goals and emphases. “Household arts” emphasized cooking and sewing and was tied to manual training in the public schools and cooking schools. “Domestic economy” related back to the ideals of Catherine Beecher, which focused on domestic housewife problems and servant management issues. “Domestic science” tied the kitchen to the chemical laboratory focused on nutrition and sanitation. This term was the preferred term because it provided a way to move women who were trained in science into employment in academics and industry (Craig, 1945; Stage and Vincenti, 1997).

After lengthy debates, the Lake Placid group selected the term “home economics,” which tied in the concept of the home as the woman’s traditional sphere of influence with attention to the social and natural sciences. Throughout her career Ellen Richards focused on moving the profession of home economics toward a more rigorous research agenda. Richards was influential in pointing out that the profession was changing and a woman’s role no longer remained solely within the confines of her home, but also expanded into the consumption of the marketplace. A need existed for a more organized curriculum that could meet the needs of the marketplace and provide appropriate higher educational training so women could attain leadership positions (Stage & Vincenti, 1997). Among these women were a small group who were interested in hospital dietetics. These women developed the first official definition of dietitians: “persons who specialize in the knowledge of food and can meet the demands of the medical profession for diet therapy” (Cassell, 1990, p. 9). During these early formative years of the dietetics profession,

no standardized courses in dietetics existed, but dietetics training was conducted on-site in hospitals where students had at least two years of training in home economics (Cassell, 1990).

However, despite these early attempts by home economics leaders to define itself as a profession focused on research and higher educational training associated with the social and natural sciences, gender stereotypes were often encountered. The fine line of using traditional ideas of womanhood to further nontraditional career pathways was often associated with many pitfalls.

As noted above, the Lake Placid conferences led to the founding of the American Home Economics Association (AHEA) in 1909. During this time, the field of dietetics was still in its infancy as a profession, so hospital dietitians along with women in school lunchrooms, college dormitories, and other institutional settings collaborated to create a common yearly meeting place where they could share knowledge, discuss problems, and dream of the future of their professions (Cassell, 1990). In 1912 there were approximately 2,500 hospitals in the United States and the dietitian's sphere of influence was limited largely to the diet kitchen: feeding the sick and instructing nurses in this feeding. The first official meeting of dietitians was held in 1916 in Chicago, and in 1917 an official dietetics section was established as part of the Philadelphia Home Economics Association. This eventually led to the creation of the American Dietetics Association in 1922 (Cassell, 1990).

During the American Home Economics Association's (AHEA) 50th anniversary meeting in 1959, leaders focused on re-examing their profession. These leaders asserted that home economics had evolved into areas of practice in education, research, social welfare and public health, dietetics, and institutional administration and business. As a result of this change the

AHEA became the American Association of Family and Consumer Sciences (AAFCS) (Stage & Vincenti, 1997). The creation of AAFCS therefore brought home economics almost full circle since the first Lake Placid Conference. Adaptations were found to exist in order to gain access as a professional field, which despite recruitment of males has remained a predominantly female profession; leaders also focused attention on diversity issues and the need to recruit non-traditional and minority students (Stage & Vincenti, 1997). The early influences of the home economics movement helped shape the creation of the profession of dietetics. Throughout the course of history a close relationship existed between the professional development of women leaders both in home economics and dietetics, leading to the current Academy of Nutrition and Dietetics that exists today (Accreditation Council for Education in Nutrition and Dietetics, 2014).

Summary

The issue of women within the workforce has significantly changed over the course of time, and their “voice” needs to be heard relating to the specific personal and lived experiences that have occurred throughout their own career pathways. There exist many leaders within the dietetics profession, but their voices have not been conveyed or documented within the professional research literature. As a result of this study, the researcher will be able to listen to their own personal stories and career experiences, which can provide useful knowledge that can be shared in the literature about leadership, women, and specifically the profession of dietetics.

Purpose of the Study

The purpose of this study is to gain a better understanding of the career pathways of women who have become leaders within the field of dietetics. Laramée (2014) noted that, in order for women in dietetics to remain competitive within their field, it is imperative to focus on how dietitians are able to lead within their professional and volunteer organizations. Also, it is necessary to gain a better understanding about dietetics professionals' leadership competencies, both conceptually and interpersonally. By evaluating women leaders within the field of dietetics, in this study I will attempt to uncover transformational leadership experiences that they experienced along their career pathway development. The field of nutrition is constantly changing and as a result of our global workforce, issues such as gender and diversity have emerged; these will also be studied to determine if they have impacted the career experiences of these women who are dietetic leaders.

Significance of the Study

As a result of the changing healthcare system today, the field of dietetics is constantly changing and in order to remain at the forefront and competitive within the workforce, the dietetics profession needs to adapt as needed (Laramée, 2014). Due to the ever-increasing diversity of job opportunities and the need to remain competitive as a profession, recruitment and retention of persons interested in the field is important (Kobel, 1997).

Very little research has been conducted specifically on dietitians related to career pathway development and leadership. The theoretical framework that will guide this study is based on transformational leadership with additional supporting information related to self-

authorship, Mezirow's Theory of Transformational Learning (1990), and personality scales such as Holland's theory of Person-Environment Interactions (1997) and the Big-Five Factor Model of Personality (Costa and McCrae, 1992). The additional insights that will be gained from the findings of this study will provide valuable information, that can contribute to the professional literature and possibly assist future leaders, not only of dietetics but other allied health and education professions, in navigating their own career pathways for leadership success.

Research Questions

The questions guiding this study are:

1. What are the career pathways of leaders in the field of dietetics?
2. What transformations did these leaders experience?
3. How did they emerge into leaders?
4. What are the personal attributes of a leader?

Key Concepts and Terms

According to Capra (2012), the term *dietitian* was first used in the mid-eighteenth century within the U.S. While the field of dietetics is a broad field, the term *dietitian* was originally applied to a practitioner with a relatively narrow focus on practice. Previously, dietitians were seen to have two principal duties: preparation of the food of special diets and instruction of nurses within schools of dietetics and cooking classes. However, the view of dietetics as a profession has significantly changed: as early as 1925, the first issue of the *Journal of the*

American Dietetic Association focused on identifying dietitians as the “nutrition experts” where women could emerge as professionals with independent careers (Capra, 2012).

The term *leadership* in dietetics can be defined within two separate spheres, internal and external to the profession. Capra (2012) stated that it is difficult to define leadership in dietetics. While the field of dietetics relies heavily upon its leaders to continue advancing as a profession, changes cannot occur without the influence of leadership and vision from the practitioners within dietetics to link health, nutrients, and food for the future of the profession (Capra, 2012). Therefore, the leaders of this profession need to emerge and take the dietetics profession to the next level of practice for the future.

Very little research aside from unpublished dissertations or smaller pieces of larger studies has focused specifically on leadership within dietetics. Gregoire and Arendt (2004) described how the dietetics profession needs additional research in order to determine appropriate strategies for preparing dietitians to become effective leaders. Dietitians need to assume leadership positions so they can be instrumental in the future national and international agendas relating to food and nutrition among other disciplines (Capra, 2012).

The term *career pathway development* of women is an area where a separate distinction is needed aside from the male-based theories of careers that currently exist. Gallos (1989) discussed how women’s distinctive developmental voice and needs point to fundamentally different career perspectives, choices, priorities, and patterns that need to be understood and appreciated. Issues such as cultural expectations, changing social norms, employment opportunities, marital practices, and childbirth and child-rearing practices must also be taken into consideration when evaluating women’s career development (Gallos, 1989). As noted earlier,

women constitute a large percentage of the current workforce. Domenico and Jones (2006) and U.S. Dept of Labor Statistics (2005) projections showed that women would account for at least 51 percent of the increase in the labor force between 2004-2014 and that approximately 72 million of the workforce would be women by 2014, with a continued rise through 2015.

Garner (2012) argued that, given that the field of dietetics can be defined as being as diverse as the individuals who practice within it, there is no specific definition for a “specific career pathway” to a career in dietetics. Often, dietetics practitioners who begin their careers with a “firm” sense of their goals might find themselves rethinking their path along the way as new focus areas of practice emerge or as their interests evolve (Garner, 2012). Therefore, a useful tool designed by the Council on Future Practice (2012) focused on the five-stage Dreyfus Model of Skill Acquisition (see Appendix A, Academy of Nutrition and Dietetics Career Guide).

This model allows dietetics practitioners to self-assess their own level of expertise as novice, beginner, competent, proficient, advanced practice, or expert. By identifying their level of expertise, practitioners can use the model to allow for additional needs for lifelong learning and professional development as an integral component to increase their own professional competencies and allow advancement to higher levels of practice (Garner, 2012). The Council on Future Practice works in collaboration with the Commission on Dietetics Registration and the Commission on Accreditation for Dietetics Education. This council is focused on the future practice needs for the profession of dietetics (<http://www.eatright.org/futurepractice/>).

The term *leader* as defined by Laramee (2014) is someone who has a passion for the job.

Identifying a passionate person is easy because they care about what they are doing and about

their employees, colleagues, and friends. They love to learn and grow as individuals and get excited when the people around them do the same. Two additional qualities that a leader must possess are integrity and intelligence. Integrity can be defined as being truthful and taking responsibility for your actions and fixing your mistakes. A leader with integrity will demonstrate fairness, loyalty, and goodness (Laramee, 2014). Intelligence is exhibited by having a breadth of knowledge that can assist others in complex situations. Also, by having intelligence a leader exhibits a high level of self-awareness, maturity, and self-control that are important for handling setbacks and enjoying successes (Laramee, 2014). As defined by Laramee (2014), “Good leaders both think and lead with the ‘long view,’ and they tolerate conflict because they understand that some discord is normal and even necessary to create opportunities for the organization to be challenged and grow” (p. S4).

When defining a leader, Jack Welch, former chairman and chief executive officer of General Electric, has said leaders need to possess and demonstrate the four “E’s” of leadership: “**Energy**: the ability to “go-go-go,” love of action, and the ability to embrace change; **Energize**: the skill to inspire others to move mountains when they must; **Edge**: the courage to make tough decisions; and **Execute**: the ability to get the job done” (Laramee, 2014).

Theoretical Framework

The main theoretical framework that guided this study was transformational leadership and additional supporting information related to self-authorship, Mezirow’s Theory of Transformational Learning, and personality scales such as Holland’s theory of person-environment interactions and the Big-Five Factor Model of Personality.

Transformational Leadership Theory

Atkinson and Pilgreen (2011) noted that transformational leadership can be based on the following three assumptions: (1) subordinates tend to band together more around a person they find inspiring, (2) leaders who have a vision and passion are more prone to accomplish exceptional results, and (3) the primary way to accomplish great things as a leader is to interject passion and encouragement. The Multifactor Leadership Questionnaire (MLQ; Northouse, 2004) was designed to measure Transformational Leadership among research management administrators. Some of the key strengths of the tool are that it allows for multiple perspectives, it is intuitive, and it is process based (Northouse, 2004). Some of the weaknesses of the tool are that the MLQ may appear very “I” and “Me” centered because of the way the questions are worded. Also, the MLQ does not account for all of the various contexts that can exist (Atkinson & Pilgreen, 2011).

Transformational leadership can be described as an expansion of transactional leadership (Bass & Bass, 2008). Transactional leadership emphasizes the importance of transactions or exchanges that can occur between leaders, colleagues, and followers. In contrast, transformational leaders are more concerned with motivating others to achieve more than they ever expected (Bass, 1998; Bass & Bass, 2008). Bass (1998) and Bass and Bass (2008) evaluated how transformational leaders typically behave in ways to achieve superior results by using one or more of the four components of transformational leadership: charismatic leadership, inspirational motivation, intellectual stimulation, and individualized consideration. A more detailed discussion of these four components will be covered later in more detail.

Current research conducted at the University of Missouri-Columbia (MU) has initiated an offering of an Ed.D. program in Educational Leadership. The faculty at this institution have come to recognize that the methods, order, and expectations of the capstone work required for an advanced degree in educational leadership needed to incorporate the usage of four transformative strategies: (1) a cohort structure with embedded team projects, (2) role-based case studies, (3) reflective assessment portfolios, and (4) participatory action research (Mezirow & Taylor, 2009). Arguments have been made that transformative learning is individual and occurs solely within the confines of the heads and hearts of individuals. However, current research findings from MU have showed that transformative learning can occur through social interactions with others or individually within their organizations (Mezirow & Taylor, 2009).

Therefore, one of the aims of this study was to explore the transformative learning of dietetic leaders and determine if any of the transformative learning strategies apply to dietitians in their career pathway development. Through the usage of qualitative research design and phenomenological approaches, I hoped to gain insights into the personal and lived transformational experiences that occurred throughout participants' career pathway and led them to becoming leaders within the profession of dietetics.

Self-Authorship

Baxter Magolda (1998) discussed how self-authorship in adult learners requires both substantial support and substantial challenges. These challenges can occur from the workplace and can be supported within graduate education to continue to enhance the transformational learning process of adult learners. Self-authorship is based upon a set of complex assumptions

that relate to the specific nature of the knowledge (Magolda, 1998). According to Collay and Cooper (2008), self-authorship requires a sense of identity through which individuals can distinguish themselves as being capable of knowledge construction. It relies upon one's sense of interdependence with other people and the ability to gain access without being consumed by others. Collay and Cooper (2008) noted that self-authorship is based upon the concept of making meaning of one's experience and using those skills to become an effective leader for others to look to for guidance and support.

Mezirow's Theory on Transformational Learning

The research basis for transformative learning evolved from a comprehensive national study in 1978, initiated by the U.S. Department of Education, in order to explain a record number of women who were returning to higher education within the United States (Mezirow, 1990). This was a grounded theory study that included analysis of a large number of community college programs. The findings from this study identified ten phases of learning that were clarified throughout the transformative process and were shown to be exhibited by women pursuing higher education (Mezirow, 1990). These ten phases were:

(1) a disorienting dilemma, (2) self-examination, (3) a critical assessment of assumptions, (4) recognition of a connection between one's discontent and the process of transformation, (5) exploration of options for new roles, relationships and action, (6) planning a course of action, (7) acquiring knowledge and skills for implementing one's plan, (8) provisional trying of new roles, (9) building competence and self-confidence in new roles and relationship, (10) a reintegration into one's life on the basis of conditions dictated by one's new perspective. (Mezirow 1990; Mezirow & Taylor, 2009, p. 19)

The learning process and how one is able to categorize one's experiences, beliefs, people, and events all involve certain frames of reference (Mezirow & Taylor, 2009). These frames of

reference can include certain personality traits, genealogy, power allocation, worldviews, religious customs, psychological influencers, and learning styles and preferences. Therefore, learning can be understood as the process of using a prior interpretation to create a new or revised interpretation for the meaning of one's experience to guide future action (Mezirow & Taylor, 2009). Transformative learning can be defined as "learning that transforms problematic frames of reference to make them more inclusive, discriminating, reflective, open and emotionally able to change" (Mezirow 1990; Mezirow & Taylor, 2009, p. 22).

Learning can be described in one of four ways: by elaborating on existing meaning schemes, by learning new meaning schemes, by transforming meaning schemes, and by transforming meaning perspectives. A transformative learning experience requires that the learner is capable of making an informed and reflective decision to act or not to act (Mezirow & Taylor, 2009). Certain influencers such as power, ideology, race, class, gender differences and other interests may exist, but transformative learning occurs when the adult learner is able to reason and assess the situation for themselves and make their own personal judgment (Mezirow & Taylor, 2009).

As one can see, leadership and the transformational learning process are multifaceted constructs. Leadership is not necessarily genetic, but it does draw upon certain personality traits and innate skills and abilities. In addition, it requires significant nurturing and education along with personal and professional mentoring (Gabriele & Min, 2010). Therefore, one of my goals for this study was to try and gain a better understanding for factors that might have influenced the participants' decision to act in a certain way along their own career pathway. I expected that certain transformational learning processes would emerge as I analyzed concepts from the

obtained data and would provide additional insight into what affects the ongoing formation of leadership within certain individuals within the dietetics profession.

Personal Perspective

In order to avoid any confusion related to why I decided to choose this topic, I am providing my own self-disclosure section. By providing my personal perspective, I am exposing my beliefs and feelings which are related to the construction of the topic being investigated and studied within this research study.

This researcher's own career pathway reflects work within the field as a clinical dietitian and as an involved leader at both the local and state levels. By profession and also through my own volunteer positions, I have found it interesting to explore how dietitian leaders have chosen to engage in different career-planning activities that have helped shaped their own careers and the mentoring of future dietetics leaders. Personally, I have held positions as president, past-president, and other board positions within the local and state-level dietetic associations in Illinois. I have also acted as an adjunct nutrition faculty member at several Illinois universities. In addition, I was recently recognized as the Dietitian of the Year by the Illinois Academy of Nutrition and Dietetics. Through my participation in these organizations and academic settings, I have realized that being a leader in the field allows one to have an influential role in shaping the future of dietetics.

Through my own personal program-planning activities as well as academic and mentoring opportunities, I have been able to share my own career-planning experiences and assist other dietitians with potential opportunities that might exist for their own career

aspirations. Dietetics professionals are a dynamic set of healthcare professionals. I believe that there are certain characteristics or traits that might influence their decision to engage in volunteer leadership positions within their professional associations or as a mentor or faculty member in higher education or healthcare settings.

By exploring areas where dietitians hold leadership positions (association positions, academic and clinical areas of practice) I hope to gain additional insight on the career planning processes of dietetics leaders and determine whether the information I acquire can be useful for other dietetic professionals to apply to their own career planning paths. The literature contains a large amount of research related to the nursing and medical professions for career planning development activities, but there is a lack of research related specifically to dietitians. Therefore, I expect this study to contribute to the literature and provide a better understanding for the career pathways of women who are dietitian leaders.

Chapter Summary

Chapter 1 has provided a brief overview of the overview for this research study. A definite need exists for additional research related to an understanding of the career pathway processes that lead to the development of leadership within the field of dietetics. Very little research has been published in this area, so through the findings from this study, hopefully valuable insights will be found related specifically to dietetics and influencers such as gender, diversity, and ethnicity as they exist within the profession. This chapter also presented the concepts and terms which will be focused on throughout this study: dietitians, career pathways, and leadership.

The main theoretical framework that will guide this study is transformational leadership. However, to provide additional insight and understanding about the career pathway processes associated with leadership; research related to self-authorship and Mezirow's theory on transformational learning will also be provided. Chapter Two will outline the literature regarding the history of the dietetics profession, dietetics curriculum and career pathway opportunities. In addition, additional discussion will be provided on career pathway development and leadership.

CHAPTER 2

LITERATURE REVIEW

Introduction

This literature review includes a discussion on the history of dietetics, educational requirements, and the career pathway development of leaders who are dietitians. The main significance of this study is based upon the dearth of research related to leadership and career pathway development as it applies to the field of dietetics. Therefore, by referring to other disciplines and their definitions of leadership, this study will help fill the gap in the literature and define the importance of dietitians in leadership positions as it relates to their own career pathways and professional fulfillment.

History of Dietetics and the Profession

The Academy of Nutrition and Dietetics was conceptualized with a constitution and bylaws as the American Dietetic Association at a 1917 meeting in Cleveland, Ohio. This ultimately led to its formal incorporation and first central office in Chicago, Illinois (Accreditation Council for Education in Nutrition and Dietetics, 2014). During that year, dietitians were scattered throughout the country and employed by a small number of hospitals. Very few people both in and out of hospitals knew what the requirements were to handle a dietary department (Barber, 1959). Therefore, each dietitian had to rely upon him/herself to determine what needed to be done to complete his/her duties. The only limited correspondence

they shared was through written communications or at Home Economics meetings. However, in 1917, the American Home Economics Association canceled its meeting due to so many of its members being involved in war work. The focus during this period for these “pioneer women” was to provide the best service for their hospitals during a time when food shortages were present and to find employees who were both efficient and adequately trained (Barber, 1959).

In 1899, a subgroup of the American Home Economics Association (AHEA) pursued a specialty in dietetics. They formed the ADA (American Dietetic Association) in 1917 and held their first annual meeting that year. One session, “The Dietitian as the Doctor's Assistant,” was symbolic of the roots of dietetics. Sarah Tyson Rorer, quoted by Mary Pascoe Huddleson to be the first American dietitian, further established the dietetics profession with her diet kitchen for patients with physician-ordered diet prescriptions. Placing the patient kitchen in her cooking school and preparing food uniquely designed for special needs was instrumental in linking dietetics, food, and management. (Erickson-Weerts, 1999, p. 291)

This first annual meeting for the ADA was the first conference devised specifically for dietitians, where they could come together to discuss food problems of the day and review issues faced by hospitals and other institutions.

The American Dietetic Association officially changed its name in January 2012 to the Academy of Nutrition and Dietetics. The new name complements the organization's focus on improving the nutritional well-being of the public while communicating the academic expertise of Academy members and supporting the organization's history as a food and science-based profession. The Academy of Nutrition and Dietetics quickly and accurately communicates our identity—who we are and what we do (AND, 2014). In order to respond to the ever-changing issues faced by the dietetics profession, the Academy of Nutrition and Dietetics will continue to evolve to meet these needs and remain forefront as the experts on issues related to nutrition (see Appendix B, which includes a timeline of the history of AND requirements).

It is difficult to determine a definitive explanation for the dietitian's role. This issue was faced in 1917 when the American Dietetic Association (ADA) was founded and continues today by the AND. However, the great opportunity and difficulty for the profession has been its diversity (Cassell, 1990). Within the realm of healthcare, dietitians have found a place in all potential areas where they can make an impact. Institutions that produce, prepare, or serve food are also large employers of dietitians. The commercial world such as government, education, sports, and the arts are areas of employment for dietitians. Additionally, basic research laboratories, agricultural stations, pharmaceutical companies, religious organizations, and the media are becoming additional career avenues where dietitians have found themselves employed (Cassell, 1990).

Therefore, the diversity of the profession and dietetics practice offers every dietitian unlimited opportunities for career pathways and professional development based upon one's own personal talents and interests. The findings from this study will contribute to the literature about the various career pathway developments of dietitians who have been recognized as leaders within their profession.

The Academy of Nutrition and Dietetics

The Academy of Nutrition and Dietetics (AND) is the credentialing organization for Registered Dietitians within the United States. In order to be considered a Registered Dietitian there are certain academic and professional requirements that must be met. Minimum requirements include completion of a bachelor's degree, completing required coursework approved by the Accreditation Council for Education in Nutrition and Dietetics (ACEND),

participation in an ACEND-accredited supervised practice program (which typically can run 6 to 12 months in length), and passing a national examination administered by the Commission on Dietetic Registration (CDR).

Dietetics Curriculum

In 2012, the Academy of Nutrition and Dietetics created a task force to focus on improving dietetics curricula to include medical nutrition therapy skills, managerial skills, and cultural competencies called the Council of Future Practice. According to Capra (2012), the need for evolving curricula, business skills, diversity, and ability to work collaboratively with interdisciplinary teams is needed. Based on findings from the Council on Future Practice (see Appendix A, Dietetics Career Development Guide), the five-stage Dreyfus model of skill acquisition was adapted for the dietetics profession (Stein, 2012). The Dreyfus model depicts the dietetics curriculum for career advancement and samples of various dietetics practice areas and categories for career advancement within specialty areas such as pediatric or other clinical settings.

This model allows dietetic practitioners to self-assess their own level of expertise as novice, beginner, competent, proficient, advanced practice, or expert. By identifying their level of expertise, dietitians can use the model to assess additional needs for lifelong learning and professional development as an integral component to increase their own professional competencies and allow advancement to higher levels of practice (Garner, 2012). Garner's findings were based on interview results obtained from 2011-2012 with dietetics professionals who were identified as career-savvy members of the field. An interview guide of questions was

developed and used by all interviewers to maintain consistency in the questions being asked of the subjects. This model was designed to allow other dietetics professionals to assess in their career development process in an upward climb (Garner, 2012).

In relation to the purpose of this study, a background of the dietetics curriculum must be briefly discussed in order for the reader to gain an overview understanding of the rigorous educational and training requirements that are needed for dietetics students to earn a certificate verifying completion of an ACEND-accredited undergraduate program. Upon completion of their undergraduate program, students may choose to participate in an ACEND-accredited supervised practice program (typically can run 6 to 12 months in length); some are also combined with master's degree programs. When the requirements are met for the ACEND supervised practice component, a student receives verification that he or she can apply to take the national examination administered by the Commission on Dietetic Registration (CDR) in order to attain licensure and registration as a Registered Dietitian.

Accreditation

The accreditation standards for education programs that prepare entry-level dietetics practitioners were updated in 1997 when the standards were changed significantly to meet the curriculum requirements identified as necessary by the 1994 Future Search Conference and 1995 CDR Practice Audit of practitioners and employers (ADA, 2002). The 1994 Future Search Conference examined dietetics practice, education, and credentialing and recommended changes that were deemed necessary for the future of the profession. These new curriculum requirements identified broad-based foundation knowledge, skills, and core competencies imperative to all

dietetics practice. Some of the key knowledge and competencies areas identified were: communications, physical and biological sciences, social sciences, research, food, nutrition management, and healthcare systems (ADA, 2002).

The regulatory agency established to monitor these educational programs to become a Registered Dietitian (RD) or a Dietetic Technician Registered (DTR) is the Accreditation Council for Education in Nutrition and Dietetics (ACEND). Accreditation is necessary because dietetics is a unique profession of such complexity and benefit to the health of the population that it requires a defined educational process based on national standards. ACEND is responsible for setting the national standards for what dietetics students are taught, and for evaluating, recognizing, and publishing a list of education programs that meet these standards (AND, 2014).

The credentialing agency for the Academy of Nutrition and Dietetics is the Commission on Dietetic Registration (CDR). The purpose of the Commission is to serve the public by establishing and enforcing standards for certification and by issuing credentials to individuals who meet these standards. The CDR has sole and independent authority in all matters pertaining to certification including, but not limited to standard-setting, establishment of fees, finances, and administration. Appendix D (Overview of Dietetics Education Today) outlines the various licenses and board certified specialty certifications that practitioners within the field of dietetics may hold.

Professionalism

Professional Socialization

According to Brady, Lordly, MacLellan, and Gingras (2012), the concept of professional socialization is related to how individuals selectively acquire the values and attitudes, interests, skills and knowledge—in other words, the culture—of a group in which they seek to become a member. Professional socialization focuses on how one becomes a dietitian and how the academic education and practical training experiences may be influential in shaping the identity of the dietitian (Schiller, 2000). Brady et al. (2012) stated that in order to establish a strong foundation for professional identity and image, the concept of professional socialization needs to be examined in more depth.

Brady et al. (2012) asserted that professional socialization is comprised of three phases: (1) pre-socialization, (2) formal socialization, and (3) post-socialization. They conducted a study to gain a more in-depth understanding of professional socialization and identity development among new practitioners with three years of practice or less. The researchers focused on new practitioners' perspectives on their education, what influenced people's decisions to pursue a career in dietetics, and how the education and training process influenced the professional socialization of dietitians (Brady et al., 2012).

Brady et al.'s (2012) findings showed a variety of influences related to these different phases of professional socialization. Some of the key factors that they identified included: gender socialization, an interest in science, an interest in nutrition, experience with a personal or

family illness or eating disorder, a desire to help others, and a prior encounter with a dietitian through mentoring or as a patient.

According to Brady et al. (2012), the relationships formed during the subjects' education and training experiences were influential in their socialization process. Through the relationships established with mentors, peers, and educators these subjects benefited from assistance on how to cope with the demands and challenges faced by dietitians in the workplace environment. Also, these relationships allowed a greater understanding for "what it meant to be a dietitian" and the "different career options that exist for dietitians" (Brady et al., 2012). In order to understand the magnitude of importance that the field of dietetics has for other individuals and the health choices they make in regard to their diet, one needs to realize that a high level of professionalism is required to practice as a competent and trustworthy dietetic practitioner.

Career Pathways

Many women have responded to the workplace where traditional male career patterns exist by negotiating the traditional organizational system to attain the balance and control needed within their own lives (Gallos, 1989). These working women have struggled to overcome obstacles that exist; rather than accept traditional expectations for success, women have negotiated to attain flexible work hours, part-time arrangements, or tasks where they are willing to take risks and bring a creative perspective to their work in return for their dedication to their organization without the expectation of immediate gratification or career ladder advancement (Gallos, 1989).

When evaluating the career development for women, the expression of their professional self over a lifetime is of importance to them. Women appear more concerned with the desire to achieve fair treatment and rewards for their efforts, rather than occupational progress. Gallos (1989) discussed how women need to take long-term perspectives when they look at their careers and often need the patience and confidence to be able to design a satisfying personal and professional life.

Cook et al. (2005) stated how women are faced by a variety of multiple influences throughout their own career development that often relate to gender, race, and ethnicity. The balance of trying to navigate one's career development is often negotiated due to interactions occurring within their immediate environments (microsystem) and by broader societal demands (macrosystem) such as gender, race and ethnicity (Cook et al., 2005).

Mentoring Relationships

Within the context of what is being explored within this study, becoming a leader is not necessarily something that an individual is born with; it is not solely a genetic trait. As Gabriele and Min (2010) point out, leadership can be described as a multifaceted construct, which relies upon mentoring relationships as a lifelong experience. Within this study, we are planning to investigate through a qualitative research design using a phenomenological approach the personal and lived career pathway experiences that have led to the subjects becoming leaders within the dietetics profession. Gabriele and Min (2010) discuss how personal and professional mentoring are important in developing the skills, abilities and ongoing nurturing support needed to succeed and advance within one's professional career pathway.

According to Washington (2010), mentoring can take several different forms: formal or informal, supervisor to subordinate, subordinate to peer, or peer to peer. Regardless of the approach chosen, mentoring has been identified as integral to promote career development and is often used as a career management tool. Often women face the largest challenge in identifying and finding persons who are willing to commit to being their mentor. Aside from finding a mentor, women are also challenged by finding a mentor who can help them further develop their skills sets, attain their goals, and provide them with needed feedback for them to advance within their profession (Washington, 2010).

According to the BLS (2011) findings, women account for the majority of all workers in the financial activities industry and in education and health services. However, women remain substantially underrepresented in fields related to agriculture, mining, construction, manufacturing, and transportation and utilities. Finding mentors is a difficult process for women already, but for women who are employed within male-dominated professions it is even more difficult for them to attain a mentor.

The mentoring relationship occurs in four various phases as outlined by Kram (1983): (1) initiation phase, (2) cultivation phase, (3) separation phase, and (4) redefinition phase. Within each of these phases of the mentoring process the protégés have the ability to maximize their mentoring experience and receive encouraging support. In addition, mentors also serve as providers of career guidance and psychosocial support. By providing career guidance a mentor may be expected to provide the mentee sponsorship, exposure, and coaching. Additionally, having psychosocial support from a mentor can include being a role model, counselor, and friend to the mentee (Kram, 1983). In order to have a successful mentoring relationship, Washington

(2010) asserted that a common goal must be shared between the two individuals (mentor and mentee).

An example within contemporary U.S. society can be seen by prominent women attorneys who are providing young mentees from diverse backgrounds opportunities to connect with women who are role models who have attained high levels of achievement within the profession (Whitmarsh et al., 2012). As a result of recent affirmative action plans and equal opportunity laws, a variety of career options have become available for both women and minorities. Employers are now legally mandated in relation to hiring, promotion, and other employment decisions. Given the increase of women as lawmakers and legal interpreters, the legal and political occupation may experience greater support for equal opportunities in employment versus other professions (Whitmarsh et al., 2012).

Despite some of the identified obstacles that have been discussed, women have changed the face of the current workplace due to their increased participation and job opportunities in today's workforce. Women are now obtaining jobs in traditionally male professions such as science and law, but the road to advancement for many women still requires them combating the glass-ceiling dilemma (Washington, 2010). The glass ceiling can be described as barriers that women face when attempting to obtain higher levels within their profession. One of the main barriers that women face when trying to climb the career ladder can be attributed to the lack of access to mentoring or having less effective mentoring than their male counterparts (Washington, 2010; Whitmarsh et al., 2012). Mentoring has been documented as being one of the most effective tools available for aspiring professionals to attain their career goals, learn from others, and gain important guidance on how to navigate their own professional career pathway

(Washington, 2010). Based upon the findings from my study, certain themes will appear related to the mentoring relationships that these successful leaders received through their own career pathways.

Career in Dietetics

Kobel (1997) stated that in order for the field of dietetics to remain competitive, dietetics program administrators must identify what factors may influence the career decisions of future practitioners. The majority of RDs work in the treatment and prevention of disease (administering medical nutrition therapy, often part of medical teams) in hospitals, HMOs, private practice, or other health-care facilities. In addition, a large number of RDs work in community and public health settings and academia and research. Also, a large number of RDs work in the food and nutrition industry, in business, journalism, sports nutrition, and corporate wellness programs (AND, 2014). (Appendix C includes a detailed discussion on the educational and professional requirements to become a Registered Dietitian).

There also exists a registration status for Dietetic Technicians (DTR), who are required to complete an ACEND-accredited dietetic technician program that includes 450 hours of supervised practice experience, complete at least a two-year associate's degree at a U.S. regionally accredited college or university, and pass a national DTR exam administered by CDR. The majority of DTRs work with RDs in a variety of employment settings including hospitals, HMOs, clinics, or other healthcare facilities (Appendix C includes a detailed discussion on the educational and professional requirements to become a Dietetic Technician, Registered).

The Call for RDNs: New Trends in Dietetics

McCollum (2014) noted that, due to the rise in obesity and other associated health problems, dietetics professionals have gained increased visibility as more and more people have come to recognize the necessary role nutrition plays in health and the need for advice from food and nutrition experts. Services such as diet counseling and behavior modifications for specific disease states (obesity, diabetes, cardiovascular disease, etc). have gained growing interest among other healthcare practitioners who want to offer similar services that are traditionally offered by dietitians (Kobel, 1997).

Some of the current trends shaping our society today are advances in technology, growth in the aging population, multiculturalism, and changing lifestyles. In order for dietetics practitioners to remain competitive as a profession they need to adapt and change as needed. For example, as a result of communication technology advances, dietetics practitioners need to manage information electronically, be aware of current modes of communication, and engage in educational training to keep current with knowledge requirements for technology (Schiller, 2000). Another trend shaping the profession is the aging population of those over age 85 and the requirement for dietetics services in the treatment and management of chronic diseases (diabetes, hypertension, kidney disease, and heart failure) (Schiller, 2000).

As a result of immigration in the United States, the labor market and community health centers are changing. Therefore, dietitians need to know how to address a variety of cultural practices, language and communication barriers, and ethnic food customs (Schiller, 2000). Also, consumers are experiencing changing lifestyles and are more aware of the latest in healthcare

research. A large majority (40%) of Americans reported that take-out foods are essential to their way of life and home meal replacements are increasing in popularity. So, dietetics professionals need to learn how to assist clients with healthy eating practices that clients can use amidst their demands of work, family, and community (Schiller, 2000).

Career Choices/Influential Factors

A study by Kobel (1997) showed results that discussed some of the decisions related to choosing a career in dietetics. One of the most influential factors affecting a student's decision to study dietetics was the relationship of nutrition to health. Also, 90% of students stated that helping others was very important to their career selection. Another interesting finding showed that women were more likely than men to choose part-time work opportunities as being important to their career decision. A possibility may be linked to the importance women place upon part-time work opportunities and their traditional child-rearing roles. The option of diverse work environments was also shown to be very important in career decisions. This may be related to the option of flexibility within their work environment (Kobel, 1997).

Additional findings from a study conducted by Brady et al. (2012) showed a variety of subthemes such as early interests and experiences, career aspirations, and social networks influenced their decision to enter the field of dietetics. The influence of mentors such as teachers, coaches, and family members during their lifetimes played an important role in why they chose to enter dietetics (Brady et al., 2012). Another emergent issue was that interest in a career within the science or healthcare field led the subjects to choose dietetics. Some of the female participations stated that they did not want to become nurses because it lacked

congruence with certain aspects of their identities such as an interest in cooking or sports (Brady et al., 2012).

Another interesting issue that Brady et al. (2012) discussed focused on the discovery of dietetics through a pivotal experience that caused a change in one's career choice selection. The determination of when this pivotal experience occurred varied between subjects, but a majority stated that while they were enrolled in other post-secondary programs they decided to switch to dietetics. Some of the subjects stated that they were initially unaware of dietetics as a career option, but after their pivotal experience they made a connection with the field and decided to pursue dietetics as their career option.

Career Advancement

Findings from an ADA Report (2002) show the various career advancement opportunities available for dietitians who have acquired new skills and knowledge within their profession (see Appendix E, Career Ladders for RDs in Hospital Settings). Based on the 2000 ADA Nutrition Trends Survey (ADA Report, 2002), Americans' primary sources for nutrition information are through television (48%), magazines (47%), Registered Dietitians and Nutritionists (90%), and doctors (92%). These findings show that a majority (90%) of Americans have heard of Registered Dietitians and the American Dietetic Association. The importance of maintaining competence as dietetics professional is needed, because the majority of dietitian respondents who completed the 2000 ADA Nutrition Trends Survey (ADA Report, 2002) understood that dietitians are required to meet certain academic requirements to obtain their credential. Thirty-two percent (32%) of respondents knew that a RD is certified or licensed and 77% stated that

they would consider messages on food packages that are sponsored by the ADA to be more credible than other sources of information. Therefore, maintaining competence as a dietetics professional is needed for our profession to remain at the forefront of the competitive market of healthcare and nutrition information (see Appendix E).

Mezirow's Transformational Learning Theory

The learning process and how one is able to categorize their experiences, beliefs, people, and events all involve certain frames of reference (Mezirow & Taylor, 2009). Frames of reference can include certain personality traits, genealogy, power allocation, worldviews, religious customs, psychological influencers, and learning styles and preferences. Therefore, learning can be understood as the process of using a prior interpretation to create a new or revised interpretation for the meaning of one's experience in order to guide future action (Mezirow & Taylor, 2009). Transformative learning can be defined as "learning that transforms problematic frames of reference to make them more inclusive, discriminating, reflective, open and emotionally able to change" (Mezirow & Taylor, 2009, p. 22).

Learning can be described in one of four ways: by elaborating existing meaning schemes, learning new meaning schemes, transforming meaning schemes, and transforming meaning perspectives. A transformative learning experience requires that the learner is capable of making an informed and reflective decision to act or not to act (Mezirow & Taylor, 2009). Certain influencers such as power, ideology, race, class, gender differences and other interests may exist, but transformative learning occurs when the adult learner is able to reason and assess the situation for themselves and make their own personal judgment (Mezirow & Taylor, 2009).

As discussed by Kroth and Boverie (2009), in transformational learning an individual's frame of reference – his or her paradigm – shifts. They have devised a Passion Transformation Model, which has an embedded discovering process, where individuals are able to find passionate work and passionate work environments. This concept of the discovery process focuses on unexpected transformational experiences (such as divorce, health problems, or job loss) that allow individuals to “discover” or rethink what one believes about their careers or even their lives (Mezirow, 2000).

Transformational Leadership

According to Burns (1978), “transformational leadership is a process where leaders and followers engage in a mutual process of raising one another to higher levels of morality and motivational goals.” Some scholars have argued that transformational leadership styles are encouraged for today's leaders given its emphasis on leadership focused on fostering change (Chin, 2014). Within the realm of transformational leadership there exists debate about whether the qualities identified within the leaders were possessed at birth or were gained through environmental exposure or specialized training and experiences (Atkinson & Pilgreen, 2011). Atkinson and Pilgreen stated that for a transformational leader to be successful, he or she must be able to shift perspectives and be able to incorporate the usage of mentoring to achieve transformations among their colleagues, while reducing less effective transactional leadership and hands-off leadership styles.

Bass (1998; Bass & Bass, 2008) explained how transformational leaders typically behave in ways to achieve superior results by using one or more of the four components of

transformational leadership: charismatic leadership, inspirational motivation, intellectual stimulation, and individualized consideration. Charismatic leadership (CL) can be displayed by leaders who are seen as role models to their followers. These leaders are admired, respected, trusted and exhibit high standards of ethical and moral conduct (Bass, 1998; Bass & Bass, 2008). A transformational leader who can motivate and inspire those around them to have enthusiasm and optimism has the component called inspirational motivation (IM). These leaders behave in ways that inspire those around them to have meaning and challenge associated with their followers' work (Bass, 1998; Bass & Bass, 2008).

Another component can be described as intellectual stimulation (IS), where transformational leaders stimulate their followers. They are able to reframe ideas through creative lenses by questioning beliefs, reframing problems and viewing old situations in new ways. In this method, new ideas and creative solutions are drawn from the followers, who are included in the process or problem solving (Bass, 1998; Bass & Bass, 2008). The fourth component can be described as individual consideration (IC), where the transformational leader pays attention to the follower's need for achievement and growth. The process of mentoring occurs within this component, because leaders are concerned with their followers' development and future (Bass, 1998; Bass & Bass, 2008). I felt it would be interesting to determine if any of these components identified among transformational leaders are present among dietetics leaders.

Prior to the 1980s, most experimental research was focused on solely on transactional leadership, but it was found that the "movers and shakers" of the world were transformational leaders (Bass, 1998). The transformational leader raises consciousness of issues through techniques or role-modeling and articulation (Bass, 2008). Avolio, Bass, and Dong (1999)

analyzed surveys that used the Multifactor Leadership Questionnaire and concluded that transformational leaders are found to be inspirational, intellectually stimulating, and considerate of others.

The concept of transformational leadership has been studied within the nursing literature, but very little research has been conducted within other allied health professions, specifically dietetics. According to Wylie and Gallagher (2007), the absence of healthcare professionals to encourage transformational leadership development skills can have far-reaching implications and cause deficiencies for development models needed for excellent service delivery, clinical practice and educational training, and mentoring within the healthcare profession. “As defined by the American Dietetic Association — leadership is the ability to inspire and guide others toward building and achieving a shared vision” (Gregoire & Arendt, 2004, p. 395).

Gregoire and Arendt (2004) recognized the importance of developing future dietetics leaders and stated it is important to not only have leaders reflect upon their own leadership styles but also to explore ways they can enhance their leadership abilities and encourage others within the profession to develop into future leaders. Given the limited research that exists related to leadership in dietetics, a definite need is evident for research focused on exploring the career development pathway of leaders within the field of dietetics.

Diversity and Leadership in a Changing World

Women and Ethnic Influences on Diversity Leadership

The current literature on leadership has rarely addressed issues of culture, gender, race, ethnicity, or sexual orientation (Eagly and Chin, 2010). In today’s society today, White men

still predominate as leaders, but there is an increase in the representation of women, racial and ethnic minorities who are leaders and becoming leaders. For example, among Chief Executives in the U.S. organizations public and private sectors combined, 23% are women, 4% are African American, 4% are Asian, and 5% are Hispanic (U.S. Bureau of Statistics, 2009). Even though all of these groups have remained underrepresented in leadership roles, one cannot overlook the growing diversity that is becoming evident among leaders. Eagly and Chin (2010) stated that an issue faced by underrepresented groups in leadership positions may be related to job discrimination. Even though discrimination against workers is unlawful (U.S. Equal Employment Opportunity Commission, 2007), discrimination continues to occur in covert, subtle and unintentional forms (Eagly & Chin, 2010). In addition, the underrepresentation of minorities and men within the field needs to be addressed. A 1984 report by the Study Commission on Dietetics stated that “While no effort has been made in the past to restrict other racial groups, or males, from the profession, little has been done to make the field more attractive to them or to recruit them” (Kobel, 1997, p. 254).

Social perceptions which may keep certain social groups from attaining leadership positions continue to exist in society today. Unspoken stereotypes associated with certain groups can impact their expectations to be successful (Eagly & Chin 2010). These unspoken stereotypes can impact members from underrepresented groups to “believe” that they have an inability to attain a leadership role. Eagly and Chin (2010) stated that women are still highly underrepresented in leadership roles in corporations, institutions of higher education, and the political sector. In addition, portrayals of how women leaders are expected to lead in comparison to their male counterparts continue to exist. Women leaders are often portrayed as

“soft and ineffective” whereas men are seen as “domineering and manipulative” (Eagly & Chin, 2010, p. 216; Whitmarsh et al., 2007).

As one can see, the diversity of ethnicity and gender are becoming more evident within the field of dietetics. Additional insights were gained through this study’s interviews with various subjects from different ethnic backgrounds and gender groups.

Leadership in Healthcare

Neubert and Palmer (2004) discussed how within the field of healthcare it has been noted that men and women tend to think differently about their work environment. Men tend to think compartmentally whereas women are more holistic and integrative in their thinking (Neubert & Palmer, 2004). However, healthcare organizations are starting to recognize the importance of understanding their customers and directing analysis, planning and communications towards the patient rather than focusing solely on the physician-prescriber. The previous trend within healthcare followed the traditional viewpoints of men, who were within positions of power, and was very compartmentalized in nature (Neubert & Palmer, 2004).

The need for a more holistic and integrative approach exists and women need to take advantage of the opportunity that exists and the changing landscape of the healthcare practice model (Neubert & Palmer, 2004). The obstacles related to family and marriage responsibilities for women, in addition to differences among race and ethnicity, contribute to the challenges faced by underrepresented groups who are trying to emerge as leaders within their professions (Chin, 2014; Whitmarsh et al., 2007).

As discussed by Chin (2014), leaders have certain qualities which inspire other individuals to follow them, such as: (1) being a role model, (2) having a talent in a specific skill needed by the group, (3) having initiative and capitalistic drive, (4) having charisma, (5) being inspirational, and (6) having a solid commitment or vision for the future of the group. However, despite these qualities evident among leaders, women and other racial or ethnic leaders must overcome prejudice associated with sexism, racism, credibility validation, and fair performance appraisals (Chin 2013).

When factoring in diversity, Chin (2014) recognized that leaders from diverse background exhibit leadership styles which may align with their backgrounds. For example, Asian leaders tend to balance the yin and yang and have open dialogue with their followers (Chin, 2014). Also, Asian American women often use indirect communication in their leadership styles and they encourage kinship and bonding among one another. Another example focused on Black feminist leaders and how throughout history they have been able to be effective leaders despite living in oppressive environments. Therefore, Chin (2014) stated that African American women leaders might tend to use more direct communication styles, speak the truth, and strive to maintain trust, fairness, and a sense of social justice.

Due to the growing diversity of our global society, a need exists for additional leadership studies to take into account the definite differences between women's leadership styles and behaviors the models of leadership that emerge within the literature. The pathway to leadership for women and ethnic minorities should no longer be viewed as a glass ceiling (Eagley, 2007). Rather, it should be seen as a labyrinth through which multiple models of leadership can be navigated.

Leadership in Nursing

The dietetics profession can draw examples from the nursing literature (Bondas, 2006), where leadership has been identified as occurring within an environment that has become more technologically advanced and the need for advanced levels of knowledge are necessary for nurses to remain competitive and current with the ongoing changes that exist with various healthcare treatment strategies for varying disease states.

In a study conducted by Bondas (2006), 68 Finnish nurse leaders were selected to respond to a questionnaire at the beginning of a leadership course held at four universities and one hospital. The nurse leaders chose to participate in this course without financial support from the organization of which they were employed. These subjects felt that they had more to contribute to the profession than staff nursing. By being a leader, these individuals felt that they could influence future benefits, such as higher wages and visibility within their organization (Bondas, 2006). An interesting finding showed variations for why these nursing leaders had entered positions of leadership. The study introduced the ideal of Paths to Nursing Leadership.

These pathways were identified as metaphors for the career pathways of nursing leaders. The pathways were: (1) Path of Ideals, (2) Path of Chance, (3) The Career Path, and (4) the Temporary Path. The Path of Ideals can be characterized as a personal drive or conscious choice to become a nursing leader (Bondas, 2006). It may be influenced by the need to seek new knowledge and education. The Path of Chance focused on leaders who were mentored or guided through other persons or circumstances on their pathway to leadership. These individuals were often “encouraged” or “forced” to become leaders within their profession. When deciding to

become leaders, individuals who followed the Career Path were more concerned with interests and ambitions. This pathway was more focused on gaining power in decision making and working more self-determined hours (Bondas, 2006). The Temporary Path can be described as a pathway taken as a trial for a leadership position. This pathway allows nurses who have the courage to apply for leadership positions, but return to their previous role as a staff nurse if the leadership role turned out to be a poor fit for their career pathway. This is the only pathway where the nurses were provided with the opportunity to step back from a position of leadership once it was established (Bondas, 2006).

There is growing agreement that a need exists for better leadership in healthcare, and a large majority of research studies has focused on specific management skills and performance. However, research on transformational leadership within the nursing field has shown that three domains related to transformation must exist to be effective: (1) transformation competences: achievement orientation, analytical thinking, community orientation, information seeking, and strategic orientation; (2) execution competencies: accountability, collaboration, communication skills, information technology management, and organizational awareness; (3) people competencies: human resource management, interpersonal understanding, professionalism, self-development, and team leadership (Marshall, 2011).

Previous competency models that were used for nursing leadership were developed from private- and public-sector business models. However, nursing leadership broadened the focus to include competencies that were not focused solely on skills, but rather the whole discipline of nursing where ongoing reflective processes and humility occur to promote the lifelong development of skills, empathic nursing clinicians, and leaders (Marshall, 2011).

Within nursing administration at magnet hospitals, leadership qualities have been found as key to their cultures of excellence. Through these innovative leadership practices among nursing service, multidimensional leadership models have been found as successful. Within the nursing field, transformational leaders create a culture where there is lower turnover of staff and high morale, and satisfied staff, patients, and leaders together communicate the values and end goals of the organization. Ultimately, the transformational nursing leader “brings out the best in their followers” (Barker, 1992; McDaniel & Wolf, 1992).

According to McDaniel and Wolf (1992), three factors are present in effective nursing transformational leaders: individual consideration, charisma, and intellectual stimulation. Individual consideration can be shown by the leaders’ ability to pay attention to their employees and also to demonstrate an understanding for their employees’ situation within the workplace. Followers of transformational leaders often exhibit a desire to imitate the charismatic qualities of their leader such as inspiration of others, trust, and confidence. Lastly, intellectual stimulation occurs by transformational leaders encouraging followers to try out new behaviors, find new solutions to old problems, and have a sense of curiosity (McDaniel & Wolf, 1992).

Transformational leadership, as it applies to nursing, does not need to differentiate completely between management and leadership. The nurse leader-managers should blend components of both managerial and transformational leadership into their roles. Within the nursing organization, the nurse leader-manager often holds a formal line of authority, but can also appeal to his or her followers by appealing to followers’ motives, values, and aspirations in order to achieve the goals of their organization and the nursing profession (Barker, 1992). Other allied health professions such as dietetics should evaluate transformational leadership practices

as they exist within nursing. Transformational leadership behaviors have been extensively studied within the nursing literature, but little has been done for other allied health professions (Barker, 1992; Marshall, 2011; Wylie & Gallagher, 2007). Therefore, the findings from this research, which is focused specifically on the career pathways of dietetics leaders, will contribute and share some additional information that contribute promotes the success of healthcare professionals within today's ever-changing society.

Leadership within the Dietetics Profession

Leadership is about influencing others and assisting others with choosing appropriate career pathways that fit one's interests (Barth, 2001). Barth (2001) defines leadership as "making happen what you believe in" (p. 85). This definition is appropriate for this study, because it refers to the importance of an individual making one's vision a reality. Escott-Stump (2014) discussed how leadership capabilities can be closely associated with aspects of emotional intelligence, self-awareness, self-confidence, optimism, and adaptability. These aspects related to personal and career development can shape interactions with one another and affect one's leadership abilities and career success. Certain leadership traits Escott-Stump (2014, p. S6) identified include: "being committed to being the best; encouraging input from others; being open-minded; not micromanaging others; being a 'calculated risk' taker; having futuristic thinking; and keeping the whole picture in mind, not just your own sphere of influence."

Dietetics leaders are no longer being defined by their ability to perform management related to supervisory skills within the workplace. They are being looked to by the profession to communicate a vision to their team and to inspire other individual members to take responsibility

for the group's actions and decisions (Gregoire & Arendt, 2004). According to the American Dietetic Association (2002), leadership can be defined as "the ability to inspire and guide others towards building and achieving a shared vision." As discussed by McCollum (2014), 2013-2014 past president of the Academy of Nutrition and Dietetics, additional research is needed to explore different leadership theories and philosophies. The Academy of Nutrition and Dietetics (formerly known as the American Dietetic Association) is a member-led organization in which collaborative leadership is necessary for the future success of our Academy and our profession. Given the recent name change and the new optional credential of the registered dietitian nutritionist (RDN), changes are occurring that are helping to position our profession at the top of the list where our nation looks to seek leaders for improvements necessary for our nation's health (McCollum, 2014). As a 2011 CNN Money article indicated, "dietetics ranks third among professions most likely to change the world for the better." Therefore, we need to embrace the positive opportunities that dietitians are now being faced with in the competitive marketplace and gain a better understanding for the career pathway development of women who have succeeded as leaders within the field of dietetics, so we can continue to shape and develop future leaders of our profession.

Additional insights may be gained through the personal career pathway experiences that this study's subjects shared. These subjects related personal stories about how they were able to navigate their own career pathways and emerge as leaders. This information will be useful for other dietetics professionals who are interested in assuming leadership roles within their personal and professional dietetics careers.

Leadership Style

Prior to World War II, leadership theories emphasized top-down, command and controlled models of leadership and followed the management style of business (Chin, 2014; Gregoire & Arendt, 2004). During the later 1950s, psychology researchers started to conduct studies focused on the concept that effective leaders performed certain identifiable behaviors. Two of the most well known studies were conducted at the University of Michigan and Ohio State University. Results from both of these studies suggested that leadership behavior could be categorized into two dimensions: (1) focused on human interactions, and (2) the job itself (Gregoire & Arendt, 2004). Blake and McCauley (1991) developed the Leadership Grid, which was based on the concept of leadership as two dimensions. These behavioral approaches suggest that an ideal leader is someone who has high concern for others and the work that needs to be completed.

As a result of the changing global society and rapid social and technological changes, the models have shifted towards more collaborative and transformational leadership models (Chin, 2014). The trend has changed from autocratic to democratic leadership and from transactional to transformational styles of leadership. Models of leadership are now more values driven, ethics focused, and socially oriented (Chin, 2014).

The variety of leadership theories include: conceptual, strategic, visible, invisible, benevolent, collaborative or shared leadership. Conceptual leadership is focused on the ability to frame issues and use compelling narratives and personal integrity to promote a sense of common purpose and integrity (Morrill, 2010). Strategic leadership utilizes management, financial planning, and budgets as tools for effective leadership. The concept of visible leadership may be seen in the charisma of a leader; other effective methods are the use of silence or working behind the scenes in Native American and Asian communities (Boyd, 2010 & Yabusaki, 2007). Another method known as

benevolent leadership derives from Confucianism within Asian cultures and reflects a patriarchal model of governing social order and leadership by stressing virtuous living and allowing a leader's followers to emerge themselves (Ayman & Chemers, 1983, p. 340).

Collaborative leadership is focused on collaborative input from committee groups, not specific leaders in order to move forwards towards transformational change (Chin, 2014).

Based on a review of the literature, it does appear that leadership is difficult to define and may continue to change based on the situations and individuals that are involved. Leaders do not need to be situated solely in positions of power within organizations; they can be evident in a variety of contexts as appropriate for leadership to exist within. As stated by Gregoire and Arendt (2004), the dietetics profession needs leaders, and this prompted the ADA to initiate a Leadership Institute to help develop the leadership potential of members. It is important for dietitians to reflect on their own leadership styles and explore different ways to enhance their leadership skills. Additional research specifically related to dietetics is needed to help determine strategies required for dietitians' training so they can become effective leaders and attain leadership positions among their counterparts in the allied health professions and business environments.

Personality Style Inventories

The reason for discussing examples of personality style inventory tests within this section is to illustrate the researcher's process in developing the interview guide questions that were used in this study. In this research study I used a qualitative research design, but these personality style inventories are quantitative in nature. Therefore, these personality style inventory tests were not used as scales or measurements that were administered to the subjects during this study.

However, the research committee determined that we do not want to overlook the potential for certain types of personality styles or characteristics that might emerge as key themes when interpreting the data. Therefore, an understanding for different types of personality styles that can exist was useful when analyzing the data and determining why these subjects may have chosen certain career pathways that led them to become leaders within the profession of dietetics.

Myers-Briggs Type Indicator (Extravert vs. Introvert)

The MBTI (Myers-Briggs Type Indicator) is based upon Jung's theory of the preferred ways in which people perceive and process information and make decisions. The scores are derived on four bipolar dimensions that are then combined to produce one of 16 possible types. The four dimensions are introversion (I) versus extroversion (E), sensing (S) versus intuition (N), thinking (T) versus feeling (F), and judging (J) versus perceiving (P). The interpretation of the MBTI provides information about two general issues relevant to career, such as type of work style that is preferred, and the manner in which an individual is able to make decisions (Myers & McCaulley, 1985).

Two of the main Myers-Briggs type indicators (extravert and introvert) are related to "life attitudes" which may be related to one's career pathway and leadership involvement. Extroversion is a process that focuses primarily on the external world of people and activities, whereas introversion is more inwardly focused on concepts and ideas. (Barr and Barr, 1989). In regards to the work environment, extraverts tend to move around the organization more and enjoy casual conversations. They are talkative, outgoing, sociable, and prefer interactions with

others. Extraverts are often able to make decisions quickly, are able to switch gears quickly and do not mind interruptions (Barr and Barr, 1989; Mariner-Tomey, 1993), whereas introverts tend to concentrate more on the work at hand. They prefer to probe deeply into issues, interact selectively, and are reflective, calm, and quiet. An introvert discriminates clearly between acquaintances and friends, and is territorial. An introvert can be described as someone who prefers to gather information thoroughly, develops ideas well, and makes well-formulated decisions that are based upon sound logic (Barr and Barr, 1989; Mariner-Tomey, 1993).

Holland's Career Theory of Person-Environment Interactions

Holland's theory is focused on an evaluation of individuals, their environments, and the interactions that may occur between individuals and their environment. One of the main principles related to Holland's theory is that the selection of a vocation or academic major is an expression of one's personality (Holland, 1973, 1997). Individuals' career choices can be identified as being a way of life for persons, an environment rather than just an isolated set of work functions or skills (Holland, 1973, 1997; Smart, Feldman, & Ethington, 2000).

As a result, Holland (1973, 1997) created a personality inventory, called the Vocational Preference Inventory (VPI), which was composed entirely of occupational titles based upon the belief that one's preferences for occupations is a reflection of an individual's personality. As discussed by Holland (1966) and Smart et al., (2000) the choice of one's occupation can be seen as an expressive act, related to one's level of motivation, knowledge, personality and ability. Career choices and occupations can be seen as a way of life for persons, an environment rather than just an isolated set of work functions or skills.

Holland's theory (1973) classified people based on their resemblance to one or more of six theoretical or ideal personality types: Realistic, Investigative, Artistic, Social, Enterprising, and Conventional. Each of these types can be useful as a model to try and identify the "real person" among the interactions that may occur related to culture, peer influences, biological heredity, parents, social status, and physical environment (Smart, et al., 2000).

Holland and Gottfredson (1976) described how this theory can be useful for providing explanations and further exploration of the following four vocational career questions:

(1) What personal and environmental characteristics lead to vocational choices, involvement, satisfaction and career achievement? (2) What personal and environmental characteristics lead to stability of the kind and level of work a person performs? (3) What personal and environmental characteristics lead to change or instability of the kind or level of work a person performs? and (4) Why do some people make choices that are congruent with their vocational assessments, other do not, and still others are undecided? (Holland, 1976, p. 20)

Holland (1997) is well known for the position that interests are an expression of one's own personality. Holland's hexagon personality model can serve as a useful tool in describing how influential factors such as persons, and their interactions can be interrelated. My study's findings may relate to Holland's career theory of person and environment interactions for the subjects being studied.

Holland's hexagon personality model (1973) classified people based on their resemblance to one or more of six theoretical or ideal personality types (Realistic, Investigative, Artistic, Social, Enterprising, and Conventional). This model is based upon the belief that different people's personalities may find different environment/vocational career choices more to their

liking. Following is a brief description for each of the six personality types as defined by

Holland (1973, 1997):

(1) Realistic/Doers – people who have athletic ability, prefer to work with objects, machines, tools, plants or animals or to be outdoors; (2) Investigative/Thinkers – people who like to observe, learn, investigate, analyze, evaluate, or solve problems; (3) Artistic/Creators – people who have artistic, innovating, or intuitional abilities and like to work in unstructured situations using their imagination and creativity; (4) Social/Helpers – people who like to work with people to enlighten, inform, help, train, or cure them, or are skilled with words; (5) Enterprising/Persuaders – people who like to work with people, influencing, persuading, leading or managing for organizational goals or economic gain; and (6) Conventional/Organizers – people who like to work with data, have clerical or numerical ability, carry out tasks in detail, or follow through on others' instructions.

Big-Five Factor Model of Personality/Revised NEO Personality Inventory

The Big-Five Factor Model of Personality is based upon a hierarchical model of personality traits. As described by Costa and McCrae (1992), personality traits are enduring dimensions of individual differences that have been shown as being consistent patterns of thoughts, feelings and actions. The Big-Five Factor Model is comprised of relevant personality traits that are most often measured by using the Revised NEO Personality Inventory devised by Costa and McCrae (1992). The most commonly measured personality traits measured include: Neuroticism, Extraversion, Openness to Experience, Agreeableness, and Conscientiousness.

As described by Costa and McCrae (1992) and Costa and Widiger (1994), Neuroticism (N) can be categorized as a chronic level of emotional adjustment and instability. Having a high N level can be associated with individuals who are more prone to psychological stress. The N measurement is also useful for identifying personality traits associated with unrealistic ideas, excessive cravings, and maladaptive coping responses. As described by Costa and colleagues

(Costa & McCrae, 1992; Costa & Widiger, 1994) Extraversion (E) can be used to refer to the quantity and intensity of interpersonal interactions, activity levels, and the need for stimulation and joy. Individuals who have high E levels tend to be very sociable, active, talkative, and people-oriented persons, whereas those with low E levels tend to be more reserved, independent, and quiet and can be categorized as being introverts. Another personality trait is Openness to Experience; the (O) trait can be used to identify the active seeking and appreciation of experiences by individuals for their own sake. Having a high O level can indicate curiosity, imagination, and the willingness to entertain unconventional values, whereas a low O level is associated with someone having more conventional beliefs and attitudes as well as more conservative tastes (Costa & McCrae, 1992; Costa & Widiger, 1994).

The last two measures of personality traits are Agreeableness (A) and Conscientiousness (C). As described by Costa and colleagues (Costa & McCrae, 1992; Costa & Widiger, 1994) Agreeableness (A) is an interpersonal dimension and is used to describe the kinds of interactions a person prefers. People who have a high A tend to be softhearted, good natured, trusting, eager to help others and are often classified as being compassionate. Those with a low A are often called antagonistic, and tend to be cynical, rude, uncooperative, manipulative, and ruthless. The last personality trait is Conscientiousness (C), used to assess level of organization, persistence, and motivation in goal-directed behaviors. Persons with a high C level tend to be organized, hard-working, self-directed, and punctual. In comparison, those with a low C level tend to be unreliable, lazy, negligent, and lax (Costa et al., 1992; 1994).

As one can see, the Big-Five Model of Personality represents a broad structure of personality traits. By gaining an understanding of the various personality traits that exist, I may

be able to correlate why certain decision making or career pathway choices were made by the subjects that led them to become leaders within their profession of dietetics. Later in this dissertation, I will discuss whether a potential exists for applications to some of the personality traits identified by this personality inventory tool.

Chapter Summary

Chapter 2 provided a discussion on the history of the dietetics profession and the specific curriculum and accreditation standards that exist in order to be recognized as a Registered Dietitian by the Academy of Nutrition and Dietetics. A variety of options is available for dietitians related to career pathways and advancement options. These were highlighted and discussed within Chapter 2. In addition, the topic of leadership was explored in relationship to healthcare, nursing, and dietetics and the various types of leadership styles that can exist. Also, personality style inventories such as the Myers-Briggs Type Indicator, Holland's Career Theory on person-environment interactions and the Big-Five Factor Model of Personality were described. Chapter 3 will present the methodology that will be used for this study in more detail.

CHAPTER 3

METHODOLOGY

Introduction

This section begins by describing the key research questions being investigated through this research study. An overview is provided to discuss qualitative research design and why narrative analysis was chosen as the approach used for this study. Afterwards, I will discuss the interview process, the study participants, sampling approach, and the Institutional Review Board (IRB) process. Data collection follows, including the procedures used to collect the data. Next, I will discuss data analysis procedures. Lastly, I will describe the credibility of the data and trustworthiness.

The key research questions that were addressed in this study are:

1. What are the career pathways of leaders in the field of dietetics?
2. What transformations did these leaders experience?
3. How did they emerge into leaders?
4. What are the personal attributes of a leader?

Rationale for Research Design and Methodology

Research Design

The general research design of this study is qualitative. When conducting qualitative research, the research questions being investigated are not designed based on specific variables;

instead, they are formulated to investigate topics in their total complexity (Bogdan & Biklen, 2007). Researchers in qualitative research are not concerned with creating specific questions to answer or test a hypothesis. Rather, they are more focused on understanding behavior from the subject's own frame of reference. Qualitative research is concerned with all the complexities related to the topics being investigated and understanding the phenomena and situations as a whole (Bogdan & Biklen, 2007; Patton, 1980). Patton (1980) reviewed how qualitative researchers are concerned with the description and understanding of a situation's context; it is considered insufficient to gather data about isolated variables, scales, or dimensions.

As Patton (1980) mentions, a holistic approach gathers data on any number of aspects of the setting being investigated in order to put together a complete picture of a particular situation. This qualitative method differs from an experimental quantitative design where manipulation and measurement are often carried out to determine relationships among a narrowly defined set of variables (Patton, 1980). Qualitative measurements can be described as consisting of detailed descriptions of situations, direct quotations from people about their personal experiences, and can be collected as open-ended narratives without attempting to try and have them fit into standardized questionnaires or tests that are commonly associated with quantitative measurements (Patton, 1980).

As discussed by Patton (1980), Maxwell (2013), and Lichtman (2013), qualitative researchers are often concerned with understanding the particular contexts within which the participants act and how this may influence their actions. Qualitative researchers are typically more concerned with making sure that they are accurately capturing their subjects' perspective. Qualitative data provides depth and detail that cannot be obtained from quantitative data, such as

open-ended responses versus standardized questionnaire items. The concept of “meaning” is essential for the qualitative approach, because the researcher is interested in providing an in-depth description and understanding of the human experience (Bogdan & Biklen, 2007; Lichtman, 2013). For this research study, I strive to uncover the meaning behind the lived experiences and personal career pathways that these leaders have encountered within the field of dietetics.

Narrative

For the purpose of this study, I chose to use narrative as a method. Through narrative research, one is able to gain access to feelings, thoughts, and experiences shared by the subjects. Narrative as a method allows the personal experiences shared by individuals to be expressed through stories (Holloway & Wheeler, 2010). As defined by Creswell (2007, p. 54) “the procedures for implementing this research consist of studying one or two individuals, gathering data through the collection of their stories, reporting individual experiences and chronologically ordering (or using life course stages) the meaning of those stages.” In this study I focused on the dietitians’ personal experiences and stories related to their career pathways and leadership roles.

The collection of narratives or stories can be acquired naturally through participant observation in a controlled research setting. Or, they can be solicited through research interviews. For this study, narratives or stories were collected through an interview process. Narrative interviewing is based upon a main area of interest to the participant and researcher. Through the usage of stimulus or reminder interview questions, a trigger is set to elicit a participant’s story. Narrative interviews often focus on life histories or stories, as they show the

progression of experiences and perspectives over time. Narrative interviewing was appropriate for this study because I was interested in learning about the leadership and career pathways shared by these participants (dietitians) throughout their lives (Holloway & Wheeler, 2010).

In narrative interviews, individuals remember an experience and tell the story as they perceived it happening to them. This approach allows the individuals to make sense out of their lived experiences, and provides insight into the intentions and motives of human beings to the researcher. However, the role of narrator can be influenced by how they prioritize events and experiences. They might emphasize different aspects of their story, neglect or fail to mention certain issues or events, or tend to exaggerate depending on their perspectives and the audience to whom they are speaking (Creswell & Atkinson, 1996; Holloway & Wheeler, 2010).

As a researcher it is important to have a solid sense of the broad parameters of the story that the narrators have to tell, so he or she can develop broad questions that will invite the narrator to tell his or her story. Chase (2005) describes this delicate balance of narrative interviewing as a paradox: the researcher needs to be well prepared so he or she can ask questions that will invite the participant's story. On the other hand, the narrators' story cannot be known, predicted, or prepared for in advance, because each participant may have different personal experiences based upon his or her own social context.

Narrative research allowed these participants to share their key experiences. A story can serve a variety of functions, where an individual will often remember and order their career and memories as a series of narrative key occurrences. These remembered events or narratives are based on the key experiences that people choose to share from their wide store of memory, so they often focus solely on significant events (Coffey & Atkinson, 1996). For this study, a

qualitative research design using narrative research was chosen in order to allow the researcher an opportunity to learn about the personal and complex lived experiences of these subjects as they have navigated their own career pathways and become identified as being leaders within the field of dietetics.

Narrative Inquiry Analysis

Through the process of narrative analysis, the researcher is faced with analyzing the participants' stories and then being able to "restory" them into a framework that makes sense. Creswell (2007, 2013) stated how restorying is the method of reorganizing the stories obtained into some general type of framework. This framework may consist of a variety of approaches such as gathering stories, analyzing them for key elements of the story, and assembling them into some type of framework or sequence of events.

Narrative analysis can be identified as a type of analysis procedure in which the researcher is focused on interpreting the stories and organizing the data elements into some type of coherent and developmental account. For the purposes of this research study, I used a combination of restorying and thematic analysis. Through the process of thematic analysis, the researcher is analyzing the narrative as a whole and identifying the main key statements. It does not matter if the stories are provided in a sequential or ordered way. Instead, analysis is centered on the contents of the participants' stories that are being shared and the meanings that are inherent within them (Esin, Fathi, & Squire, 2013; Holloway & Wheeler, 2010).

Interviews

According to Patton (1980), the purpose of interviewing is to try and find out what is happening within someone else's mind. One of the best known methods to acquire qualitative research is through the use of in-depth interviewing. This method is often termed "unstructured" or "open-ended" because it allows the subjects to answer from their own frame of reference. This technique does not use questionnaires, but an interview guide can be used to encourage the subjects to freely express their thoughts about certain topics being investigated. By using open-ended interviewing, the researcher is not trying to put things into someone else's mind, but rather is trying to access the personal perspectives of the person being interviewed (Bogdan & Biklen, 2007; Lichtman, 2013; Patton, 1980). For this study, I conducted qualitative interviewing and used an interview guide (see Appendix F) to encourage subjects to share their viewpoints on certain topics in relation to their own career pathways to becoming leaders within the field of dietetics.

Through the usage of an interview guide, I was better able to remain focused on asking questions related to specific topics of interest to my study (Weiss, 1994). A general interview-guide approach, such as the one used within this study, involves outlining a certain set of key issues that the researcher plans to explore with the respondent before the interview begins (Patton, 1980). The type of qualitative interview can have a variety of emphases. Even though the style of the qualitative interview may appear conversational, it is very different from what occurs in an ordinary conversation. For example, during a normal conversation each person may voice their observations, thoughts and feelings. Either person may decide to set a new topic or ask questions. However, in a qualitative interview, the respondent provides information while

the interviewer is guiding the flow of the conversation through topics related to the investigation (Patton, 1980; Weiss, 1994).

The interview guide was used as a tool during this research study, to aid as a checklist and ensure that all relevant topics were covered. As Patton (1980) notes, an interview guide ensures that common information is obtained from each subject being interviewed, but there is no set or standardized questions being asked. By using the interview guide format the researcher has already determined how best to use the limited time often available in an interview situation. Also, the researcher will need to adapt and sequence the questions based upon the context of the actual interview when it is conducted.

Through these interview methods, researchers may gain valuable insight into their subjects' perspectives related to certain (events, situations, experiences or actions) that occurred. Another benefit of using the interview guide methods is that it allows the researcher to describe processes related to an outcome of interest and integrate multiple perspectives from the different subjects who are being interviewed (Patton, 1980; Weiss, 1994).

Participants

In order to be considered as a potential subject for this study, I identified certain selection criteria. Each subject had to be a Registered Dietitian who had been credentialed by the Academy of Nutrition and Dietetics for at least the last 5 consecutive years, and also had to meet at least one of the three following criteria in order to be identified as being a leader within the dietetics profession: (1) held an elected position at the district, state, or national association for the Academy of Nutrition and Dietetics; (2) held a position as a department chair or professor of a credentialed program in dietetics; or (3) received a recognition award within the healthcare or

business field as being an exemplary leader in the profession of dietetics. For the purposes of this study, I focused my attention on Registered Dietitians as the target subject population group. Some of the subjects may have held advanced board certified specialty certifications, but that was not designated as an inclusion criterion needed for participation in this study.

Sampling Methods

The sample selection was purposeful in order to gain perspectives from dietitians who had been identified as being leaders within the profession and credentialed for at least five years. As Maxwell (2013) states, purposeful sampling is a strategy where certain settings, persons or activities are intentionally selected in order to acquire information that is considered relevant to the researcher's questions and goals for the study. Through the usage of purposeful selection of subjects, the individuals or cases chosen are critical for testing the theories that the researcher sets out to explore or further develop based on the study's findings (Lichtman, 2013; Maxwell, 2013). Additionally, purposeful sampling allows the researchers to select certain groups or participants with whom they can establish the most productive relationships and thereby enable the research questions to be answered (Lichtman, 2013; Maxwell, 2013; Patton, 1980). In order to include maximal variation sampling for the subjects being studied, I attempted to include subjects from a wide variety of dietetics practice backgrounds, ethnic heritages, and a geographical distribution. Even though the primary focus of this study was women leaders within the field of dietetics, I included at least one male subject in order not to overlook the issue of gender as a diversity issue within this female-dominated profession (Patton, 1980).

The initial selection of potential subjects was identified through the researcher's professional contacts as a dietitian involved with the Illinois district and state association Academy of Nutrition and Dietetics. Also, some of the subjects were selected through the researcher's contacts as a dietitian practicing in clinical and educational settings.

Another method called snowball sampling was used to gain access to other participants informants through the exchange of contact information from previous informants (Lichtman, 2013). For this study the method of snowball recruitment occurred through initial participants who recommended other dietitian leaders who might be interested in participating. As a means of recruiting subjects to participate in this study, I attempted to contact potential subjects at professional conferences/meetings and meet with them face-to-face prior to the initiation of my study. Through these ongoing face-to-face recruitment conversations, snowball recruitment methods were useful in the gaining of additional referrals from dietitian leaders for other potential subjects to be approached about participating in this study.

When discussing the nature of this study with potential subjects and asking if they were interested in being considered for inclusion within this study, I asked for curriculum vitae in order to verify accuracy of credentials, years of practice, educational background, and volunteer/work experiences. This information was used to provide background and demographic information for each of the subjects.

When determining the sample size to be chosen for this research study, I needed to consider the trade-off between breadth and depth. As Patton (1980) points out, when conducting qualitative research one needs to determine how much time and effort one is willing to invest in trying to increase awareness of someone else's personal lived experiences. Given the nature of

limited resources, one can look at a narrow range of experiences for a larger group of people, or investigate a broader range of experiences for a smaller number of people. Patton (1980) added that there is no one specific right or wrong answer about sample size selection for a qualitative study; it all depends upon the resources available, time available, and the researcher's needs. For the purposes of this study, I chose a sample size of twenty participants. This number allowed a good balance of depth and breadth of personal experiences related to the career pathway decisions that have led them to becoming leaders within the dietetics profession.

Institutional Review Board

The Institutional Review Board (IRB) approved my field procedures in order to assure the protection of the participants, who are human subjects. I also passed the requirement of the Collaborative Institutional Training Initiative training.

Data Collection

For this research study, the data collection method consisted of face-to-face and phone interviews. The data collection started in March 2015 and ended in July 2015. I completed 20 in-depth interviews that lasted approximately 90 minutes each and included note-taking and a tape-recording. All of these interviews were audio-recorded, and I listened to the tape/recording multiple times and transcribed the interviews to the best of my abilities.

As Patton (1980) observes the purpose of qualitative research is to understand the perspective and the experience of the subject being interviewed. Regardless of the type of interviewing technique used, the raw data of interviews are the actual quotations spoken by the interviewees, and there is no substitute for this data.

A tape recorder can be defined as an indispensable piece of equipment commonly used by qualitative researchers (Patton, 1980). The tape recorder will not “tune out” conversations, change what has been said because of interpretation, or record words more slowly than they are spoken. Patton (1980) explains that a tape recorder does not eliminate the need for note-taking during the interview, but it allows the researcher to be more attentive to the interviewee’s needs and cues. Note-taking can serve as a nonverbal method of feedback, while also helping to pace the interview (Patton, 1980). However, the possibility of a malfunction error can occur with using a tape-recorder, so in order to avoid this potential problem, a back-up tape-recorder was available to make sure that this potential problem would not cause any loss of data during the interview sessions.

When choosing the setting for the interview, it is important that the researcher choose a place that is a mutually agreed-upon location. The chosen setting should be quiet, private, and cleared of all potential disturbances that could detract the interviewer from paying attention to the participants’ responses to the interview questions (Lichtman, 2013). For this research study, the interviews locations were chosen based on the subjects’ convenience. However, I checked to ensure that the locations participants selected were conducive to conducting an interview and were as free of as many potential distractions as possible.

Data Analysis

Upon completion of data collection through interviews with the subjects, a large quantity of interview notes, tape-recordings, jottings, and other records that are collected will need to be analyzed. It is important that the researcher transcribes the recordings verbatim. Through the

process of analysis, it is important to read through all of the information to gain a feeling for what is being said, so the researcher can start to identify key themes and issues that are emerging (Lester, 1999; Lichtman, 2013). As noted above, for this study, the raw data that was analyzed was the participants' responses to the interview questions. These questions were primarily unstructured and open-ended to elicit the perspectives of dietitians related to issues of leadership and career pathway development. Following each interview, I reviewed my notes and the transcribed tape recordings to identify any key themes or issues that emerged while considering the subjects' personal perspectives.

Lichtman (2013) described a method of moving raw data to meaningful concepts or themes called the three C's of analysis: from *coding* to *categorizing* to *concepts*. The process of coding interview data, observational notes, and text into meaningful chunks is a tedious task. Some researchers choose to work with a word processing program or software to help organize the data; however, it is still the researcher's responsibility to generate the codes. An initial code can be a word, phrase, or the interviewee's own words. Upon completion of an initial coding of a few initial transcripts, the researcher may choose to modify the codes based on an examination of what has already been collected. This process of renaming, collapsing, and clarifying the codes is an ongoing process that occurs during the initial stages of data analysis until all transcripts have been reviewed (Lichtman, 2013; Patton, 1980).

Bogdan and Biklen (2007) explained how the development of a coding system is extremely important for a researcher to develop when conducting qualitative research. One of the initial steps in qualitative data analysis is reading the interview transcripts, observational notes, or documents that are available to be analyzed. Also, the ability to listen to the tape-

recordings of the interviews prior to transcription can assist with the identification of categories or relationships that can be used for the coding system (Maxwell, 2013). The process of developing a coding system consists of identifying regularities and patterns along with topics that the data may uncover. Specific to this study, I tape-recorded and transcribed all interviews. I coded the transcribed interviews and organized these codes into emergent themes. I then grouped the codes according to the research questions and their potential to provide themes for me to evaluate.

The second step in the data analysis process described by Lichtman (2013) consists of developing an initial list of categories. After developing a coding system, the researcher will determine coding categories that can be used to separate the descriptive data that was collected, such as certain phrases or words that occur throughout the interviews (Bogdan & Biklen, 2007; Lichtman, 2013). The issue of convergence is faced by many researchers when trying to determine categories for the already coded data. The researcher is tasked with determining what items fit together and creating a classification system for the data. Patton (1980) provided two criteria to assist researchers in judging the categorization of the data: internal homogeneity and external heterogeneity. The first criterion, internal homogeneity, is concerned with how the data that belong in a certain category hold the information together in a meaningful way. The second criterion, external heterogeneity, is concerned with how the differences between categories are bold and clear (Patton, 1980).

The final step of the data analysis process is to attempt to identify key concepts that are reflective of the meaning that one is trying to attach to the collected data (Lichtman, 2013). It has been discussed how fewer well-developed and supported concepts often allow for a more

thorough analysis than one that is comprised of several loosely framed ideas. Lichtman (2013) recommended having a maximum of five to seven concepts, taking into consideration the size of the data and the range of the interview. For the purposes of this study, when determining the concepts, I had to determine the most informative and logical manner for sorting the data I obtained. Through the process of reorganizing, rethinking, and reworking the collected data into codes, then categories allowed me to identify key concepts that emerged relating to the career pathways and how my subjects became leaders within the dietetics profession. Throughout the coding process I also looked at how the subjects' responses fit into areas related to career pathway influencers, career transformations, pathways to leadership roles, and personal attributes of a leader, and created categories that emerged from the data.

Credibility of the Data and Trustworthiness

As a doctoral graduate researcher at Northern Illinois University, I sought IRB approval prior to any data being collected for this study. After approval was granted, I initiated contact with potential subjects and had them complete an informed consent form. This consent form (see Appendix G) included information regarding the purpose of the study, and indicated that participation in the study was voluntary and that no undue risk would occur (Creswell, 1998). During the interviewing process the participants were made aware about the nature of the research. Specific to this study, the researcher explained to the subjects that the interview's purpose was to gain insights into the personal lived experiences that have occurred throughout their career pathways and have led to them becoming leaders within the dietetics profession.

Creswell (1998) discussed how power imbalances can occur between the researcher and the participant. In order to avoid this power imbalance from occurring, the researcher established trust and rapport with the subjects, and avoided the usage of leading questions in the interview. Following the interviews, the subjects were provided a copy of their interview transcript to review for accuracy and verification that all recorded data was representative of the views and personal experiences that they felt comfortable sharing with others. When conducting data analysis in narrative research, one must recognize the sacredness of the participants' stories and the fact that they are trusting to share these with the research community. As a researcher it is therefore important to put aside attitudes of judgement and be open and flexible to the stories that are being shared by participants. As a narrative inquirer one must be sure to accurately represent stories and be sure that one is really listening to what the participants are sharing during the interview process (Mills & Birks, 2014; Young, 2005).

After reviewing their transcripts, some of the participants had minimal remarks or additional information that they wanted to share. Most of the participants confirmed without any additional comments that the information in the transcripts was accurate. Several of the participants expressed their willingness and interest in reading my report upon completion of the study. On the whole, the participants had busy lives, but they were responsive when I needed to verify or confirm information that was conveyed during their interview to avoid any type of misunderstandings. A pseudonym was used to identify the participants through all of the coding and transcription processes; no personal information was used that could potentially link the identity of the participants to their interview responses. As the narrative inquirer for this study, it was important that I tried to respect and honor the stories shared by the participants. Hendry

(2007) stated that as narrative researchers we should be sure to stay true to our participants' stories and not impose our own narratives on them. Narrative research is not ultimately about interpretation, but about faith. It is important to trust in the stories and the storyteller.

Chapter Summary

Chapter 3 examined the methodology of the study. Background information related to the choice of a qualitative, narrative research design was discussed. Also, the procedures of how the interviews were conducted were reviewed, including the use of an interview guide to assist in gathering data on the subjects' personal perspectives. In addition, details regarding the participant sample selection, including purposive and snowball sampling techniques, were reviewed. The data collection and analysis processes were covered and highlighted the 3 Cs of analysis in detail (coding, categorizing, and concepts). Lastly, ethical considerations were mentioned in regard to Institutional Review Board approval, informed consent, preservation of the subjects' identity, and confidentiality when publishing the study results. By reviewing the information provided within Chapter 3, other researchers should gain a solid understanding of the methods that were used to conduct this research study and replicate them as needed for additional research related to the topic of leadership within the dietetics profession and the personal and lived career pathway experiences that were shared by these subjects chosen for this study.

CHAPTER 4

FINDINGS

Chapter 4 discusses emerging themes and subthemes and presents the findings from this study. Five themes emerged as a result of the exploration of the career pathway experiences of these recognized leaders within the profession of nutrition and dietetics. The following five themes are:

- Mentors
- Career Pathways
- Barriers and Successes
- Personality Styles
- Journey to Leadership

A total of 20 participants (18 women and 2 men) were interviewed, and examples from their stories are provided to demonstrate the themes. An interview guide was created to explore the career pathways of these registered dietitian leaders with respect to areas of career influencers, personality traits on the careers chosen, career pathway transformations, and their personal story related to their leadership journey. In addition, closing questions and additional thoughts and/or words of wisdom to share with other registered dietitians were part of the interview instrument to ensure that rich data were obtained. The collected data were first analyzed by performing open coding and developing initial categories. After that, these initial categories were further refined through more selective coding.

In the end, the five major, broader overarching themes emerged, and were developed into individual sections within this chapter. The section on mentors contains a discussion on family, education, and professionals who influenced the participants' career pathway development. The section on career pathways will focus on the traditional and non-traditional pathways that these participants experienced and how certain issues/events caused career pathway shifts to occur among these participants. The next section will focus on the successes and barriers faced by these participants in their family, educational, and professional lives. The section on personality styles will discuss how distinct traits emerged and were related to certain types of career pathway among the subjects. The section on journey to leadership includes a discussion on the successes and challenges faced along participants' leadership journey, their various styles of leadership, and qualities that they believe leaders should possess.

I wrote this chapter after analyzing the interview data. By presenting my findings in this chapter, I allow the voices of my participants to be heard. The section which follows provides a brief introduction for each of the participants in this study.

Introduction of Participants

The following section is an introduction to the 20 participants in this study. The section includes a brief overview of the participants including their years of experience, credentials, educational training, work history, and leadership experiences.

A summary of abbreviations used in credentials for participants is presented in Table 1.

Table 1

Abbreviations Used in Credentials of Participants

Abbreviation	Meaning
RDN	Registered Dietitian Nutritionist
LDN	Licensed Dietitian Nutritionist
PhD	Doctoral Degree
MS	Master of Science
BS	Bachelor of Science
BA	Bachelor of Arts
MHPE	Master of Health Professions Education
MPH	Master of Public Health
MBA	Master of Business Administration
MSNW	Master of Science in Nutrition and Wellness
MBI	Master of Biomedical Informatics
FAND	Fellow of Academy of Nutrition and Dietetics
FADA	Fellow of the American Dietetic Association
DM	Doctorate in Management
CDN	Certified Dietitian
EdD	Doctorate in Education
DPG	Dietetics Practice Group
CSR	Board Certification as Specialist in Renal Nutrition

Mary has a career with >12 years of experience in the field of dietetics. She has a PhD, MS, RDN, and LDN. She has worked in a variety of different settings, including pediatric clinical research, pediatric clinical care and in higher education as the current Department Chair for the nutrition department of a Catholic university located in the Midwest. Her variety of leadership experiences have recently been focused on the advising of undergraduate and dietetic internship students. However, she has held a variety of leadership positions, such as President of her college nutrition club and preceptor of dietitians in her clinical hospital settings, and in her current role as chair of the nutrition department she serves on many committees throughout the university setting.

Cathy has >13 years of experience as a dietitian; she has a BS in Elementary Education, BS in Nutrition and Dietetics, minor in literature and a MPH. She was worked in a variety of different settings such as hospital, long-term care, state education programs for children, and in her current role as Director for a Food Interest Group. She has been President of the district dietetic association, and held positions on the state dietetic association group most recently as the Chair of the Planning Committee. Aside from her volunteerism in dietetics, she also is very involved in her church, humane society, and child welfare programs.

Betty has been a dietitian for >20 years; her credentials are MS, RDN, LDN and she is currently pursuing a law degree. Throughout her career she has held a variety of positions, working in long-term care settings, foodservice management, and as a computer software nutritional analyst. Her leadership positions have varied with local involvement at the dietetic district association level, where she has served as President. Betty has also been involved with the public policy and sponsorship committee at the state dietetic association. Her current

leadership focuses on opportunities that are associated with Food and Drug Law/International Regulatory Standards where she utilizes both her dietetics and law degree background.

Lisa has worked as a dietitian for >30 years, credentials include MBA, RDN, LDN and she is currently pursuing a doctorate in global leadership. Her initial work interests were involved with the WIC program, where she was committed to the promotion of health education programs for the underserved and minority populations. This initial experience set the tone for what Lisa would become passionate about and led to her variety of positions as a private RD consultant in non-profit organizations and food manufacturing. Her leadership ties in closely with her own career path, where she is involved with cultural awareness issues related to food and mentoring student/interns who work with her closely in her own private business. Lisa is also involved and has held leadership positions within a variety of Dietetic Practice Groups of the Academy of Nutrition and Dietetics.

Pam has been a relentless volunteer and true advocate for leadership within the Academy of Nutrition and Dietetics for >35 years. Her credentials include MBA, RDN, and LDN. Pam is most well known in her current position as a food news columnist, advisory board and speaker consultant for food industry and wellness companies, and as an adjunct faculty member at a Catholic university in the Midwest. However, her experiences have included positions in a variety of settings clinical (focused on weight management and cardiac health). Her leadership experiences are extensive: she has been active at the local district, state and national level of the Academy of Nutrition and Dietetics. A few of her recent national positions have included being on the House of Delegates, Chairperson of Midwestern State Delegates, Chairperson for several

Dietetic Practice Groups, and reviewer of publications for the Academy of Nutrition and Dietetics. In addition, Pam is involved with her community and church volunteer organizations.

Wendy has been a dietitian for >5 years, but has accomplished a lot of in terms of leadership within her shorter span of being a RDN. Her credentials include MSNW, BS Political Science, BS Nutrition, RDN, and LDN. Her current position is Wellness Coordinator for a community college and an adjunct faculty member at a Catholic University, both in the Midwest; she is also a private wellness consultant. Wendy strongly believes that getting involved is a key necessity of having your voice heard, which is why she has risen so quickly in a short time frame. She has been President of the district and state level dietetic associations, Chairperson for Legislative and Public Policy, and Media Spokesperson for the Academy of Nutrition and Dietetics.

Kevin is one of the male subjects interviewed for this study, with a career spanning almost 35 years in dietetics. His credentials include MBA, MBI, MS, RDN, LDN, and FAND. Kevin is very passionate about nutrition informatics, where he has held various positions involved with project management and implementation at a computer nutrition software company. Prior work experiences included a variety of clinical positions at hospital medical centers. Throughout his professional career Kevin has valued the importance of leadership and has been active for over two decades in various positions, including President of the Academy of Nutrition and Dietetics, serving as an active Board Member for the Political Action Committee, Health Informatics Infrastructure, Nutrition Informatics Committee, Strategic Planning Task Force, and Board of Directors for the Academy of Nutrition and Dietetics.

Gloria has had a career within nutrition and educational leadership for over 20 years and has a deep understanding of the national Academy of Nutrition and Dietetics as well as public and private educational institutions; her credentials include, MPH, RDN, and DM. Gloria was elected to serve as President of the Academy of Nutrition and Dietetics and Speaker of the House of Delegates. She was the inaugural President of a Southwestern University, Assistant Dean at a Southwestern College, and served as their Director of Nutrition for 17 years. Given her avid passion for leadership, postsecondary education and training, Gloria holds a Doctorate in Management and Organizational Leadership, a Master's in Public Health and Nutrition, and two Bachelor degrees (Nutrition/Public Health). She is an advisor and consultant for a research group, serves on the statewide Board of Directors for a rural leadership project, and was a founding member of a southwestern bank where she raised significant scholarship dollars for her community.

With a career spanning >30 years, Rose has exhibited a strong passion and dedication for the field of nutrition and dietetics. She has held numerous positions throughout her career with the district, state and national Dietetic Associations. She graduated with her master's degree in adult/community education and was awarded by her alma mater the coveted Distinguished Alumni Award, ADA's Margene Wagstaff Fellowship for Innovation in Dietetics Education, and ADA Medallion Award, just to name a few. Aside from these leadership involvements and awards, she has also been the President of the Academy of Nutrition and Dietetics. During her leadership involvement she has chaired the Standardized Language Task Force for the Nutrition Care Process and established terminology that can be used in nutrition services internationally.

Rose is passionate about leadership and is always willing to mentor others and encourage young professionals to get involved in our organization.

Nancy has a career that has spanned ~15 years involved with nutrition through her completion of a Doctor of Philosophy, two post-doctoral fellowships, Master of Science in Human Environmental Sciences, and Master of Science in Biological Sciences: her credentials include PhD, RD, and LDN. Based on Nancy's extensive training and education, one component has always remained consistent: her passion and enthusiasm for the field of nutrition. She currently works as a private consultant dietitian for her own company and also with a critical care center. Her involvement in leadership has been exhibited through various positions held at her local, state and national dietetic associations. Her current role within an Academy Member Interest Group and as the Mentoring Committee Chairperson has been especially fulfilling on a personal and professional level, because it allows her to be a mentor and encourage others about the importance of becoming involved and determining the career niche that works best for them in their career exploration.

Having a career that spans >30 years in nutrition and dietetics, John as a male dietitian brings a different viewpoint as the 2nd male subject interviewed for this research study. His credentials include a PhD, RDN, CDN, FADA, and FAND and he has held a wide variety of volunteer and leadership positions at the local, state and national level of dietetics associations. As a past President of the Academy of Nutrition and Dietetics his passion for optimization of health through food and nutrition has remained a consistent platform for his personal and professional interests. John received his PhD in Nutrition, a M.S. in Interdisciplinary Studies, and a MS in Biology. In his current role as Professor of Food Science and Nutrition and

Associate Dean at a public Northwestern university in the United States, John is strongly focused on leadership potential and the ability of students to get involved early on and to not be afraid of taking on various leadership positions when they are offered to you.

Andrea has a career that has been >25 years involved in the field of dietetics through her variety of experiences as a manager in both clinical dietetics and food services, consultant in long-term care, clinical dietitian, and her current position as a faculty member and Coordinator of the Food Lab at a Catholic university in the midwestern United States. She received her Master of Science in Clinical Nutrition and BS in Food and Nutrition; her credentials include MS, RD, and LDN. Her involvement and leadership skills at the district and state association of the Academy of Nutrition and Dietetics have been longstanding, where she has held numerous positions. Andrea has been the recipient of the Outstanding Dietetics Educator Award and Outstanding Dietitian of the Year Award from her state association. Also, she has served as a mentor and educator where she has encouraged students and graduates to get and remain involved in leadership and volunteer positions, which can assist in their own career pathway development and encourage networking opportunities to occur.

With a career spanning >25 years, Sarah has been actively involved in a wide variety of positions that have been focused on mentoring and teaching the future dietetics students of our profession. She currently serves as the Dietetic Internship Director at a Catholic university in the western United States and has been actively involved through leadership positions at the state, local and national level of the Academy of Nutrition and Dietetics. Sarah has earned her Master of Science in Clinical Nutrition is currently in working on her Ph.D. in Public Health; her credentials are MS, RDN, and LDN. Some of her prior positions include being a clinical

dietitian, cafeteria manager, diet office manager, assistant foodservice director, internal management consultant, and consultant at a variety of healthcare facilities. She is very involved as a volunteer and leader in the areas of community nutrition, maternal and child wellness, and obesity prevention.

Anna has been involved in the dietetics profession for >30 years where she has worked as a clinical dietitian, community educator, consultant dietitian, and adjunct faculty member. She has held her current position as Department Chair, Professor of Nutrition at a Catholic midwestern university. Anna earned her doctorate in Educational Psychology and Master of Science in Clinical Nutrition,); her credentials include MS, EdD, RDN, and LDN. Anna has been a recipient of the Outstanding Dietetics Educator Award from the Academy of Nutrition and Dietetics, Alumnae of the Year Award from her high school, and Recognized Young Dietitian of the Year Award from her state Association. Her involvement in leadership has been seen by serving as a past President of a midwestern state and local Academy of Nutrition and Dietetics Associations, past co-Chair of the Strategic Planning Committee, and as a program reviewer for the Accreditation Council for Education in Nutrition and Dietetics of the Academy of Nutrition and Dietetics.

Ellen has been involved in the field of dietetics for >40 years where she has contributed significantly towards the nurturing of future dietetics leaders as students and dietetics professionals. She received her PhD in Measurement, Evaluation, and Statistical Analysis, Master of Health Professions Education, and a Bachelor's degree in Foods and Nutrition; her credentials are PhD, RD, LD, and FAND. Her career has involved being a research associate for a university healthcare system in nephrology, consultant, writer, speaker, Professor and

Department Chair of Nutrition at a Catholic university in the midwestern United States, and a review editor and associate editor for several peer-reviewed publications. Her listings of publications, grants, and awards are extensive and have contributed significantly towards the future advancements of our profession. Ellen is passionate about the importance of advancing, educating and expanding the diversity among the future leaders of the field of dietetics. Through her extensive career in dietetics she has received numerous awards and recognitions, but she has indicated that one of the most important attributes that has allowed her to flourish has been her ability to be have a presence as a content expert, volunteer and leader throughout her nutrition involvements and she encourages all future leaders to become involved, so their voice can be heard and be able to make a difference.

Lynn has a career that spans >40 years where she has held a variety of roles and advanced from extension specialist to Assistant Director of the Extension. She is self-employed as Director of a Consultant Practice Group and has served as past President of the Academy of Nutrition and Dietetics, her credentials include EdD, RDN, LDN, and FAND. Lynn has a long history of service, purpose, and dedication towards the profession of dietetics. Her leadership roles have been extensive and include being President at the district, state and national level of the Academy of Nutrition and Dietetics, DPG Chair, Professional Issues Delegate, House Leadership Team, Council on Future Practice, Board of Directors and with the Academy Foundation. As a skilled communicator and advocate for leadership Lynn has a unique ability of being able to connect with people, ideas, and information. As a visionary leader and creative thinker across her career she has advocated for the importance of cultural diversity and teamwork in the Academy and the profession of dietetics.

With a career spanning >25 years in dietetics, Beth has been an advocate of professionalism, mentoring, and leadership for the profession of dietetics. Her credentials include a PhD, RDN, LDN, and FADA; she earned a master's degree in nutrition and higher education and a doctorate in cultural anthropology. She has held a variety of positions, but is currently at a large southern public university serving as academic advisor, director of the undergraduate nutrition program and graduate dietetic internship program, chair of the Department of Public Health, and professor of Nutrition and Dietetics. Aside from her professional work she has also served a life of professional leadership by being a President and Past President of the Academy of Nutrition and Dietetics, an ADA Board Member, Director on the House Leadership Team, Board Member of a Member Interest Group, and member of the Nominating Committee and Diversity Committee. Beth is well known as being a servant leader who is focused on putting the needs of the Association and its members above her own. Her areas of emphasis are diversity, inclusivity, advancing dietetics education and research, and examining and improving the process of how things get done in the association for the benefit of all.

Kelly has a career that has spanned almost 20 years, where she has held various positions such as corporate executive dietitian, food service director, Vice President of Compliance, and her most recent position as the Vice President of Nutrition and Operational Support and Director of Menu Programs for a large foodservice management company. She received a MBA in Finance and Management, and BS in Dietetics, and her credentials are MBA, RDN, and LDN. Within her corporate position she is recognized as being a diversified operations leader with extensive national management. Some of her most notable accomplishments are evident through

her visionary leadership skills, ability to build performance excellence with stakeholders and attain business partnerships; she is the recipient of several corporate awards for business strategy best practices. Aside from her professional career, her involvement with volunteerism has been evident as well: Kelly has held positions at the district and state level of the Academy of Nutrition and Dietetics, is a volunteer tutor, co-leader in Daisies Girl Scout Affiliate, and as a Board Member of a large food bank. Leadership is something that Kelly has exhibited in her personal and professional career and she is always willing to mentor and support new and young dietetics professionals as needed.

Joan has been involved in the field of dietetics for >25 years. Her educational background includes an EdD in Adult and Higher Education, MS in Human Nutrition and Nutritional Biology, and BA in Foods and Nutrition; her credentials include EdD, MS, RDN, and LDN. Her career has included a variety of clinical positions, clinical coordinator for a dietetic technology program at a community college in the midwestern United States, and her current position as an Associate Professor, Director of the Dietetic Internship Program and Department Chair of the Nutrition Science Department at a Catholic university in the midwestern United States. She has been the recipient of numerous honors and achievements and has served as a delegate for the Future Practice Summit of Leaders by the Academy of Nutrition and Dietetics. As a leader and mentor Joan is strongly committed to the promotion of equality and diversity within the profession of dietetics professionals. She has received several grants for the Family and Nutrition Services Head Start Nutrition Education Program. Joan is a true advocate for mentoring students and dietetics professionals so that they are able to overcome potential barriers and improve diversity within the field of dietetics.

Caren has a career that spans >35 years in dietetics. She is known by many of her colleagues as a “dietitian’s dietitian” and has stressed the importance of science and evidence-based practice throughout her career. She received her Master of Science in Healthcare Management, Master of Nutritional Science, and a Bachelor of Science degree. Her credentials include MS, RD, CSR, and LDN. Caren has spent her professional career working in the complex area of renal nutrition and transplant nutrition support, earning the credential of certified specialist in renal nutrition. Through her leadership and mentoring Caren has been integral to the education of registered dietitians throughout her career; she has had an academic appointment in the School of Medicine at a Pacific Northwest university and has served as preceptor for more than 35 years. During that time, she also served for 2 years as interim dietetics internship director. Caren has served in volunteer leadership positions at all levels, and as President of the Academy of Nutrition and Dietetics. She has been the recipient of numerous awards, such as the National Kidney Foundation Council on Renal Nutrition Recognized Dietitian Award, ADA’s Council on Education Outstanding Dietetics Educator, and the Nutrition Ambassador Scholarship. Her personal and professional philosophy is to lead by example and by consensus. Caren fosters an environment in which all participate and express ideas that may or may not be part of the accepted establishment. As a true servant leader she strongly believes in member involvement and encourages those around her to become involved and have their voice be heard.

Analysis of Demographics

The respondents were between the ages of 35 and 65+ and selection criteria included: being a Registered Dietitian who is currently credentialed by the Academy of Nutrition and Dietetics for at least the last 5 consecutive years, and meeting at least one of the following criteria in order to be identified as being a leader within the dietetics profession: (1) held an elected position at the district, state or national association for the Academy of Nutrition and Dietetics; (2) held a position as a department chair or professor of a credentialed program in dietetics; or (3) received a recognition award within the healthcare or business field as being an exemplary leader for the profession of dietetics. A total of twenty subjects were interviewed; eighteen were female and two male subjects were included. These subjects also represented a variety of diverse ethnic and cultural backgrounds. A total of two Hispanic, one Indian, and two African American dietitians were interviewed for this study. Subjects were recruited from across the United States and included: 13 (the largest group) from the Midwest, two from the Pacific Northwest, two from the Southwest, three from the Southeast, and one from the Southern United States.

At the time of this study, the variety of professional roles held by the majority of subjects (13) were as a faculty member and/or department chair of a credentialed program in dietetics. However, many of these subjects also had an overlap in their professional career positions and acted as a private clinical/business consultant and/or clinical dietitian. One of the subjects worked as a Director of Nutrition at a computer informatics agency. Another worked as a Vice President of a foodservice management company. One subject was the Director of a Food

Council Group and another subject was a law student studying Food and Drug Regulatory Law. For the educational background, 11 of the subjects had completed a master's degree, with nine of the subjects holding a doctorate degree. All of the subjects chosen for this study held volunteer/leadership positions in some capacity within the Academy of Nutrition and Dietetics. Included within this sample, seven subjects had held the position of national President of the Academy of Nutrition and Dietetics, which offered a valuable insight into the leadership trends and vision regarding the future development of the dietetics profession. This sample group provided a diverse and representative variety of dietitians who could share their career pathways and discuss their development into becoming leaders within the field of dietetics.

Participants' Demographics

A summary of participant demographic information is presented in Table 2. The distribution of Registered Dietitians by gender, age group, ethnicity, and area of practice are presented in Figures 1 through 4. As shown in the bar chart in Figure 1, the distribution of participants by gender was shown to be 90% female and 10% male. This depiction is consistent with current reported diversity within the dietetics profession, which is largely dominated by female RDNs versus males. As shown in the bar chart in Figure 2, the distribution per age group was 10% (35-45 years of age) and 25% (46-55 years of age), with the largest group of participants (65%) within the age group of 56-65+ years.

As shown in the bar chart in Figure 3, the distribution by ethnicity was 10% African American, 10% Hispanic/Latino, and 5% Asian/Indian, with the largest percentage (75%) of participants self-identified as White. As shown in the pie chart in Figure 4, the distribution of

Table 2

Participants' Demographics Information

Participants	Gender	Age Group	Ethnicity	Practice Area in Dietetics
Mary	Female	35-45	Asian/Indian	Education
Cathy	Female	35-45	White	Business Industry
Betty	Female	46-55	White	Education
Lisa	Female	46-55	Hispanic/Latino	Business Industry
Pam	Female	56-65+	White	Healthcare
Wendy	Female	46-55	White	Education
Kevin	Male	56-65+	White	Business Industry
Gloria	Female	56-65+	White	Education
Rose	Female	56-65+	White	Education
Nancy	Female	46-55	African American	Healthcare
John	Male	56-65+	White	Education
Andrea	Female	56-65+	White	Education
Sarah	Female	56-65+	White	Education
Anna	Female	56-65+	White	Education
Ellen	Female	56-65+	White	Education
Lynn	Female	56-65+	African American	Education
Beth	Female	56-65+	Hispanic/Latino	Education
Kelly	Female	46-55	White	Business Industry
Joan	Female	56-65+	White	Education
Caren	Female	56-65+	White	Healthcare

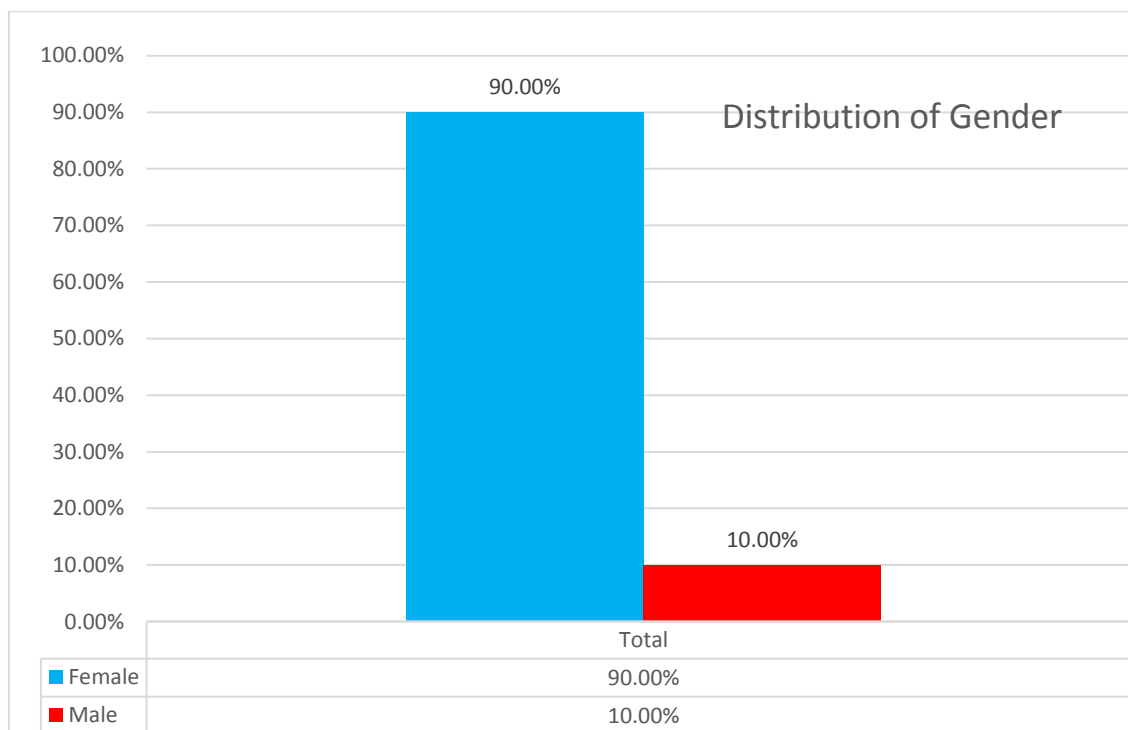


Figure 1. Distribution of participants by gender.

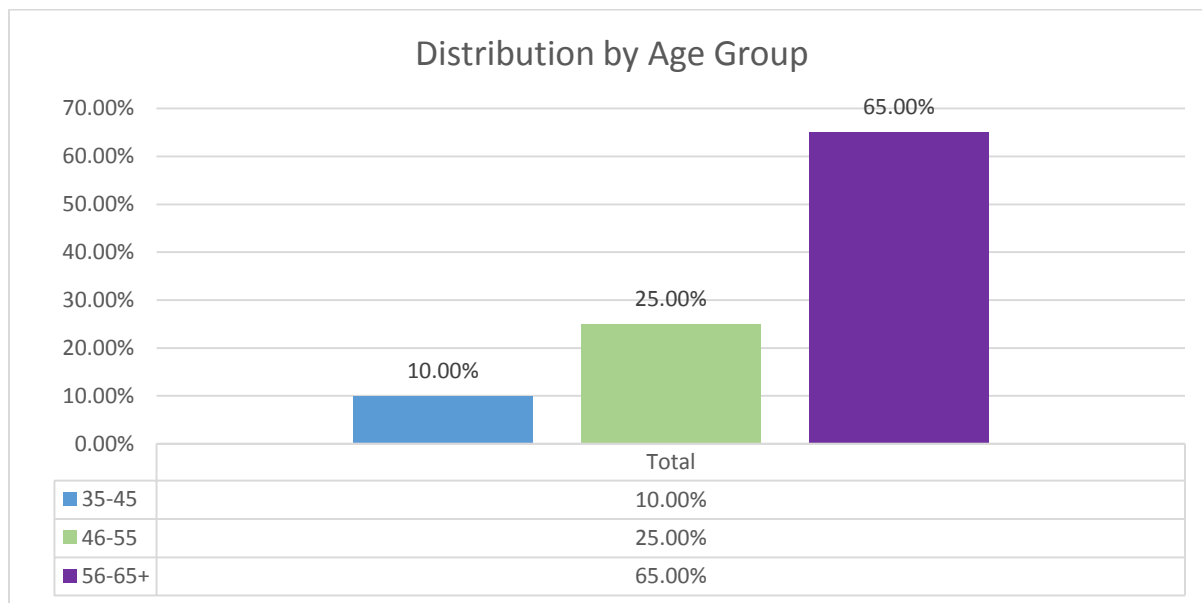


Figure 2. Distribution of participants by age group.

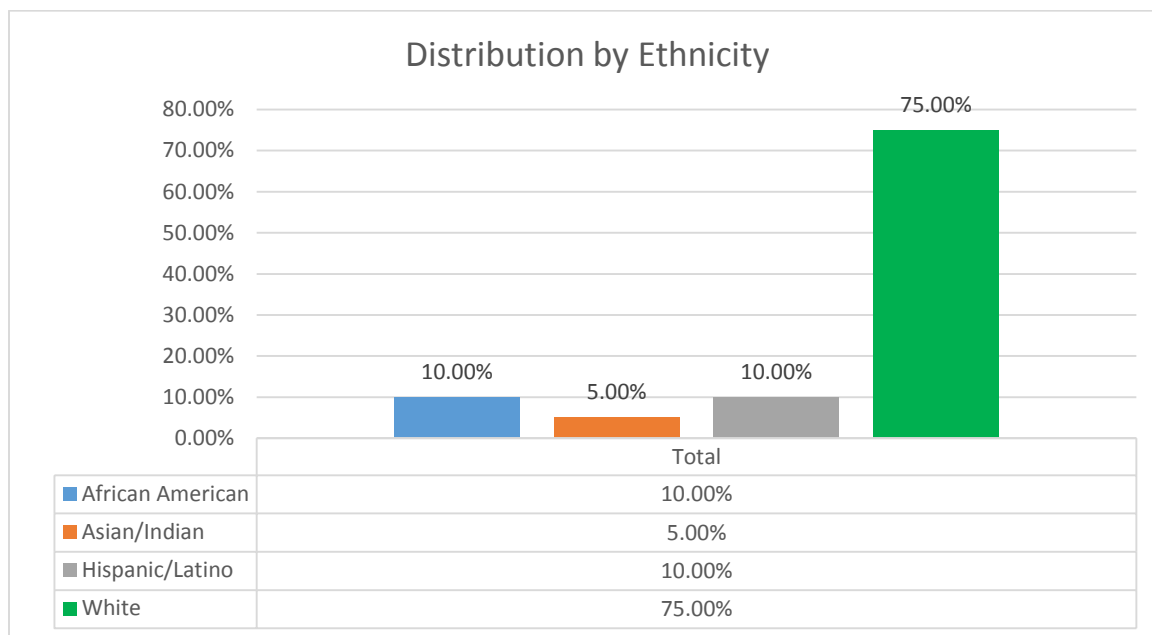


Figure 3. Distribution of participants by ethnicity.

Distribution of Participants by Area of Practice

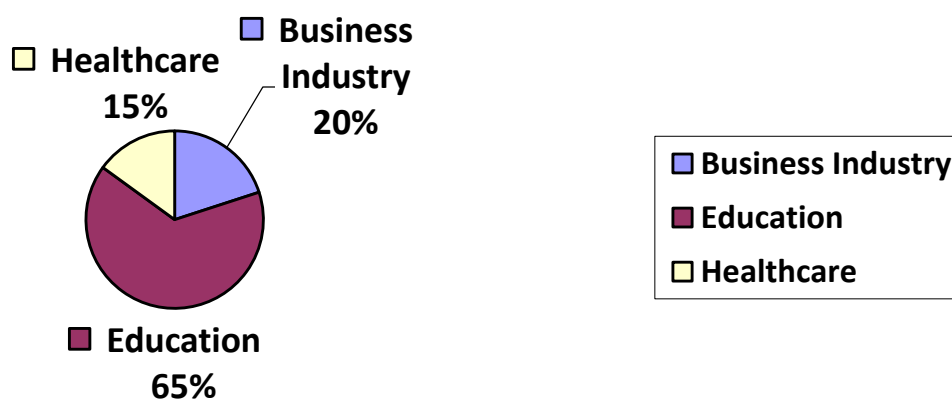


Figure 4. Distribution of participants by area of practice.

participants by area of practice were 15% in healthcare and 20% in business and industry, with the largest percentage (65%) of participants working in the area of education.

Emerging Themes: Mentors, Career Pathways, Barriers and Successes, Personality Styles, and Journey to Leadership

For this research I identified five themes and multiple sub-themes which arose from the participants' responses to the semi-structured interview questions. The five major themes—Mentors, Career Pathways, Barriers and Success, Personality Styles, and Journey to Leadership—emerged as a result of interviewing 20 Registered Dietitians in this study. The descriptions of these themes are provided below.

Mentors can serve as career influencers when they impact and play an influential role in the career pathways chosen. The participants in this study shared personal stories related to mentors that they encountered early in their lives (families) and at various points during their own career pathways (education and professional). Another sub-theme that was discussed by some participants related to issues of diversity and their perceptions of how this may have impacted the career path they chose.

Career pathways were discussed as they related to the experiences faced by participants as they chose to pursue a pathway in nutrition and dietetics. Several participants entered the profession through the traditional, undergraduate-to-dietetic-internship route, whereas a variety of participants joined the dietetics profession as a transition from a different career or as a non-traditional student later in life where they followed a more independent route to completing the undergraduate nutrition requirements before being able to apply for a dietetic internship.

The third theme related to the barriers and success faced by dietitians. In this study, registered dietitians shared their perceptions of transformations that caused them to reconsider the direction or chosen area of practice within dietetics. Also, certain career pathway transformations instilled among several participants the necessity for them to become involved and contribute as leaders within the dietetics profession. Some of these transformational experiences supported their beliefs that by being a leader their voice could be heard and also make a difference in the future growth of the profession.

A fourth theme which emerged was related to personality styles, which showed an interesting correlation among the type of careers chosen and also the participants' interest in becoming involved as leaders within the profession of nutrition and dietetics. The participants shared their own assessment of their personality style; no formal assessment tool was used. Based on their own reported personality styles, certain commonalities were seen among career choices and leadership roles that the participants held.

The fifth theme focused on the journey to leadership, where the participants discussed some of the successes and challenges they encountered as leaders. A discussion emerged where the participants discussed their various styles of leadership and qualities that they admired in other leaders, along with words of wisdom for future dietitians.

The sections on the emerging themes—mentors, career pathways barriers and success, personality styles and journey to leadership—follow, with examples provided from participants' interviews and findings.

Mentors

The first theme of Mentors emerged as the participants talked about their own personal stories and discussed the support they received from family, educational and professional mentors and how they helped them navigate their careers and inspired them to become leaders within the profession of dietetics. Mentors can impact and influence one's decision to embark on a certain pathway and can also serve as the needed support to not give up despite barriers or obstacles that one may be faced with.

Mentoring

This subtheme emerged because throughout the personal stories shared by these participants, the influence of how both personal and professional relationships (mentoring) occurred which influenced the career pathway chosen by these women and men. As discussed by Gabriele and Min (2010), mentoring can be very effective at developing the needed skills, abilities and ongoing nurturing support that is needed to succeed and be able to advance within one's professional career pathway. Mentoring can exist in a variety of different forms: formal or informal, supervisor to subordinate, subordinate to peer, or peer to peer. It has been discussed (Washington, 2010) how women often have difficulty finding and identifying with persons who can commit to being their mentor. However, if women are able to find a strong network of mentors and/or supporters they are often better able to advance their careers and overcome some of the career barriers to advancement that exist, such as corporate policies, training and career development, promotion policies, compensation practices, stereotypes, and having to overcome the status quo "old boy" networks. So, overcoming barriers is something that does not occur

overnight, but through the assistance of mentors and the mentoring relationship it can be overcome (Oakley, 2000).

Two of the most common styles of mentoring are formal and informal mentoring. Informal mentoring relationships are described as occurring by chance. These type of relationships often form when protégés are looking to someone that they admire for career guidance. An informal mentoring relationship is an option where there is no structural agreement or expectations that exist. As described by Armstrong, Allinson, and Hayes (2002), informal mentoring relationships are often built upon mutual trust, respect, and caring, whereas formal mentoring relationships are often less sympathetic and the interactions are viewed as being forced and with a limited time frame, often between ten months and 1 year. In contrast, informal mentoring relationships are more long-term and typically last between 3 to 6 years or longer (Washington, 2010).

Mentors within Family

It appeared that almost all of the mentor/supporters that were discussed by these participants consisted of informal mentoring relationships, with only a few who participated in a formal mentoring relationship. Informal mentoring existed for several of these participants through various experiences they encountered during their early childhood/adolescence that influenced them before their careers had even started. These participants described their experiences with pleasure as they recalled how early influencers did impact the career pathway they chose to pursue. Rose stated,

My grandmother lived with us and she was blind and had experienced 3 heart attacks by the time I was 4. I knew that she followed a low sodium diet, but her satisfaction with food was poor and she consumed shredded wheat 3 times a day with warm milk and had

hot water with milk, and for breakfast she had prune juice. This was how she ate for almost 4-16 years of my life and I knew that I wanted to make a difference and assist people with diet restrictions like my grandmother's.

As a result of this early career influencer Rose has written and dedicated her career to writing publications that are focused on how to treat and modify diets for patients based on their disease restrictions.

Lisa shared a similar experience which involved early influencers that affected her career pathway that she chose to pursue. A combination of her influence from her mother and her own response to these early dietary behaviors and/or restrictions affected the career pathway chosen by Lisa. Here is an example:

My mother, who is 82, is also a dietitian, but I believe she was way ahead of her time in regards to the field of nutrition. I cannot think of a mother who was more diligent in watching the diets of her four kids. She was always doing things different and unique things for us when preparing our meals. However, it was during my meal management courses offered in the coordinated high school/BS program in nutrition, I fell in love with the profession at that moment.

As a result of this early career influencer on Lisa she became obsessed with how to make menus and recipe development, which led to a successful career pathway as a consultant (for several of the largest food manufacturing companies) in the United States today.

An influential mentor as described by Wendy was her mother, who she stated has been supportive and loving of her successes throughout her life:

I know that it was initially my mother who influenced and supported me at every step of my pathway. I believe that my mother was one of the most loving human beings on the planet. I couldn't have asked for a better role model and support system. I strongly believe that having a solid support system was integral to the shaping of my confidence to achieve whatever I wanted to aspire towards achieving in my own personal career journey.

As discussed by Pam, the influence of her parents played a big role in highlighting the value of volunteerism and leadership, which have been her professional career strengths within the field of dietetics. She has been seen as a relentless volunteer and a spokesperson for the field of nutrition and dietetics. As conveyed by Pam,

Being active and being an active participant is something that I grew up with. It is something that I experienced in my family. My parents were very active within their fields. So, it could have been the result of role modeling or just be part of my DNA, because I believe they are influential in some aspect of why I am the way that I am.

Another participant, Kevin, shared an early career influencer who was his sister, who inspired him to consider the field of nutrition and dietetics as an option where he could satisfy his interest in preventative medicine and health and not go to medical school. Here is an excerpt that Kevin shared.

My sister is also a RDN. She is 8 years older, but her pathway is much different; she got her doctorate degree and went on to teach at a university. But, having her in the profession sparked my interest that the profession of dietetics could be a good option for me as a career pathway.

The ability to have an informal mentoring relationship prior to college existed for Kelly, who discussed how her ability to shadow a few dietitians during her junior and senior years helped her solidify her decision that dietetics was the field that she was interested in pursuing when she went to college. As shared by Kelly,

In high school I played sports and I saw the impact the food had on performance. It was always my first pathway of interest. From there I went to college looking into dietetics; I am actually remember[ing] in high school talking with a few RDs where I was given the opportunity observe them consult [with] patients and also discuss what it meant to be a dietitian... overall I found it very fascinating as a profession.

One of the women discussed her story about the challenges she faced and lack of support for her career from her family. But she has a family friend who supported her and provided her

the encouragement needed to pursue her dream. Here is an excerpt of the situation as discussed by Mary:

My family did not want me to go into nutrition and dietetics, because nobody really knew how that career was. My dad is a physician and there will be always be physicians in demand and yes... you can make a lot of money. So, a lot of the people we grew up with had dads who were doctors, so when I went away to college it was assumed that I would choose a career pathway to become a lawyer, doctor or engineer... one of the approved career pathways by my family. But, I just did what I wanted and went with it.

This example shared by Mary highlighted the informal mentoring relationship that she found with a good friend's mother, who supported her decision and encouraged Mary to believe that it would be a good fit for her. Mary discussed how she considered her friend's mother to be a strong influencer and supporter of her decision to pursue dietetics. Also, she stated how she looked up to her because she was a nurse and a social worker and that she shared how she was able to utilize her various skills sets.

Another example of having a strong family mentor was shared by Nancy, who expressed how her mentor guided her to pursue graduate school and has served as a supporter throughout her personal and professional career pathway. As shared by Nancy,

I would say that I have had one true mentor...a close family friend who has known me my entire life and grounded me into making well-thought out decisions regarding my career. I'm glad that he encouraged me to attend graduate school versus going out immediately into the workplace. He is responsible for where I am now and introducing me to research and has continuously been there for me as my cheerleader. All of these experiences shared by these participants are related to informal family

mentors. Even though these influencers were informal in nature, they did make a definite impact on the directional path and educational plan that these participants decided to pursue.

Mentors in Education

Some of the following discussions shared by participants discussed how these informal mentoring relationships shaped their pathways and determination to pursue a career related to nutrition and dietetics. Some of these experiences that led to participants' career pathway choices were influenced by mentors and/or supporters who played important roles. As will be discussed, the mentor/supporters assisted them with the navigational directions of their career pathways and the choice to consider pursuing the field of nutrition and dietetics.

A personal experience shared by Cathy discussed how the influence of a high school chemistry teacher sparked her interest and desire to learn more about the field of nutrition. As shared by Cathy,

It all started for me back in high school with my chemistry teacher, who encouraged me to find a research topic that I was passionate about. I chose food about why and how it was used by the body. This interest was also influenced by the fact that I had a disordered eating challenge in high school and I wanted to learn more about how to eat well and to take care of yourself in a healthy manner.

These early experiences influenced Cathy and her decision to pursue the field of nutrition and led to her career pathway, which evolved in the creation of education and program development plans for major Food Council organizations to educate the public about healthy and safe nutrition practices and behaviors.

The mentoring relationship Andrea encountered while an undergraduate college student was influential in how a successful dietitian should conduct themselves. As described by Andrea,

Certainly my advisor in college, was influential for me. She was very straight-laced and alot of students did not like her because she was a little bit older and on the serious strict side. But there was something about her that we got along just fine, so she wrote

internship letters for me and what not... and I appreciated her input to where I got too. She always stressed a lot of professionalism and being involved; she was a good starting point in assisting me with my career pathway development.

Wendy provides another example of how a mentor encountered early on in one's educational training influenced her genuine interest in science. As discussed by Wendy,

So, I love science and that is probably because I had an awesome teacher when I was in high school... quite frankly when I took the ACT, I told her years later what I remember about cells and biology I remember it from her classes.

An experience Kelly shared highlighted how one of the rotations she encountered during her dietetic internship training really sparked her interest in community programming and education, which eventually led to the career pathway that Kelly is currently employed within. She said,

During my internship there was the option to choose your own experience and I chose to participate in a community cancer center. During my experience I acquired a wonderful preceptor and mentor who provided me the opportunity to teach . . . and create the programming for various classes. I found this to be a great learning experience, because I was given the freedom and creativity to do whatever I chose along with her guidance as a valuable mentor throughout the learning process.

Joan shared an educational experience of how a faculty mentor she acquired during her dietetic internship/master's degree program really gave her the confidence that she was not alone and that she should follow her passion and not give up on her dream of becoming a dietitian. As discussed by Joan,

When I was doing my internship/master's degree program it was very intense and we had only 4 students who were admitted into my program/year. It was affiliated with the medical school and we often felt like the step-children of the medical school. I had a lot of stress on myself and my family and it took me 2 years to finish. But, what saved me was a doctor at the diabetes clinic who became my thesis advisor. He normalized for me the insanity of the program and always reminded me that you feel overwhelmed because you are here.... and he encouraged me to develop my skills and not become discouraged.

Betty discussed how throughout her educational experiences she encountered several faculty mentors who assisted her with gaining the confidence that she found valuable in her professional experiences as a dietitian. As described by Betty,

There were certain women faculty members who would pick me out and I didn't know why, but they would support me and spend extra time with me. They didn't mind taking an extra minute to affirm that what I was doing, which I found extremely valuable. Throughout my education I have been fortunate to always have someone identify with me and help me develop my skills. Having those relationships and support systems to me was one of the biggest successes that I can see because those are the things that I remember and I hope to also be ... seen as a valuable mentor for younger students and dietitians.

Pam shared her personal experience of how the influence of someone she met during her sophomore year of college, who was a nutrition major and acted as a supporter and close personal friend. This career influencer strongly affected Pam's decision to pursue the field of nutrition and dietetics. Here is the experience as discussed by Pam:

I was on track to become a biology major and it was my sophomore year. I knew that I had to take a course in quantitative analysis and I was becoming very overwhelmed because I believed that I could not do it. So, I was confused and did not know what I was going to do for my major.... until one day when I was in line in the dining hall I met a young lady we became friends and she told me about her experience as a dietetics major and about the field.... I became interested and decided to take a nutrition class. From that moment on I fell in love with the field of nutrition and that lady I met in the dining hall has remained a close friend and fellow dietitian colleague all of these years.

Beth shared how her educational experience with faculty as mentors influenced her decision to continue in the pathway of becoming a dietitian.

Dietetics was not my initial passion when I was younger and first went to college. Actually, I applied to several different majors. But what really influenced me was the nutrition faculty who served as informal mentors. The faculty and curriculum really got me excited about the profession. I wouldn't say that I had a conscious mentoring relationship, but these faculty members had qualities that I found inspiring and I wanted to model the kind of behaviors that I found inspirational for me as a future career pathway.

Another example shared by Beth highlighted the mentoring relationship that she created with her faculty advisor. As a non-traditional student Beth already had a degree in Political Science and a career in court reporting. However, the faculty/advisor mentor that she acquired helped shape her career pathway and connected Beth to individuals associated with legislative and public policy in regards to nutrition. As discussed by Beth,

So, when I met with my advisor/faculty member she already knew about my background and interests related to policy and legislative issues. She was the person who drew me towards the Public Policy Workshop (PPW) hosted by the Academy of Nutrition and Dietetics in Washington, DC. That is how it all started and eventually came together for me. . . . attending the PPW was a great experience and the people I met during my 1st experience are still my friends till this day and have impacted me in my own career pathway development.

John related that he was a biology teacher and found nutrition to be an interesting aspect of his curriculum. So, he decided to take a course at the state university in nutrition, which is where he encountered his advisor/mentor who influenced his decision to pursue the pathway towards becoming a dietitian. As described by John,

When I decided to take a course at the local university in nutrition, I was assigned an advisor, who eventually became an influential mentor. She talked about the option of doing a PhD program in nutrition and also discussed the career options within the field of nutrition and dietetics. I really wasn't aware of this profession, so she took the time to review the pros and cons and assisted me in figuring out how to accomplish an advanced degree option towards becoming a registered dietitian.

Based upon these excerpts of personal experiences shared by the participants, it is evident that being able to identify a role model or informal mentoring relationship with someone definitely influenced their decision to pursue a career in nutrition and dietetics. Quimby and DeSantis (2006) discussed how role models can be defined as people whose lives and activities can influence another person in some type of capacity. Often individuals are more prone to seek

out mentors who are similar to them in some easily identifiable way and based upon this initial attraction a relationship of mutual trust can occur, which can lead to thoughtful and valuable career guidance and support (Washington, 2010).

Mentors in Work Experiences

A variety of dietitians shared personal work experiences where they felt attached to certain mentors/supporters who played an important role in the type of career pathway chosen by these dietitians as a result of their influences. Betty discussed how she came into the field of nutrition as a young dietitian without the confidence needed to supervise others in the kitchen who were older and worked their entire careers and now they needed to change and do things differently based on her suggestions as their new supervisor. Here is an excerpt from Betty's experience:

When I started my 1st position as a foodservice manager, I had a lack of confidence when dealing with my employees who were older and in this company for longer than I had been practicing. But, I am so pleased that I had the opportunity to work with an incredible boss at this long-term care facility in the food management division. She had a complete grasp of the entire facility and everyone respected her.

Betty discussed how her foodservice boss acted as a great influence and mentor for her. Betty stated how she was able to learn the skills needed to make the hard decisions and not be a friend to her employees but also how to achieve the delicate balance of gaining their respect. The knowledge gained from her work experience and mentorship of her boss provided Betty the coaching needed so she could succeed in the foodservice management career pathway.

Another dietitian who was an educator discussed how a mentor she connected with through her work experiences and volunteer involvement with the Academy of Nutrition and Dietetics really provided valuable assistance to Gloria. Here is a brief excerpt that Gloria shared:

Dr. Pam was a dietitian and professor from one of the large universities in the United States and I was able to connect with her through my educator work experiences and leadership involvement at the Academy of Nutrition and Dietetics. She had such a profound impact and was always willing to take the time and have a dialogue with me. We had a lot of things in common about what we wanted to try and accomplish in our careers. Actually, she had already accomplished a lot of things that I also wanted to do... so she was able to share her wisdom and provide honest feedback so it helped me grow in many ways.

As described by Gloria, she was able to find a mentor/role model through her involvement with the Academy of Nutrition and Dietetics as an educator and Dr. Pam was someone who she truly admired from a professional career standpoint. So, Gloria was able to learn about the future trends and valuable insights from her relationship with Dr. Pam as a guiding framework for how she wanted to shape her own career pathway as an educator and leader within the field of nutrition and dietetics.

A similar situation was evident for Caren, who experienced the guidance of a mentor which eventually led towards her becoming more involved as a leader and volunteer within the professional dietetics association. As described by Caren:

Since I was so focused on being science oriented and nutrition support I was very interested in becoming involved in the Dietetic Practice Groups related to my area of expertise. Therefore, the mentors I acquired were not directly in my work environment; instead they were through professional organizations outside of the Academy of Nutrition and Dietetics. These practice groups were disease-specific and one specific mentor named Cora I aspired to become and eventually I took her position. As my mentor, she advised me to continue to always stay involved and go to professional organization meetings so your voice can be heard and you will have a place at the decision-making table. These were valuable insights for me early on in my career because they allowed

me to meet other professionals within my area of clinical practice and to create a large network of peers and mentors.

Rose shared how, despite her not being able to afford a dietetic internship program directly after graduation from her undergraduate degree, the mentor she acquired through her work experience really helped her find her niche and eventually led to her completing a non-traditional independent internship opportunity at the hospital under the guidance of her mentor.

As described by Rose,

Since I couldn't start my dietetic internship due to financial hardships, I began working in a local hospital and the person who hired and trained me soon became one of the most influential women who shaped my career pathway. She hired me to run the diet office as a supervisor where I did the menu planning and was given the opportunity to work in the kitchen and gain some experience related to documentation and relief work as needed. She provided me the opportunities that allowed me to gain exposure to different areas and sparked my interests and passion for eventually being able to apply for a non-traditional independent supervised dietetic internship program at that hospital with my mentor.

Joan discussed how her journey towards becoming a dietitian was influenced by the mentors, whom she worked with and how they encouraged her, despite barriers that she was faced with regarding balancing her education, work and family responsibilities of raising four children and being a wife. As described by Joan,

When I was pursuing my master's degree I had several part-time jobs to make ends meet. One job was running the foodservice for the nuns at the school I was attending. I felt like I had acquired 15 mothers and grandmothers who were very supportive and were always interested in what I was doing in school. I did all of their shopping and planned their meals over the weekends so the chef would have everything set for the upcoming week. They were a really supportive community of educated women and were probably some of the oldest PhD women, who were the original teachers at that institution. I found them to be a very progressive group of educated women and they inspired me to follow my dreams and relate nutrition to issues of social justice and civil rights, which have shaped my own career interests.

These participants discussed how work experiences affected and shaped the career pathways that they chose to pursue in regard to the field of nutrition and dietetics.

These three major sub-themes are represented as the main elements in the Venn diagram in Figure 5.

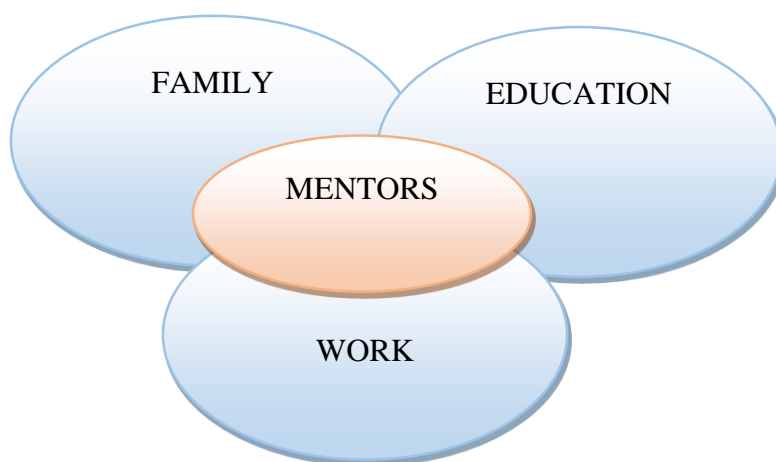


Figure 5. Mentors (family, education, and work).

This section, which focused on the theme of mentors, highlighted the importance of how the relationships with family, education, and work can influence the direction and career pathways chosen by these women and men in shaping their careers.

Career Pathways

As described by the Academy of Nutrition and Dietetics (2014), Registered Dietitian Nutritionists (RDNs) are food and nutrition experts who have met the following criteria to earn

the RD credential: (1) They must complete a minimum of a bachelor's degree at a U.S. regionally accredited university or college and course work accredited by the Accreditation Council for Education in Nutrition and Dietetics (ACEND[®]) of the Academy of Nutrition and Dietetics; (2) They need to have completed an ACEND[®]-accredited supervised practice program at a health-care facility, community agency, or a foodservice corporation or combined with undergraduate or graduate studies. Typically, a practice program will run six to 12 months in length; (3) They must have passed a national examination administered by the Commission on Dietetic Registration (CDR); and (4) Completed continuing professional educational requirements to maintain registration.

In addition to RDN credentialing, many states have regulatory laws for dietitians and nutrition practitioners. Frequently these state requirements are met through the same education and training required to become an RDN. Required college coursework in order to become a dietitian will include courses on a variety of subjects ranging from food and nutrition sciences, foodservice systems management, business, economics, computer science, culinary arts, sociology and communication to science courses such as biochemistry, physiology, microbiology, anatomy, and chemistry (AND, 2014).

In certain situations, there are individuals who already have a bachelor's degree that is not in dietetics and are interested in becoming a registered dietitian. In this situation they need to have the program director of a dietetics program accredited by ACEND evaluate the previous academic preparation and identify any the courses that must be completed at that school to meet the educational requirements for dietetic registration. It may be possible to complete the required dietetics coursework while enrolled in a graduate program. Once the required coursework is

completed, the individual will be eligible to apply to an ACEND[®]-accredited supervised practice program (AND, 2014).

As one can see, the pathway towards becoming a RDN has an established set of educational standards and requirements that need to be met, regardless of whether one already has a bachelor's degree or if one is deciding to initially pursue an undergraduate degree in nutrition and dietetics. Therefore, along the educational pathway there are a variety of opportunities where career influencers can be impactful; the participants for this study shared many personal stories that will be described.

Traditional Career Pathway

The importance of having an early mentor in one's educational training to become a dietitian showed much influence in the career pathways chosen by several women. Discussed are a few excerpts about how encouragement during one's educational pathway influenced the careers chosen by these dietitians. An example Betty gave related to how her professor, who was very management oriented, really sparked her interest in food and nutrition management. As discussed by Betty,

When I attended my undergraduate university, we had a lot of adjunct faculty for the clinical courses but the full-time faculty were very management oriented so the influence and direction of our educational training emphasized the aspects related to food and nutrition business management. She was very ahead for her time during the 1970s and discussed how a lot of dietitians remain focused solely on the clinical arena of dietetics, but management was really the wave of the future. She strongly influenced my training and interest in the business of food management and assisted me in developing my career pathway in that direction.

Another example was shared by Lisa, who came to the United States at 18 years of age alone, without any family, from Mexico, and she did not speak any English at the time. However, the high school program that she attended in Mexico had a partnership with a university in California, so she followed her dreams and decided to pursue her career. Lisa already shared how her mother, also a dietitian, was a definite career influencer. But, she also shared the influence that she encountered from the department chair of her undergraduate program and how she gave her the needed confidence to not give up on her dreams. As described by Lisa.

[I was] an 18-year-old, alone and unfamiliar with the language in a new country. The cost of phone calls was too much, so I did not call home very often at all. I often felt very alone and unsure if this was the right decision for me at the time. But, the program director (Dr. KS) of the University I was attending really was a true mentor and influencer for me, she told me how she saw potential in me. Throughout my undergraduate studies she assisted me in developing my confidence and her friendship allowed me to not give up. I will forever be indebted to the mentoring/friendship that I acquired from Dr. KS.

Another experience was shared by Anna, who was not originally on the pathway towards becoming a dietetics major. However, a dietitian who assisted her dad during his hospital experiences affected her decision to consider the field of dietetics. As described by Anna,

When I was in college I liked biology a lot and was thinking about being a biology teacher and didn't know about the field of dietetics. My dad had been in the hospital several times and was seen by dietitians, but I never knew one. It was my father who told me about a new program that was starting and it was nutrition. So, I said ok... and I went and checked it out and it was out of the biochemistry department, which attracted me because it was a science and it ended up being the perfect fit for my career choice.

The experiences gained by Beth during her curriculum and training were very influential for her. She discussed how they made an impact on keeping her interested in pursuing the field of dietetics. Beth stated,

I really enjoyed the curriculum for dietetics during my undergraduate and dietetic internship program. At first I wasn't sure if dietetics was the perfect fit for me. But, through the real-life experiences [community and food] courses, I was able to attain an actual context for what I was learning. I am an experiential learner so these opportunities were a good fit for me.

As similar experience was shared by Mary, who discussed how her genuine interest in health and nutrition from high school continued through college as she followed the traditional pathway towards becoming a registered dietitian. As shared by Mary,

I was always very active and healthy in high school, but when I got to college and did a career test I found that nutrition seemed to be a good fit for me. So, I decided to pursue this pathway based on the findings from the career guidance test. My pathway was pretty straightforward: after completing of my undergraduate degree I applied and was accepted into a dietetic internship program.

Betty also experienced influence of learning about nutrition as a career choice while in college.

I had never heard of a dietitian before college, but during my 1st year I was trying to figure out what major I wanted to be. I knew that I wanted to be something technical but not a hardcore science such as biology. So, when I learned about the major named nutritional science that sounded great. As I got into the major during my junior year there was a seminar course that really focused on what being a dietitian was all about and this really stuck out for me.

Betty discussed how this exposure to pathways related to nutrition and dietetics during her junior seminar course really solidified her decision that this was the career pathway she wanted to pursue. So, after completing her undergraduate education, she applied to and was accepted into a traditional hospital dietetic internship program.

Lynn was an African American woman who attended a traditional HBCU. Her pathway towards becoming a dietitian was traditional, but the influence of which dietetic internship programs she was able to apply for was determined based upon her undergraduate GPA and mandated by her department head. As described by Lynn,

After completing my undergraduate degree at a HBCU, there were only 2 internship programs that were operated by African Americans. My undergraduate class was a large class of 12-14 students. So, when our advisor was recommending to us which dietetic internship it was based upon your GPA. Those students with a 3.0 and above were allowed to apply to the White universities, but those with a basic 2.5 had to apply for the HBC options. In my opinion, it seemed like racism to me and gatekeeping of the profession by African Americans who were limiting their own potential and opportunities.

In the situation for Lynn, she was fortunate to have been accepted into one of the White university dietetic internship/master's degree programs, so her pathway was traditional. But, this gatekeeping procedure was something that she found disheartening and she has dedicated her career towards trying to overcome for those who were not considered "traditional" dietetics students.

These traditional career pathway tracks towards becoming a dietitian were influenced by a variety of factors. Even though several of the participants followed a traditional pathway, some of the experiences that they encountered shaped them into pursuing various directions in their own personal careers.

Non-traditional Career Pathway

The option of pursuing a degree from a non-traditional pathway also was an experience that several of the participants in this study completed. Some of the subjects already had careers in other disciplines but based on their interest and mentors they encountered along their career

pathways they were directed to the field of nutrition and dietetics. Here is an example shared by a male who already had a career as a high school biology teacher, but he was not satisfied and always had a strong interest in food and nutrition. He discussed how he kept running across nutrition in his course curriculums and found it to be very interesting. So, John decided to take a class at the state university in nutrition. Here is what John had to share about his educational experiences:

While I was at the university I developed a relationship with a woman who also became my advisor and she explained to me the options available for me to become a Registered Dietitian. She really influenced my decision and assisted me in creating a non-traditional program where I completed the additional undergraduate nutrition courses needed to qualify for a dietetic internship along with completing a PhD program in nutrition.

John shared how this was a turning point in his career, because once he became a dietitian, he was able to find a teaching position at a university, where he still remains, and has been able to work in higher education and have the opportunity to pursue his personal research interests related to Healthy Eating.

The non-traditional pathway as described by Joan was based on her deciding to return to school and pursue a career as a dietitian was influenced by a variety of factors. Joan had to balance the stress of returning to school as an older adult, while also being a parent and mother of four small children at the time. But, it was something that Joan aspired to attain and through support and perseverance she was able to attain her goals. As discussed by Joan,

After completing my bachelor's degree requirements as a returning adult with 2 years of previous college credit, I applied to an internship/medical school program. During my 1st set of mid-terms I think I failed each of them. I could not believe that anyone would expect me to know that. But, during the same time I was also completing my master's degree with the dietetic internship. There were just 4 students in my program and 3 of us were over the age of 35. But, they told us that they never saw a group study so hard, but actually we were a group of non-traditional students who knew that this was our chance

and we didn't want to not give it our all. However, my advisors realized the stress of balancing school and family responsibilities was overwhelming for me. So, they allowed me to take 2 versus 3 courses per semester while also doing my internship.

Another example related to having an informal mentoring relationship assisted Wendy in determining that she needed to make a change in her professional career and follow her dreams. Wendy already had a successful career and owned her own court reporting business, but wanted to determine how she could try and satisfy her personal passion with the career that she had already embarked upon. As discussed by Wendy,

One of my most influential mentors actually was not from the food and nutrition field. There was an attorney that I had worked with for many years and who was my dearest friend. He is the one that told me that I should run for the school board and become involved in the nutrition aspect. He drove me down that path and I continued to follow my passions and pursue the BS, MNSW in Nutrition and Dietetics and become a dietitian.

This informal relationship described by Wendy was based upon a personal relationship and her mentor's ability to recognize that she was not satisfied in her current career choice. Wendy discussed how her friend and mentor assisted her in further developing her expertise, skills, and understanding about public policy and bring along my food and nutrition skills to get involved on the whole spectrum. This informal mentoring relationship has assisted her in being able to find her niche, which is focused on Public Policy initiatives that are needed by her state and national Academy of Nutrition and Dietetics as an organization.

Another experience of a non-traditional pathway towards becoming a RDN was shared by Rose, who had been working as a diet office supervisor after graduating from her undergraduate degree program. Due to financial restraints she did not have the money to apply for a graduate and/or dietetics internship program. But, she was able to uniquely adapt her

situation so it worked out in her favor. Through the support and mentoring of her manager of the hospital foodservice program, she was able to approach the Academy of Nutrition and Dietetics and inquire about creating her own unique 3-year work plan at the hospital where she was employed as a diet office supervisor.

The non-traditional pathway towards a career in dietetics for Rose was created based on her desire to become a RDN, but without the financial resources she had to think outside of the box and along with her mentor she was able to create a unique 3-year plan that allowed her to “teach” herself what she would have needed to acquire through traditional dietetics internship course curricula. Here is an example of the educational experience as described by Rose:

First of all, the financial challenge was definitely a barrier. If possible, I would have liked to attend one of the leading internship programs and I had the list of those that I wanted to attend. However, after completing my undergraduate degree I did not want to ask my parents for another year of financial support, given that they had just finished sending 2 daughters together through 8 years of college. They were very simple folks and I couldn't picture how I could ask them to support me for any additional education.

But, given her passion for nutrition and the support of her manager, Rose was able to coordinate her position in the foodservice department, and turn an unfortunate financial hardship into a unique and satisfying educational experience for herself. This model of creating your own program along with a mentor is a very interesting model that still exists and is being used in some dietetic internship satellite programs.

Another experience occurred for Cathy, who initially started an undergraduate degree in nutrition, but ended up switching and obtaining a degree in elementary education. However, based on certain influential events, she decided to return to school again and obtain another

undergraduate degree in dietetics in order to pursue a dietetics internship program. As related by Cathy,

After completing my undergraduate degree in elementary education, I decided that I didn't want to teach, which my parents were not too excited about. However, I chose to return back to school and attain a B.S. in Nutrition and Dietetics with a minor in literature. Afterwards, I applied and was accepted into a combined MPH/Dietetic Internship program where I started my pathway towards becoming a registered dietitian.

Even though the pathway for Cathy was not streamlined in the beginning, she has discussed how her satisfaction with her career choice has met her personal and professional needs. As a current dietitian she is able to use her elementary education background to assist her in providing quality nutrition educational programs and initiatives to various client population groups.

Nancy also described having the option of attaining a dietetics degree as a returning student with previous educational experiences. She had already completed her doctorate in nutritional sciences but she eventually realized that research was not her area of genuine interest, so she did some investigating and found an option that was non-traditional but worked for her needs. As discussed by Nancy,

So, I talked to one of the advisors at my current institution and she told me the nutritional courses I took in graduate school would not count towards satisfying my undergraduate core requirements to apply for a dietetic internship. So, I looked around at various schools and found a graduate degree program, which was insane because I already had a doctorate degree and another master's degree, but it allowed me to satisfy my undergraduate courses and if I only needed 3 extra to get a master's degree I decided that I might as well do it... why not?

Rose mentioned how she never initially thought that she was going to go back to school. But she was very glad that she did not give up and pursued it. In her current career as a registered dietitian, Rose is more fulfilled than in her previous career in a research laboratory.

These experiences faced by the participants highlighted several factors which affected their career pathway towards becoming a registered dietitian. It was found that through the encouragement of mentors and/or supporters they were able to achieve their goal of completing the required training to become RDN's. The following section will discuss successes and barriers and how they related to career transformations which occurred for many participants.

Barriers and Successes Related to Career Transformations

As the women and men interviewed discussed, there was a wide variety of barriers and successes that they encountered along their own career pathways. Many of these situations caused them to re-evaluate the direction of their own career pathway and determine if they needed to take a different direction. Some of these personal stories will be discussed and it will be evident how the influence of strong personal feelings was a factor in causing how a career transformation occurred. Kroth and Boverie (2009) indicated that personal discovery is for individuals to gain an understanding for what they are passionate about. In regards to careers, it means learning what one loves to do, which may adapt and change over time but can be related to the process of career transformations.

Barriers Associated with Career Transformations

Here is an example of how one Hispanic female dietitian, Lisa, who was disregarded by her food manufacturing company as a second tier person because she was from a foreign country and lacked confidence in her ability to negotiate for what she should have been provided, led to her undergoing a career transformation. Lisa had the credentials of being an MBA, RDN and bilingual employee. With these skills she performed what her employer needed at the time,

which was how to offer ethnic (Hispanic) products and educational materials that would be appropriate for the Hispanic target audience, but even though she was valuable she was always treated as a second tier employee in comparison to her colleagues who were performing similar job tasks to hers. Lisa discussed this situation:

When I was at a food manufacturing company for >10 years, I never moved up the ladder... I was basically at the same salary level as a secretary due to my lack of confidence in negotiating when I started for a fair salary. I kept asking for a raise, but I was always disregarded. My title was a Foodservice Specialist, not even a manager; it was horrible... because in comparison to everyone else who was doing similar job tasks as me, I found it very disappointing. The last straw for me was when we were moving offices to a different tower and I said, "How come I don't have a wood desk like everyone else, I have a plastic formica desk. Can I move into one of those offices with the wooden desk?" I was told that it was based off your level and ... I was considered the same level as our secretary.

Lisa shared additional information about how people who had similar positions were being paid \$60-70,000, whereas she was being paid \$30,000 a year. At that time, Lisa felt like it was her own fault due to her lack of confidence in her skills to negotiate fairly for herself, so she ended up quitting her position and starting her own business. However, this negative experience ended up turning into a wonderful opportunity. At this point it has been 15 years since Lisa started her own Private Consultant business; she said, "I am proud every day of what I have been able to accomplish and overcome on my own as a foreigner who came to this country and overcome injustices that I experienced in my professional career."

A similar experience related to discriminatory practices in a work setting caused a career transformation to occur for Lynn, who is an African American. As discussed by Lynn,

As a clinical dietitian, every time I walked into the room to give a diet instruction they thought I was the tray person. After trying to deal with these personal insults against me as a professional dietitian, I knew that I needed to quit and make a career change. For me, this was an eye-opening career transformation ... I knew I could not continue to

work in a hospital, because they never wanted to respect me as a therapeutic dietitian. I would always be considered the tray girl and if I wanted to give diet instruction, the men would talk down to me as if I was not there.

This experience shared by Lynn highlighted the effects of discrimination she felt as an African American dietitian; despite her knowledge about what was the appropriate therapeutic diet needed by these inpatients, Lynn did not believe that this would provide the career satisfaction that she needed. As a result, she changed her career direction and chose to pursue a career in the field of community nutrition, where she enjoyed a long and satisfying career in the Extension Program in one of the southern United States.

Another example was provided by Kevin, a male dietitian who felt that his initial experiences within the clinical arena of dietetics were not very welcoming to him as a male dietitian. But, in the area where he now practices (Nutrition Informatics) he has been able to build upon some of the skills that he developed through his volunteer leadership positions at the Academy of Nutrition and Dietetics. Kevin shared his own career transformation that he experienced:

One of my weaknesses that I experienced early in my career was that of being a clinical dietitian. I never had the confidence in knowing the content of what I wanted to recommend and being able to debate my ideas with an MD and state... this is what we have to do for the overall well-being of this patient. I guess, that is why I never liked clinical dietetics. For myself I enjoyed my outside interests, which were related to volunteer positions at the district, state and eventually the Academy of Nutrition and Dietetics.

For Kevin, he found that through his volunteer and leadership experiences, he was able to build up his skills and become a good facilitator and listener of others. He said,

Through these various volunteer positions I gained the confidence to leave the area of clinical dietetics and embark on my passion and current position within the field of

Nutrition Informatics, where I act as a spokesperson and facilitator of how to utilize new nutrition computer programs that exist with dietitians across the country.

Another example was discussed by an African American female dietitian who felt that she encountered barriers in the workplace based on her gender, race, and credentials of being a PhD, RDN in the clinical staffing at a university hospital. Here is the situation as described by Nancy:

So, I wrote an order and this doctor had a problem with what I wrote and I don't think he had my extension and did an overhead page....and I am not used to hearing my name over the intercom as Dr. Nancy... so I had to stop and think, "Hey, wait a minute... that is me..." So I called the extension back and they told me that the doctor wanted to see me right away. So, I went upstairs and I don't think he expected to see me... first of all I was a woman, secondly I was African American and his response was... oh... you are Dr. Nancy... I don't know what he expected, I have no idea, but it was just the way he responded to say, "Oh, you are Dr. Nancy" as if to say this could not possibly be right.

Nancy shared how this experience and culmination of experiences similar to this made her decide that she needed to go a different direction with her career, resulting in a career transformation. As a result, she decided to open a private consultant practice, where she loves being able to leave the stereotypes that existed in the clinical hospital setting and move on in a new career journey.

Diversity as a Barrier

As discussed by Cook et al. (2005), career development for women often occurs within a broad context of influencers related to gender and race/ethnicity. From early childhood, women's viewpoints on themselves and their possibilities of future successes are based upon the ongoing interactions that occur within their immediate (microsystems) environments and the broader sociocultural norms (macrosystems) that exist (Cook et al., 2005).

The concept of social perceptions and unspoken stereotypes associated with certain groups does exist and can impact one's personal expectations that they can be successful (Eagly & Chin, 2010). According to the Commission on Dietetic Registration (2016) the current statistics indicated that there are 94,809 RDNs within the United States. Of this reported registry statistics of RDNs, 93.84% are female, 3.82% are male and 2.33% are non-reported. For the ethnicity breakdown here are the current findings: 76,690 are White; 3,780 are Asian/Indian; 3,030 are Hispanic/Latino; and 2,490 are African American.

Based on these findings, it appears that there still is room for improvement in the diversity of the dietetics profession. As previously discussed by the Commission on Dietetic Registration, "While no effort has been made in the past to restrict other racial groups, or males, from the profession, little has been done to make the field more attractive to them or to recruit them" (Kobel, 1997). The following discussions will share how participants felt diversity affected them in their own career pathways in the field of nutrition and dietetics.

One story shared by an African American woman, Nancy, discussed how she decided to pursue the field of nutrition and dietetics from a non-traditional standpoint. It highlights a few examples of barriers she faced due to her gender and race. She discussed the concept of the glass ceiling effect and how she experienced challenges in the clinical arena because the physicians were not used to seeing a non-white dietitian, who also held a doctoral degree, on the hospital floors. Here are a few examples of her experiences as shared by Nancy:

Some challenges I encountered were related to not fitting in as an older non-traditional aged dietetic intern/graduate student. The students knew that I already had a PhD in Nutrition and I was also one of the few African American students in the program. So, when working on projects and assignments it was often an awkward situation that I faced also when on the hospital floors the doctors did not expect to see a student signing their

note as PhD, dietetic intern and this often did not go over well... when I was making my recommendations to them.

However, despite these prejudices that Nancy felt based on her age and ethnicity she did not give up and continued to persevere, and through the support of the dietitians at the hospital and her close family friend, she was able to complete the internship/graduate program and became a dietitian. She shared how she is enjoying her career as a private consultant to several hospitals and as an owner of her own private practice.

Another example was discussed by Lynn that related to her being a female and African American during the 1960s. She shared how she did not give up despite gender and race injustices that she faced and continued to pursue her dream of becoming a RDN. Lynn said,

I went to a small HBCU and in my biology course there were only 5 girls... and all of us kept getting 100s on the exams. So, our professor got concerned and wanted to check if we were cheating on his biology tests. He did not check the men in class, only the girls and when he asked what we wanted to do with our careers he said... I am married to a woman with a doctorate degree and she would only give me 1 baby. Men don't want woman who are gonna be smart and do all of this stuff. You need to go to the economics department and talk to this woman about a new major being offered and it should help you do something worthwhile for your husbands when you are home and having babies.

As discussed by Whitmarsh and Wentworth (2012), women are often discouraged from choosing science and technology careers that are traditionally dominated by men for a variety of psychosocial factors. Some of the reasons that relate to women not being more prevalent within these fields can be traced to the lack of female role models, limited career information, and concerns about juggling their careers and family, sex-role stereotypes and limited psychosocial support (Bertz, 1994). As discussed in the statement shared above with Lynn, she was faced with sex-stereotypes and was being discouraged from a science career from her biology professor. However, Lynn did not give up and investigated the option of another career

opportunity in nutrition and dietetics, which was being offered as a new major at her university.

Here is an excerpt as shared by Lynn:

Well... I went over there and I met one of the most influential woman who really helped shape my career... She had a PhD in Nutrition and wasn't opposed to women going ahead and earning doctorate degrees. She changed my whole viewpoint about higher education and the opportunities that would be available to me in my career as a dietitian, where I eventually went on to earn my doctorate degree and still continue to have a long and satisfying career in nutrition and dietetics.

In regard to gender as a career influencer, a few different perspectives were shared about whether or not gender plays a role in the profession of dietetics. Here is one example shared by Kevin:

Ultimately, being a male has helped me in my profession as being recognized and thought of when others were trying to determine who to recommend for various volunteer capacities. If I had been a more non-descript Caucasian-Female, I may not have been remembered or noticed as much.

Another example from a female dietitian offered her observations of how males are viewed in the female-dominated dietetics profession. Here is Cathy's viewpoint:

Obviously there are fewer men than women in our profession, but those that I have had the opportunity to work with have been very top-notch and professional. They are almost like rock stars in our profession, and often seen as the token male. I see for them the challenges of having to explain why they have chosen to be in the field of dietetics. Sometimes, going into a female-dominated profession can be intimidating, but I believe men can bring a whole different dynamic to our profession, which can be beneficial for the future.

From the viewpoint of another male subject, John described how he noticed the initial interactions that occurred between genders were different and this practice should be avoided and we should all aim to treat one another equally. Here is the situation as noted by John:

I have noticed through my own career interactions that males tend to shake hands with males, but males do not tend to shake hands with females; rather, they say hi or greet

them verbally. As a male I try to make an effort to shake hands with everybody and I believe that there does exist a division between how a male interacts with a male versus a female. In our profession I believe that we should continue to work on treating everyone the same regardless of sex, ethnic background, sexual preference, etc. ... because in order to improve the diversity of our profession and of our members we need to appreciate everyone's gifts and make them feel welcome and able to contribute towards the future growth and development of our profession.

The barriers faced by women in regard to gender continue to be faced and methods to overcome these issues need to be highlighted. As described by Caren, an area that of nutrition where men tend to dominate is within the foodservice arena. She shared her own personal experiences and how she felt her gender within the field of nutrition and dietetics was a barrier that she needed to overcome if she wanted to be competitive within the foodservice arena. As discussed by Caren:

There are many barriers if you are in the foodservice area of dietetics, because many of the managers are guys. I finally have encountered a 2nd female manager in my area, but I have been the only female for a number of years and guys...in order to play the game competitively with them you need to be one of them and play the game.... so I found that in order for me to be effective and be taken seriously I needed to get a 2nd master's in business management. I had applied for a number of positions within my organization, but because I was a dietitian with a master's in nutrition, I often felt button-holed and overlooked for positions that I had applied for and thought that I could do....

A similar viewpoint was shared by Kelly, who worked in a for-profit business industry and saw the need to remain relevant and competitive with her peers was dependent on her expanding her educational knowledge, so she chose to return to school and earn her MBA. Kelly stated,

I don't think we do a good enough job of connecting dietitians on ROI, return on investment, for what we do. A dietitian is now expected to have an MBA, and all of the business background, but I find often in RDs that come out of the program they don't connect and see everything in detail based on what research says and understanding and seeing how this fits into the big picture. The healthcare industry is being crunched financially and in a capitalist country money makes the world turn; they need to really

think about that in programs and help future dietitians ... fit into the world, because if we don't we are not going to be relevant.

The personal experiences shared in this section by several participants highlighted how they have been faced with diversity barriers related to their gender and ethnicity. However, we do not want those who are drawn to choosing a career within the profession of dietetics to be limited based on stereotypes that exist. As discussed by Cook et. al. (2005), the values, norms and customs of society implicitly provide messages about appropriate and inappropriate career paths that a woman or man should pursue. The macrosystem embodies values of White male privilege, and gender/ethnicity stereotypes that often overlap into the typing of occupational and career choices that individuals are drawn towards pursuing.

Successes Associated with Career Transformations

As discussed in the previous section, challenges faced by participants often led to them having a career transformation, where they determined that they needed to change the direction that their career was heading. However, several participants also shared personal experiences of how successes that they encountered in their careers also led them to change the direction of their career pathway.

As stated previously, Lynn had determined that she was not going to work as a therapeutic hospital dietitian, but she needed to find a new direction for her career pathway. She shared how she was able to use the previous barriers that she faced as an African American female dietitian to her advantage, without even realizing it. Here is the experience as shared by Lynn,

When I moved to a different southern state, I was looking for a new career pathway away from the clinical dietetics realm. That is when I encountered Dr. Jan, who was white and

Jewish and had gone through a lot of stuff... someone had stolen her dissertation and she had to start all over. The way we met was randomly at a district meeting, and she asked me what did I want to with my career... I told her how I had just moved and was looking for a fresh new start away from clinical dietetics... because I am not going to work in a hospital where you have to do and say what they tell you to do... and you are not able to speak for yourself. She smiled and the meeting ended and we parted our separate ways.

However, the random relationship and connection that Lynn shared with Dr. Jan turned into a significant event and led to a long-lasting career transformation. Two weeks later after her initial meeting with Dr. Jan, Lynn received a phone call from the facility where she worked and was informed that she had recommended that Lynn be offered a position there. This was the beginning of Lynn's career spanning >40 years in the Cooperative Extension Program, and highlights how a successful career change can occur as a result of inequalities that both Lynn and Dr. Jan faced but which served as a valuable connection that they shared with one another.

Another similar example was shared by Beth, who had initially started off as a clinical dietitian, but based on her own personal interests related to community she made a career change and balanced her decision to return to school and earn her master's degree while holding several part-time positions. As shared by Beth,

My first job as a clinical dietitian paid the bills, but I really didn't like it, so an opportunity arose where I could work in a community clinic during the evenings. During my experience I soon realized that I didn't have the community skills needed to work in a cooperative extension clinic, but I knew that was where I wanted to pursue my career direction. So, I decided to return back to school and get my master's degree in community nutrition and public health, which was difficult but I knew that was what I wanted to do.

During her time as a returning student, Beth shared how her ability to find part-time positions was often influenced by her perseverance and determination for what she wanted to accomplish. Given that she was a Hispanic dietitian, her diversity often served as a benefit.

Beth mentioned how she often was provided with opportunities where it was important to have the cultural insight of a Hispanic dietitian. This led to her career pathway involvement, which was very community nutrition and public health focused and involved with numerous populations (from babies to the elderly), public and private companies, etc.

Andrea shared her personal story of how her involvement with a large nutrition management company offered her the opportunity to routinely change jobs every several years and it opened up the possibility to new advancements and opportunities that were not only limited to being a clinical dietitian. As discussed by Andrea,

I worked with the same large nutrition company and they would move me around to different locations as needed. It was a nice deal, because I didn't lose my seniority but got the opportunity to move along with having a strong management emphasis within the company. It broke me out of the mindset that clinical was the only focus of being an RD and opened up my eyes to the management aspects that could also be performed.

Another success associated with a career change was discussed by Wendy. As previously mentioned, she had decided to return to school and become a dietitian after already having a political science degree and owning a successful court reporting business. But, some of her early dietetic positions actually led to her finding her own personal niche. Here is the experience as shared by Wendy,

During my 1st few jobs as a dietitian I was working in clinics and at hospitals, but I knew that this was not the right fit for me. Based upon who I was I knew that I wanted to focus more on prevention and not acute care nutrition (clinical based). So, when the opportunity opened up for me to become involved as a leader within the professional association for Public Policy I thought why not? Through my involvement as a leader within the Academy of Nutrition and Dietetics, I have been able to create a niche market where I am able to provide legislative and public policy-focused discussions to a wide variety of audiences, specifically dietitians who need to become aware of how their professional licensure is affected by what happens in public policy initiatives.

Wendy's career pathway evolved based upon her personal strengths related to politics and she has been able to blend her nutritional knowledge to become a strong advocate and recognized speaker/expert on these issues for dietitians. Wendy has taken her own career and transformed it into a successful pathway that satisfies her personal and professional needs. Based on the personal stories shared by participants, it appeared that certain challenges actually served as additional motivation and led to successful career transformations. A previously shared example by Lisa related to how she felt discriminated against based on ethnicity and this led to her quitting her position and opening up her own private consultant business. As described by Lisa,

When I decided to open up my own private consultant business, I was determined to be optimistic, improve my confidence and also to do my due diligence, and I spent countless hours researching how to make my company something that I found personally satisfying and needed by others in my culture. That led to the eventual development of my company focused on Hispanic nutrition communications, where I have developed recipes and given talks on anything related to the health aspects and beneficial aspects of being culturally sensitive to other ethnic populations and their eating habits.

As a result of Lisa's determination and new career transformation to focus on the culturally needed food offerings of key food industries, she has been able to acquire partnerships with leading food manufacturing companies such as Coca Cola, Kellogg's, Aldi's, Walmart, the Avocado Board, and the Strawberry Commission. As a result, Lisa was able to turn a challenging setback in her personal career into a satisfying career transformation where she has built upon the injustices that she felt because of her culture and turned that into a business area where she can create and advocate appropriate nutrition-related materials for other disadvantaged minority population groups.

Rose shared another example of a successful career transformation:

Prior to my current position I was working in a nursing home foodservice management position. I enjoyed working with the patients, but what I didn't like was the financial management, the drudgery of quality assessment documentation and the clerical responsibilities. I knew that I needed something more related to strategic planning and leadership. So, I started reading...and I came across the book "What Color is Your Parachute?" that allowed me to look at my interests in people, things, and data.

As a result of her dissatisfaction with her current position and the influence of the book, Rose talked with her husband. Since her family and children were also very important, Rose could not make a career change without the family support needed in case she needed to relocate. Luckily for her, she was able to find a position that seemed like a perfect fit and it was near where her husband's family had vacationed for the past 25 years. Rose applied and received the position as Director of the Dietetic Internship program, where she has worked for the last 17 years. This career transformation resulted in a positive outcome that led to a long and satisfying career.

This section, which was focused on the theme of barriers and successes, examined several participants' influential experiences. These personal stories described some of the key turning points that caused career transformation to occur for each of them. As Ibarra (2003) remarked, the transformations that often occur can lead to the process of self-discovery. This can allow individuals to immerse themselves in new working identities (experiences, projects, relationships) and allow them to rethink the stories of their own lives. Allowing individuals to make needed changes and to gain a better control of one's self leads to better personal and career satisfaction (Kroth & Boverie, 2009).

Aside from these potential career influencers affecting the career pathways chosen by the participants, certain personality styles were identified among some career and leadership pathways. A section on the emergent theme related to personality styles follows.

Personality Styles on Career Pathways

In this analysis section, no personality scales or measurement assessments were used. Some of the classification criteria as described by the Myers-Briggs Type Indicator and Holland's Personality Styles were used to organize the self-reported personalities that the participants used to describe themselves. It is important to emphasize that the self-reported classifications of personality styles were presented by the participants during the interviews; no measurement tools were used. The classification and organization of the participants' personality styles were interpreted through the researcher's own personal understanding of the Myers-Briggs and Holland's Personality Style criteria.

The MBTI (Myers-Briggs Type Indicator) is based upon Jung's theory of the preferred ways in which people perceive and process information and make decisions. Through the interpretation of the MBTI, information can be obtained about two general issues relevant to career such as type of work style that is preferred, and the manner in which an individual is able to make decisions (Myers & McCaulley, 1985). The one which will be focused on and which was self-reported by the participants was in regard to "life attitude," which is categorized in the MBTI as either extravert or introvert.

One of the main principles related to Holland's Person-Environment theory is that the selection of a vocation or academic major is an expression of one's personality (Holland, 1973,

1997). The choice of one's occupation can be seen as being an expressive act related to one's own levels of motivation, knowledge, personality and ability. Career choices that are selected by individuals can be identified as being a way of life for persons, an environment rather than just an isolated set of work functions or skills (Holland, 1973, 1997; Smart et al., 2000).

The information shown in the following charts and figures are not meant to be interpreted as results from any measurement tool. It is only being used to provide an organized manner to report how the participants described their own personality styles and characteristics. The data used for this classification was obtained through narrative analysis and personal self-assessments that the participants shared about their own personality styles, and correlations were made in relation to the broad sense of how certain identifiable similarities were found among career pathways and leadership experiences of these selected participants.

A summary with a self-reported breakdown for the personality styles of participants is presented in Table 3. The distribution of Registered Dietitians' self-reported personality styles is presented in the bar chart in Figure 6. The themes of personality traits that emerged based on the shared personalities were evident among certain dietitians and the type of career specialties and leadership positions that they chose to pursue. It was also noted that certain personality traits were exhibited as dietitians advanced along their own career pathways. As these women and men discussed their own personality traits it was interesting to note a great similarity among participants. Of course, differences did exist among the participants and they all had their own unique qualities, but a consistent pattern was seen among dietitians who are leaders and how they applied these skills sets to achieve success in their own career pathways.

Table 3
Participants' Personality Styles

Legend: E-Extravert, I-Introvert, R-Realistic, I-Investigative, A-Artistic, S-Social, E-Enterprising, C-Conventional

ID	E	I	R	I	A	S	E	C
Lynn	X					X	X	
Lisa	X				X	X	X	
Wendy	X				X	X	X	
Gloria	X				X	X	X	X
Sarah	X				X	X		X
Ellen	X			X	X	X	X	X
Beth		X		X		X		X
John		X		X		X		X
Andrea		X	X	X		X	X	X
Kelly		X		X		X	X	X
Joan		X		X	X	X		X
Caren		X		X		X		X
Anna		X		X	X	X		X
Nancy		X		X		X		X
Kevin		X		X		X	X	X
Pam		X		X		X	X	
Mary		X		X		X		X
Rose		X		X		X	X	X
Cathy		X	X	X		X		X
Betty		X		X		X		X
Total=20	6	14	2	15	7	20	10	16

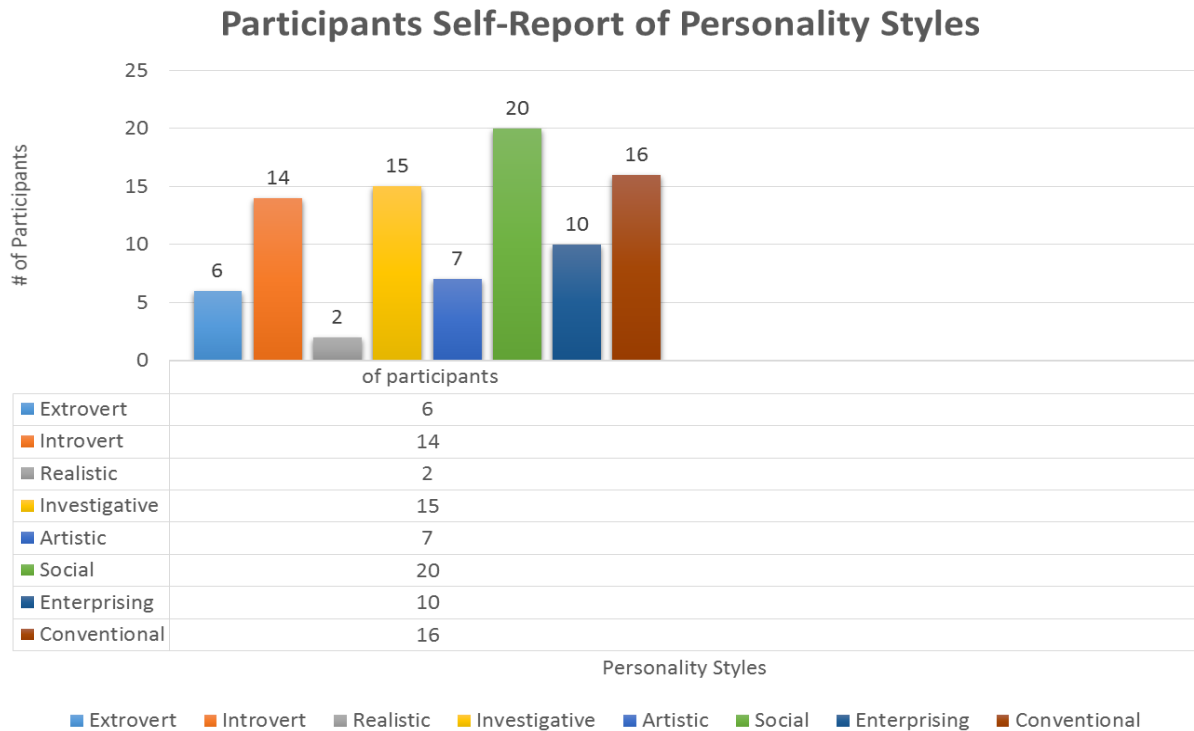


Figure 6. Participants' self-report of personality styles.

By using the Meyers-Briggs information as a comparison tool to organize the information, I observed that there were general issues relevant to career, such as preferred type of work style, and the manner in which an individual makes decisions (Myers & McCaulley, 1985). In this analysis section I will focus on what participants called “life attitude,” which is categorized in the MBTI as either extrovert or introvert.

The personality trait that was the most consistent across the large majority of participants was self-identification as an introvert. Of the 20 participants, 14 self-reported as being an introvert, while six self-reported as being an extrovert. By identifying oneself as an introvert this was based on their own personal preference but given the nature of our profession and leadership

roles, these individuals often adapted their personalities so they appeared to be extraverts, when in reality they truly considered and identified themselves as being introverts by nature.

Based on the research analysis findings, the majority of subjects self-reported as being introverts (70%) with the remaining as extraverts (30%). Among the various Holland's personality styles, 100% of subjects reported as being social/helpers, 80% as conventional/organizers, 75% as investigative/thinkers, 50% as enterprising/persuaders, 35% as artistic/creators and 10% as realistic/doers. Based on the Holland Code, it is encouraging that 100% of the participants self-reported as being Social/Helpers because the career possibility of a clinical dietitian falls into this career group.

Extravert

Of the 6 participants who self-reported themselves as being an extravert, 5 were also similar in their self-report as being artistic and social. Here are a few excerpts based on the interviews which were conducted with these participants. As discussed by Lisa,

Well, I am definitely caring and wanting to help others, with my caring personality. Also, I am a people person, I need to work with people. I am always helping others. I would consider myself an extravert, people-oriented, laid back about a lot of things. I don't get stressed out by things too much, but I am not one of those people that if I don't see black I will try to see a different color. I always try to use my traits to my best potential.

In addition to the traits as described above, Lisa also self-reported as being enterprising, which aligns perfectly with her statement:

Some may think that I am always talking or whatever... but I believe that allows me to connect with people more and I make good friends with people because I make the time to be with them and talk with them. Also, I do that same things with my colleagues,

because we are here to help each other and that is something that will make our profession stronger and I believe is the trait of a leader.

Another participant who self-reported as being an extravert and artistic, social, enterprising and conventional was Wendy, who shared,

I have been told that I have a strong personality and that I am not shy...but I believe that is important to have as a consultant, because if you are easily manipulated how can you influence your clients? Some other characteristics are that I am a people person, organized and a huge-multi-tasker, because the more things that I can do the happier I am.

A similar personality style was self-reported by Sarah, who by nature of her professional position needs to be social, artistic, and enterprising and exhibit extravert qualities. Sarah said,

In my current role as the dietetic internship director, I find that my social skills are imperative to being successful in acquiring partnerships and site locations for our dietetic interns. Personally, I enjoy the social aspect of my job where I am able to meet with and learn about differing opportunities and how our dietetic interns could benefit from site placement at that location. By nature, I have always been someone who enjoys engaging in social functions, creating new and artistic ways of viewing the big picture, and also just mingling and talking with others is the part of my job that I truly do find personal satisfaction.

Gloria, who has held numerous leadership positions, including President of the Academy of Nutrition and Dietetics, shared how she would self-report herself as being an extravert.

Well, I am definitely an extravert, I like details but as long as they are related to the big picture. I am not interested in pondering on small minute details; I am a big-picture person. I have no problem looking down the road towards the future and where I can see myself making a contribution. I believe that my skills of being assertive, social, entrepreneurial, have been a good match for myself as a practitioner and leader for the profession of nutrition and dietetics.

As described by Sarah and Gloria, it makes sense that they self-reported these personality traits, because based on the career pathways that they have chosen, they both serve in very people-oriented areas of the dietetics profession. They have each held key leadership roles

within the Academy of Nutrition and Dietetics and serve as private practice consultants where they need to be actively recruiting and engaging with their clients on a routine basis.

Another participant, Lynn, self-reported herself as an extravert, but her personality traits were somewhat different: she was categorized as being social and enterprising. Here is a reflection as shared by Lynn,

I am a very passionate, honest, and open-person. I love people and will do anything I can do help others. But, if you ever double cross me I have to really work at restoring relationships. I go out of my way to help and have the drive to reach my goals... I rose from being a specialist of the Family and Consumer Sciences Program for the Cooperative Extension Program to becoming the 1st African American Assistant Director in the southern United States.

This excerpt as described by Lynn highlights her passion for working with others and how she exhibited the extravert people skills needed to oversee the Cooperative Extension Program for one of the larger southern United States. In addition, she has the willingness to overcome barriers faced by her ethnicity to accomplish a career opportunity that was never held by any African American previously.

As one can see several participants strongly exhibited extravert qualities. However, this was the smallest self-reported group in comparison to being considered an introvert. The next section will share some of the personal stories of participants who self-reported themselves as being introverted.

Introvert

In comparison, the majority of participants were self-reported as being introverts. Along with this assessment, many also indicated that they had personality traits of being investigative/thinker, social/helper, and conventional/organizer.

Here is a reflection as discussed by Rose,

I consider myself to be an introvert, a thinker, which aligns itself to the personality of someone who is an author and educator. I am more likely to gather information and write it down rather than to sit down with someone and talk about it. As an educator I love updating all of the course content and I get very methodical when doing it. So, I guess being methodical is another trait that I possess. In regards to my type of leadership, I always enjoyed the strategic planning aspects which related to my own career interests.

The career pathway chosen by Rose seems to align perfectly with the personality traits that she possesses. She has a strong interest in the field of nutrition and in being able to inform and train the future dietitians of our profession. Rose has published several textbooks and acted as an influencer of many students over the years as the Director of a Dietetic Internship Program.

Cathy's professional outlook on the field of dietetics was described as being focused on contemplating that she is doing something good for the common good of all. As described by Cathy,

I would definitely self-classify myself as being an introvert. Many people identify me as being a perfectionist, which I believe is consistent with many people within our profession of nutrition and dietetics. Ethical is another way that I would describe myself. My lifestyle and mantra is based on practicing what we preach. So, I enjoy being investigative and doing my due diligence before making a decision. Also, engaging in a lifestyle that mirrors what I ethically value is important to me. By being healthy and active, this allows me to closely align with the personal and professional choices that I strongly believe in.

Pam also identified herself as an introvert and someone who enjoys having time to reflect and think about things before acting. Rose's comments, too, illustrated her need for "alone time":

Well... in many ways I consider myself to be a typical first born, I thrive on affirmation. I work a lot and I don't have a lot of outside hobbies. I definitely consider myself to be an introvert, but even though people don't typically identify me as being that... a key thing I believe is that an introvert draws energy from herself and being alone and needs time to be alone because she/he is often drained by other people, whereas an extravert

draws energy from others and doesn't like to be alone. In order for me to be effective as a leader in my volunteer or work situation I know that I need to have a balance and allow time for myself to reflect, and one of the best methods for me is to read the newspaper daily and keep current on what is happening in the world around us in today's ever-changing landscape.

Rose described herself as an introvert, but she also was identified as being an investigative/thinker, social/helper, and enterprising/persuader. Her personality traits align with the categorization of someone who prefers to observe, learn, analyze, and evaluate the problem before acting. Also, her qualities such as being very organized and laying out plans to accomplish goals assist her in being able to persuade others. These qualities seem to assist her effectively in her role as a university faculty member and healthcare consultant.

Anna shared a personal self-assessment and identified herself as being an introvert, which has served her well in her professional career pathway. Anna said,

I think I am loyal both to friends and to doing something that I said I would do, sometimes even if I am overextended. I try to make a difference...I am more introverted; I don't like big social gatherings but I love small ones.

A similar self-assessment was provided by Kelly, who reported herself as being an introvert and someone who values the importance of analyzing the next steps before acting.

Here is an excerpt as discussed by Kelly,

I like to be research based and find out what is being said, which is a big part of my personality. Also, I would say that I am caring and focused on having a purpose. In my new role at a business company, I want to make sure that I have a definite plan and I wake up each morning with a purpose and a task to have for the day to try and accomplish.

A similar personality style was described by Mary, who serves as the department chair and advisor to numerous undergraduate students. In her position, she described how she has

found that her role and current position is the perfect fit for her at this point in her career pathway. As discussed by Mary,

I would self-report myself as being an introvert and someone who prefers to plan and complete things in advance. I do not like to have things sprung on me last minute. I believe that I am pretty adaptable, but I always strive to remain organized and well-planned. My personality is that of being open-minded and non-judgmental of others, which I believe is a good fit for someone within the field of nutrition.

Betty also expressed herself as being an introvert in nature,

I definitely spend a lot of time thinking about what is best for me. I enjoy doing artistic activities such as crocheting, sewing, and reading for relaxation. For myself I would never engage in any type of professional activity without investigating and contemplating my decision beforehand. For myself the field of nutrition has been a good match, because it allows me in my professional practice to take time and decide how I want to address key nutrition problems and issues that need to be resolved.

The personal stories shared by these participants highlight how being an introvert also closely aligns with personality styles of being investigative, social, and conventional in nature. The next sub-theme will highlight how many of these self-reported introverts often will adapt and take on qualities of someone who is extraverted based upon the needs of their professional roles.

Introvert and Extravert (Adaptable Personality Styles)

Another interesting trend that emerged was how several dietitians identified themselves as being an introvert, but that they were able to often change their demeanor as needed for their positions in leadership as needed to someone who would appear to be an extravert. Here is one example that was shared by a male dietitian, John:

Whenever I have taken the Myers-Briggs exams I have always been strongly identified as being an introvert. Based on my career choice, I believe that this probably works well for myself as an educator. However, I have learned to be assertive when needed, but my

normal everyday demeanor is not to be the assertive one. I have found that I can adapt and change as needed when something needs to happen and I have to be more assertive to accomplish whatever tasks at hand. However, my introverted tendencies and characteristics of being a listener and thinker often allow me to quickly make an assessment and identify a solution to a problem, which has transferred well across my profession in dietetics as a leader in various capacities and settings.

The ability to adapt and change from being an introvert to an extravert is a similar characteristic shared by another male dietitian who was interviewed. Here is one example Kevin shared,

I know that I am definitely an introvert and people are shocked because in the world of dietetics, . . . they expect that someone in these type of leadership positions should be more extraverted. But, believe me the last thing I want to do is be seated at a table without knowing anyone... kind of like being at a wedding reception or something. I am definitely introverted at heart, but if you put me in the right setting I can adapt and I am just fine.

The personality style of being categorized as both introvert and extravert (somewhere in the middle) has been stated by other dietitians as well. Caren also indicated that she considers herself to be someone in the middle between introvert and extravert:

Based on what people have told me about my own characteristics are... I am real. You don't see any difference between you and me talking and my public persona. There are some people who are coachable...I am a real person, not particularly charismatic, I don't like social interaction... but I can do it... such as in cocktail parties... but I believe that in order to be an effective leader and professional in the field of dietetics you have to learn to train yourself if you want to succeed. So, believe that or not... for every presentation I give... I have to do some type of pre-talk. In my opinion, it is important to [be] calm, confident, and competent... without all of these I will not be effective in any type of setting.

As discussed by Caren, her ability to adapt to the situation as needed is a unique ability that has served her well in her professional career choices. She also self-reported herself as being investigative, social, and conventional as her personality types. She has served as the President of the Academy of Nutrition and Dietetics, and also maneuvered her skills in the male-

dominated foodservice area of nutrition and dietetics, where it is often rare to see a female assume a high managerial position.

A similar self-reported personality style was shared by Beth, who mentioned the situation itself has caused her to adapt her personality as needed to being either an introvert vs. extravert.

As mentioned by Beth,

I have taken the Myers-Briggs personality tests many times and I always can be categorized as being an introvert. But, when I am at professional meetings and people learn that is my personality style they cannot believe it. People are often surprised, but I believe that it is the nature of my job that requires me to appear as being an extravert. Nutrition in some ways is a perfect fit for individuals who are investigative in nature, which I can be categorized as being. However, over time as I have become more involved in leadership it has forced me to become more extraverted and helped me balance out who I am as a professional when dealing with others.

However, Beth continued to discuss how the situation truly will influence how she adapts. For example, if she is alone by herself she always prefers to revert back to her introverted tendencies. If she is going home to her personal life, she will be introverted. Or if she needs to be engaging as a leader, she could adapt and become more extraverted.

Another example shared by Andrea showed how she has learned to overcome her introverted tendencies, so most people would consider her to be extraverted. But based on the situation, Andrea discussed how she can adapt as needed. Here is an example as shared by Andrea related to her personality self-assessment,

Most people think of me as an extravert, but it is some ways because as a kid I was very shy... so introversion was important for me to get past and I got this other side. I would put myself somewhere in the middle, but if I had to pick I would say more of an extravert because I enjoy meeting people but there are times when I can also be a little nervous. I really enjoy seeing people and become friends over the years with others.

This section highlighted the theme of personality traits and discussed a variety of differences that existed among the participants in regard to being an extravert vs. introvert and their career pathways chosen as they related to the Holland's personality types. But a consistent finding that was shown among all participants was that they all self-reported themselves as being a Social/Helper. As described by Holland's hexagon personality model, the profession of a clinical dietitian fell within this category. Holland's Theory (1973, 1997) discussed how a Social/Helper often prefers social occupations and situations that involve the manipulation of others to inform, train, develop, cure or enlighten. Also, the Social/Helper values social and ethical activities and problems, which appear to coincide closely with the mission and values of the profession of nutrition and dietetics (AND, 2016).

Aside from these self-identified personality traits and the career pathways chosen by the participants, the personal journey to leadership shared by the participants had certain aspects that related to career pathway and leadership success among participants. A section on the emergent theme related to the leadership journey follows.

Journey to Leadership

All of these female and male dietitians have been recognized as leaders by their peers within the field of nutrition and dietetics. However, on their pathway towards becoming a leader they have faced a variety of negative and positive experiences. Some of these personal stories will be reviewed in this section

In order to be considered as a potential subject for this study, certain selection criteria needed to be met. Aside from being a credentialed Registered Dietitian for at least the last 5

consecutive years, the area of leadership was another important selection criterion that needed to be met. The participants had to meet at least one of the following three criteria: (1) held an elected position at the district, state or national association for the AND; (2) held a position as a department chair or professor of a credentialed program in dietetics; or (3) received a recognition within the healthcare or business field as being an exemplary leader for the profession of dietetics. A summary of participants' leadership involvement is presented in Table 4.

The pathway to leadership today for women no longer remains a glass ceiling, where there is no access. However, it can often be compared to a labyrinth through which one must be able to navigate and find their way. As discussed previously, White men still predominate as leaders, but there is a noticeable increase in the representation of women, and racial and ethnic minorities who are leaders and are becoming leaders (Chin, 2014; Eagly and Chin, 2010).

As a result of the growing diversity of our global society, a need exists for diverse leaders who can contribute different leadership qualities that previously were unheard in the traditional White, Caucasian, upper-class profession of nutrition and dietetics. As discussed by Bass and Riggio (2006), one's leadership potential often correlated with items such as age of one's first steady job, volunteer work, hobbies, rural or urban background, etc.... These earlier relevant experiences have been shown to correlate with the effectiveness of becoming a more transformational versus being a transactional leader later in one's adult life (Avolio & Gibbons, 1988; Bass & Riggio, 2006).

Table 4

Participants' Leadership Involvement

Key: AND (Academy of Nutrition and Dietetics), ACEND (Accreditation Council for Education in Nutrition and Dietetics)

Participants	Gender	Role as a Leader in the Dietetics Profession
Mary	Female	Faculty in ACEND program
Cathy	Female	Elected role in AND, Recipient of Leadership Award
Betty	Female	Elected role in AND
Lisa	Female	Elected role in AND
Pam	Female	Faculty in ACEND program, Elected role in AND, Recipient of Leadership Award
Wendy	Female	Elected role in AND, Faculty in ACEND program
Kevin	Male	Elected role in AND (*Served as President of AND), Recipient of Leadership Award
Gloria	Female	Faculty in ACEND Program, Elected role in AND (*Served as President of AND), Recipient of Leadership Award
Rose	Female	Faculty in ACEND Program, Elected role in AND (*Served as President of AND), Recipient of Leadership Award
Nancy	Female	Elected role in AND
John	Male	Faculty in ACEND Program, Elected role in AND (*Served as President of AND), Recipient of Leadership Award
Andrea	Female	Faculty in ACEND Program, Elected role in AND, Recipient of Leadership Award
Sarah	Female	Faculty in ACEND Program, Elected role in AND, Recipient of Leadership Award
Anna	Female	Faculty in ACEND Program, Elected role in AND, Recipient of Leadership Award
Ellen	Female	Faculty in ACEND Program, Elected role in AND, Recipient of Leadership Award
Lynn	Female	Faculty in ACEND Program, Elected role in AND (*Served as President of AND), Recipient of Leadership Award
Beth	Female	Faculty in ACEND Program, Elected role in AND (*Served as President of AND), Recipient of Leadership Award
Kelly	Female	Elected role in AND, Recipient of Leadership Award
Joan	Female	Faculty in ACEND Program
Caren	Female	Faculty in ACEND Program, Elected role in AND (*Served as President of AND), Recipient of Leadership Award

Challenges Faced on the Journey to Leadership

When reflecting upon their own experiences and pathways that have led to these women and men becoming leaders within the profession of dietetics, a variety of issues emerged. Cathy discussed how she faced a variety of challenges when working with her colleagues in order to be an effective leader and accomplish the tasks that she was expected to accomplish. She shared:

Some of the biggest challenges I faced as volunteer leader among my own colleagues was dealing with others who didn't want to cooperate or who wouldn't respond to the call for assistance when needed. As a leader I didn't want to rely on the same people who kept volunteering, because I didn't want to overburden anyone. At the local district level this was a very common issue that I faced.

Cathy discussed how her leadership journey often consisted of trying to create educational programs without the input from my colleagues. But, some of the key skills that she acquired through her development as a leader is the ability to learn how to engage, coordinate and manage colleagues who are volunteering their time but you also need to keep in mind that there are tasks that still need to be accomplished and deadline that need to be respected.

Another interesting example was shared by Pam, who discussed how financial barriers were a problem that she encountered, so it was difficult for her to pay the membership, registration fees, etc.... for conferences and to maintain her licensure requirements. However, through her involvement as a volunteer leadership within her profession, she was able to offset the financial burdens and also acquire valuable relationships with colleagues that have served her well in her profession as a private healthcare consultant. As stated by Pam,

Back in the day, you had to be a member of the Academy and if you dropped your membership there was a huge fee that you had to pay. When things were tough financially, those are a few of the reasons that kept me going because I knew I had too. Even though I was a mom with 2-3 kids and I knew I didn't have time to become

President of a district, there were leadership opportunities on task forces, events, planning committees, etc., and I would highly recommend anyone to get involved, because the connections I made through leadership opportunities have served me well in my professional and personal career.

As described by Pam, the motivation to meet with other colleagues and receive a membership reduction worked: she became involved and has held numerous positions from the district, state and national Academy of Nutrition and Dietetics. She discussed how the AND should encourage and promote student membership by offering reduced incentives and opportunities for them to become involved and hopefully interested in becoming a volunteer leader within our organization. Even though membership is no longer a requirement of being a Registered Dietitian, it should be marketed especially for our new and young dietetics students so they can see the value of becoming involved and having a voice in their own professional association.

Another challenge that was encountered by a participant was related to her ethnicity, as Lisa shared how she was able to turn a challenging situation into a future leadership opportunity where she created her own unique niche in the private business consultant arena within food industry. As shared by Lisa,

When I first started at a leading cereal company, I was supposed to do some sales training. They told me... if you don't mind I am going to send you to some classes, so you can improve your accent and it will not be so heavy... this occurred during the 1990s. At that time, I was very optimistic and naïve and wanted to advance my career... so I went to a speech therapist and he coached me on how to speak better in public. Being able to speak the English language was a challenge for me, but I had only known the language for ~10 years and I was working and writing reports at a corporate level. So, I would say I was very motivated and adaptable, but my employer considered me to be a 2nd class employee and someone that needed to improve and/or eliminate my ethnic accent.

Having her ethnic culture and accent seen as a challenge faced in her professional career actually motivated Lisa to eventually leave her employer and start her own private consultant business. She was able to turn a barrier into a success, because she embraced her ethnicity and was able to create a unique niche in the food industry as a private consultant, where she often provides recipe development, modifications, and educational materials that are geared towards the increasing Hispanic/Latino population group that exists in the United States today.

Successes Achieved on the Journey to Leadership

Seven of the subjects recruited for this study had attained the position of President of the Academy of Nutrition and Dietetics. When discussing their own personal leadership journey they revealed similarities in the level of involvement and volunteerism that started at the local, state, and national level of the Academy of Nutrition and Dietetics. Some of their personal experiences will be highlighted in this section. As previously discussed by Bass and Riggio (2006), one's leadership potential is often correlated with items such as age of one's first steady job, volunteer work, hobbies, rural or urban background, etc.... These earlier and relevant experiences have been shown to correlate with the effectiveness of becoming a more effective leader.

As discussed by Caren,

My pathway towards becoming President of the Academy of Nutrition and Dietetics was pretty traditional, I started off as secretary of our local district association and moved on to becoming President. Next, I became secretary at the state level and moved on to become President. After that position, I held a delegate state position for several years and served in the House of Directors. During this time, I continued my involvement in dietetic practice groups and eventually ran for Speaker Elect, and Speaker of the House of Delegates, and won. I strongly believe that my involvement in all of these experiences

and ability to meet practitioners from across the different practice areas is what made someone ask me to run for the President of the Academy of Nutrition and Dietetics.

Caren discussed how she never wanted to be President or even felt that she needed to be President. Instead, when elected Caren shared how she felt that it was an honor and that it was her obligation to lead her colleagues forward in alignment with the strategic plan established by our organization.

A similar pathway toward leadership was also experienced by a past President of the Academy of Nutrition and Dietetics. Kevin indicated that the importance of becoming involved as a volunteer early on in your career can be so instrumental in shaping opportunities related to work and leadership volunteer positions. As shared by Kevin,

I suppose that the one thing I would always recommend is... not to say that you want to become Academy President... rather, you should verbalize that you want to serve others. So, my advice based on my own journey is to start in the dietetic association at the district, state and national level based on where you want to become involved. Eventually, you will see what other opportunities are available and you might encounter something that you really enjoy.

Kevin followed his own personal advice that you should try to determine if there is a volunteer role that you can be part of and contribute your heart towards it, because, as he pointed out, if you enjoy being a volunteer leader you will be contributing towards your own self-fulfillment and also making the profession better for future generations of dietitians to follow in your footsteps.

Ellen discussed the value of getting involved is something that all dietitians should do early in their careers because the networking opportunities that you establish can be invaluable for your career advancement. It is important to know someone who is from the same specialty area that you can refer to for guidance and advice if needed. As Ellen stated,

People often don't realize the personal benefits of volunteering. One of my most dramatic experiences was with a major specialty foundation and I just happened to be in the right place at the right time and they would fly me to New York 1 time a year, which was amazing, for a 3-day meeting and since I was part of the Executive Committee they paid my way. For me I was never paid to volunteer before, but what it did was network and opened up networks before email and fax, so the only way you could learn about another RD was to read a journal or pick up the phone. This provided the networks of people in your same specialty and there are limitless possibilities of what you can do and the synergy of leading together as a group is like a herd mentality so you never feel like you are making a decision alone.

As shared by Wendy, the pathway to leadership is something that is essential and should be considered an assumed component for any type of career and personal success. These are the thoughts about her own personal leadership journey and the necessity of being an involved part of your professional organization. Wendy explained,

When I reflect back upon the last 2 years, I was holding leadership positions simultaneously as the President of our state association and the Legislative and Public Policy Committee at the national Academy of Nutrition and Dietetics. Even though this was a difficult balance of my personal and professional time, I believe it was worth it!!

Wendy strongly believed that walking the talk is very important... especially if you are a professor, and if you don't exhibit involvement in your own professional organization (district, state, national) levels how can you expect your students to want to also become involved and to aspire to become leaders? Wendy stated that volunteerism in your professional organization is something that all students should be encouraged to start early in their careers, because it is very important and should be instilled in every professional handbook to career pathway success.

Another similar viewpoint was shared by Lynn. Her involvement at the district, state and national level of the Academy of Nutrition and Dietetics has spanned >40 years, but she shared some of the highlights of her viewpoint on her own leadership journey. As discussed by Lynn,

As a professor it is important to encourage and model for your students what you want them to achieve. You have to model the behavior that you want your students to participate in. Sometimes, other people will try and discourage you along your career pathway... but just as I was encouraged by a mentor early on... she told me that I have no business being in a hospital because I am not going to follow the rules; instead, she suggested that I go into community nutrition and education. At that time, they didn't have any PhD program in nutrition, so she encouraged me to not worry and continue to persevere and finish the EdD program in community along with continually being involved in my district, state and national organization of the Academy of Nutrition and Dietetics. I believe that I have been able to achieve and attain success as a true servant leader of our profession of dietetics and as a role model for upcoming generations of future dietitians.

This section examined some of the challenges and successes faced during their personal journeys that these women and men experienced. These journeys helped develop their career pathways and led to them being recognized as significant leaders within the field of nutrition and dietetics.

Various Styles of Transformational Leadership

When trying to convey the key components that can best describe a leader, a wide variety of leadership styles and qualities were highlighted. These factors were described by the women and men chosen for this study who were recognized as being key leaders within their profession of nutrition and dietetics.

As discussed by Burns (1978), "transformational leadership is a process where leaders and followers engage in a mutual process of raising one another to higher levels of morality and motivational goals." The concept of transformational leadership styles has been encouraged for today's leaders, given the emphasis on leadership styles that foster change (Chin, 2014). In order to be an effective transformational leader they must be able to shift perspectives and incorporate the usage of mentoring in order to achieve transformations among their colleagues. The concept

of transactional leadership and contingent rewards should be shifted toward the focus more on the individual, such as transformational leadership (Atkinson & Pilgreen, 2011).

The styles of leadership exhibited by transformational leaders often fall into one or more of these four components: charismatic leadership, inspirational motivation, intellectual stimulation, and individual consideration (Bass, 1998; Bass & Bass, 2008). These dimensions are briefly described as being:

(1) charismatic leadership—making others feel good, making others proud and earning faith from the subordinate; (2) inspirational motivation—leader communicates his/her goals, the manipulation of images, helping others to find meaning in their work; (3) intellectual stimulation—leader's ability to make others think about new ways to perform and look at problems, and to encourage creativity; (4) individual consideration—where leaders provide feedback to subordinates, and take time to bring workers into the team or group. (Bass & Avalio, 1990)

Certain styles can be identified as being consistent across leaders in various types of roles. After reviewing the personal stories described by these women and men, the personal stories chosen for this section focused on some of the most effective styles of leadership as exhibited by these women and men. A style of leadership that consistently emerged among these leaders was the style of intellectual stimulation, which encouraged keeping a focus on the organizational plan of the bigger picture for the association. Another consistent leadership style that emerged was individual consideration, which allowed these leaders to be focused not on their own personal agenda as a leader, but on the broader sense of promoting the whole group. The third leadership style of inspirational motivation also was apparent in the stories shared by participants as they focused on inspiring those around them to find personal meaning in their work. Lastly, the leadership style of being a charismatic leader allowed these participants to

make their peers around them feel good and proud about the tasks that they were trying to accomplish. By incorporating variations of these four leadership components as described in transformational leadership, these registered dietitians were effectively able serve their profession as true leaders and to promote the growth of the profession forward into the future.

As discussed by Wendy,

I think that it is important that you are able to accept criticism and keep it in perspective, because by being an effective leader your role should not be personal or about you. Also, I like to lead but there need to be efficiencies and how certain tasks need to be accomplished for the next group that will be following afterwards.

This view was mirrored by a male dietitian, who stressed the importance of collaborating as a leader and being able to respect the input and ideas from the group as a whole instead of remaining focused on your own personal agenda. This example also highlighted the concept of charismatic leadership, where the leader is able to make others around them feel good. As described by John,

I think that I am a great collaborator, because I prefer the style of not trying to do everything at one in a short period of time. I believe that it is better to have a set of goals and far reaching goals that were created by a group, so you can acquire and recruit individuals who want to support the reaching of these identified goals. It gives people who are “on the bus” with you value in the belief that their thoughts and ideas are considered in the game plan. I believe that when others around you are inspired and have a sense of ownership for what is trying to be accomplished you are much more effective as a leader and create ... a collaborative team environment.

Andrea also mentioned the concept of taking into consideration the views of the whole group and not just your personal agenda:

It is important to know yourself in order to be an effective leader. I like to make sure that in big groups that you can depend and engage the entire group and try to make people share their input versus telling them the way it has to be done.

A similar viewpoint was held by Rose, who also held several positions throughout the Academy of Nutrition and Dietetics, including being President. As shared by Rose,

Originally, I came from a small town and simple family and wanting to be a professional person ... really wanted me to be better, do more, work harder, work longer... whatever it took for me to be recognized as a true leader would identify as my professional and leadership style. I believe that a leader needs to be driven by achievement more than anything. So, it is always important to keep in mind the mission, goals, and intent that you are trying to achieve through your leadership position and keep aligned with the strategic planning that exists.

Consistent with this type of style of professionalism and accountability was the style of individual consideration. This style focused on listening to those people who are in your organization and who want to support you. Mary provided a good insight on this type of leadership style,

I think that by being a leader, it is important to have a style where others feel that you are truly listening to them. I always try to respond back to emails or phone calls in a timely manner, because I don't want someone to feel like I ignored or disregarded what they wanted to share with me. I also try to pay attention to the details or delegate to someone else if I can't complete it to a level that I want.... I like to believe that my style of leadership is fair, flexible and I always have an open door policy where anyone can come and share their thoughts with me.

Another similar description of type of leadership was discussed by Kelly,

For sure my leadership style is participatory, I like to engage the team members and understand ... their perspective and formulate my message that is impactful to them and engage them and they are supercharged to lead their team, which is my approach.

This type of participatory and individual consideration for others appeared to be a common type of leadership style portrayed by a large number of participants. Here was an additional view as shared by Anna related to her type of leadership style,

For me holding team meetings allowed me the opportunity to think about and facilitate the decisions without having me tell people that this is the way it had to be done. It is not

needed for me to make a decision unless it is forced, but there are more heads in the pot and that is way better about thinking about where we are going to go. Because we were all there together. When you have more people involved in the conversation that is a better process, because it was not me telling them what to do.

Another common leadership style or quality that emerged was related to being an honest and inspirational leader. How these dietitians defined their own style had variations, but a consistent pattern was the underlying focus on being concerned with the greater common good and being ethical in how you led others to follow you in your leadership role at work or as a volunteer. As described by Gloria,

What I have come to value more in myself and in others when discussing a leadership style has been their integrity. I believe this is very important because it shows who they are as a person and when others are inspired to follow magic can happen... This is also why I believe communication skills are so important, because it is needed in order to deal with others who have differing opinions than you and being able to work with them are very important skills needed in a good leader. Also, it is important to be sensitive and compassionate to those who are around you.

The concept of being inspirational to others also had underlying ties to being faith-based, as described by Pam in her type of leadership style,

I would describe my style of leadership as someone who is inspirational and a good encourager of people. At the point now in my career, I have been told that something (view) coming from me means a lot to them. So, I have learned that it is important watch my words, but [I] believe that I always tell the truth almost 99.5% of the time. Also, I am very faith-based in how I view the importance of volunteerism and leadership. Service is something that is important to me and as a leader. My leadership style relies upon the underlying belief of doing the right thing and helping others be as happy and successful as they can possibly be. This is important, because often in our society today, we are more focused on the “Me” versus “Others” when faced with making decisions.

The idea of some leaders being born while others can be trained was stated by several of the dietitians in this study. Ellen has been involved in numerous leadership roles, but does not

believe it was something that she accomplished naturally; she had to develop her skills to prosper in her interactions and style of leadership with others. Here is an example that Ellen provided,

What I have always found as a leader, is the necessity of having to step outside of your comfort zone. For some people they are born as natural leaders, but I am one of those people who has learned through time the skills needed to be an effective and productive leader. I would consider myself to be a very visual person and one example that represents my style and views on dealing with issues can be described as this...picture a circle and in the circle was a comfort zone. If there was an arrow outside with a fluffy cloud it would say... here is where the “magic happens” when you are outside of your comfort zone and you make yourself accomplish things as a leader that you never thought could be accomplished.

An additional viewpoint was shared by Anna, who said the importance of being able to inspire others is also related to how well you are able to make the tough decisions. As discussed by Anna,

You have to have an internal, but you have to have a little bit of a tough shell because no matter how well thought out your decisions are not everyone will be happy and you have to deal with it. You can crumble or take it as a good learning experience. I think if you don't have that...(the little bit of crust) you can't really do it.

This section highlighted a variety of personal stories, related to the transformational leadership styles exhibited by these registered dietitian leaders. They were able to utilize the styles of charismatic leadership, inspirational motivation, intellectual stimulation, and individual consideration when working with their colleagues and peers. The next sub-theme will focus on words of wisdom from the participants based upon their own experiences along their journey to leadership.

Words of Wisdom/Admirable Qualities of a Leader

These women and men were identified and seen as recognized leaders within their own profession of dietetics. Based on their own personal opinions this section highlights a few of the key qualities that they believed a true leader should possess. The concept of not being afraid to make a mistake and being accountable to others was a consistent quality that was desired. As stated by Kevin,

I believe and admire leaders who are not afraid to make a mistake and are not afraid to say “No” even if it is the unpopular decision at the time. A leader must accept responsibility for their actions, but their decisions should be considered as part of a team decision for the common good. In order to have the qualities needed for these tasks a leader should have humility, self-confidence, strong communication skills and the willingness to negotiate and take risks and open to change.

Another quality that was admired among leaders was the self-confidence and grace with which they led others. This was described very eloquently by Cathy,

When I reflect upon other leaders, those that I have admired are people who have a sense of true compassion and grace towards the task on hand. The ability to be so graceful and ZEN when making a challenging situation appear smooth and shedding a different light, often will result in a creative idea that originally wasn't considered. The qualities of being compassionate and caring are similar ones that I strive to accomplish in my own leadership roles and when faced with tough decisions.

Also identified as being important was the quality of being approachable as a leader.

Many of the leaders discussed how in order to inspire and lead others around you, it is important to portray and exhibit the quality of approachability because if you do not appear to value the insights, thoughts, or creative ideas of your committee, board members, etc....you may become focused on your own set of personal agenda items and may easily lose sight of the big picture.

This was mentioned by Sarah,

I strongly believe that a required quality in any type of leader is the necessity of being approachable. You cannot work on an island alone in isolation by yourself and accomplish tasks for the profession as a whole. You need to encourage and embrace ideas and thoughts from your colleagues and have an open dialogue that remains focused, but that can contribute to the unveiling of creative ideas that you may not have considered by yourself without the input of your team.

The quality of being approachable was also conveyed by Nancy as something that dietitians should not overlook. As discussed by Nancy,

I tell all of my students, colleagues, etc., you should always remember to treat people like you want to be treated and if everyone would follow that simple philosophy we wouldn't have a lot of the problems we are dealing with in our society today. It is always important to treat others how you want to be treated and be able to listen to what they are conveying. Also, always remember to smile...it doesn't cost anything but it can make a world of difference in making yourself and others around you feel better; you can light up a room.

Some of the key qualities that a leader should possess were discussed by Andrea,

I think to be a good leader you need to look at your skills; (1) You need to be organized so people will buy in and believe that you know what you are talking about. If you were giving a presentation, you need to know what is on your slides and be prepared. (2) You need to be prepared and know what you are talking about. (3) It is important to know yourself, I like to make sure that in big groups that you can depend on them and try to make people share their input versus telling them the way it has to be done.

Kelly also discussed and shared some of her suggestions for how to be an effective leader,

In my opinion there are 3 key areas that a leader needs to possess; (1) To be a leader you need to have people follow you, (2) When in a leader role you need to have a vision and see it through and (3) One needs to encourage others and aim to achieve methods to move forward and attain your team goals. My father used to say rules are meant to be broken and as a leader you are often pressed with determining the rules and never look back, these are the key steps that I try to utilize in my own practice as a leader within our profession.

A similar discussion was shared by Gloria, who stressed the importance of a leader having a strong sense of understanding for who they are as a person before they can lead others effectively. Gloria related,

An admirable quality that I recognize in leaders who I have worked with through a variety of roles (work and volunteer) is someone who truly knows who they are as a person and possess the confidence to exhibit those qualities. In order to be an effective leader I believe it is important to understand yourself, because if you take the time to know yourself, what you value, who you are, and the person that you want to become, the type of leader that you want to be will fall naturally into place and others around you will be inspired. As a leader a quality that must be possessed is the ability to encourage others around them to reach their own potential and to be the best that they can possibly be.

Lisa shared her insights about how the pathway to becoming a leader is not an easy road, but it is worth the challenges encountered along the way. As described by Lisa,

Becoming a leader is not an easy road... there are lots of blood, sweat and tears that have led me to my position today. But, remember to never give up because it will not be a rosy path, but if you are committed and this is your passion, stay with it. My advice is to choose a path that you know you can live and breathe and wake up every morning being extremely excited about what you are going to do that day. Because regardless of how hard it may be... you will find a way to do it, if you are passionate about it. When choosing your career pathway you need to find something that you find exciting and never get tired about learning and practicing. Because if you find a career that you really care about, that will lead to great leadership and career success and satisfaction for you.

Lynn discussed the ability of anyone to become a leader if they have the aspirations to get involved. As stated by Lynn,

Everyone is a leader... they just have to develop the inner confidence and belief within themselves... you have greatness inside of you, sometimes you just have to nurture and find it. Not everyone has to aspire to become the President of the Academy of Nutrition and Dietetics. You can always start off small in your district association. But most importantly, volunteer and do the job possible, ask questions and seek help from other people who may be leaders or someone who you would like to ask to be a mentor for you in your professional development.

Wendy shared her view on how our profession needs to be more receptive to training and educating future leaders. She described how,

People are often looking at us as dietitians to be leaders and recognized experts in regards to nutrition. If we did a bell curve there would be a distribution of those who get involved versus those who don't... I believe for our profession to continue to succeed in the future we need to be more encouraging as a profession and support anyone who wants to become and get involved.

Being a leader is something that one should value and consider it not only something for themselves but also consider how they can contribute to the future success of our profession. As discussed by Ellen,

I believe that we need to instill the concept of "do no harm unto others" for our leaders today. It always frustrates me when I get on a committee and they do what is convenient for scheduling, locations, and writing correspondence without consensus from the committee. Often they tend to feel that just because they are the leader they need to realize that they are not the queen or king of the hive. A true leader should be creating a plan of action that allows the majority of individuals to create a process that satisfies the needs of the masses. I believe this is a difference that exists between old and new leaders and something that our younger generations should not lose sight of in their professional leadership behaviors.

As described by Joan, there are lots of styles of leadership and there is not just one type of answer. Everybody has their own variety of strengths and weaknesses, because people are a product of their own history. Here is a thoughtful quote shared by Joan related to career success for women,

Inside each woman there is a queen; if you speak to the queen the queen will answer. That is how I like to look at leading other women, by trying to look for that little diamond that is within each of them and nurture that to their greatest potential.

One of the final remarks in this section will be the words of wisdom that future generations of dietitian leaders should consider as shared by Rose,

Do not be afraid, because fear is something that can hold you back. So, even if you are not perfect, always remember that we don't need to be perfect we just need to figure out the flaws or challenges and find a way to overcome them. I strongly believe that no one should let fear hold you back from anything, because anything can be overcome and in the end it will all be worth it. We may not always get what we anticipate, but we always get what we need and that is such an important phrase to remember. Whatever life brings us is there for a reason and we can always learn from it, move forward and become more well-rounded persons.

A similar viewpoint shared by Anna discussed how encouraging younger leaders to be developed is something that our dietetics profession should continue to support. Anna said,

People should realize that we don't acknowledge that we have formed a really strong interdisciplinary background and that we have a lot to share that we may be too humble to acknowledge our accomplishments and leadership roles. Being a leader is not just about having a queen title; one needs to think about what you want to try and make a difference, not just in their patients but also in the bigger scale. In order for things to prosper and grow we need to have new people sharing their ideas—we can't always have the old fogies running the show. We all have a different perspective on how we want to share things and the topics that we want to be covered. We need to know what our younger RDs think and how they want to be involved.

This final section discussed some of the notable qualities that these women and men admired about other leaders. Also, the participants shared some personal words of wisdom for future generations of dietitians to consider as they embark on their own leadership and career journeys. It is humbling to see how these dietitians who have dedicated the large majority of their careers to not only work but volunteer service towards their professional organization remain so appreciative of the work conducted by their fellow colleagues and are willing to share suggestions for others to succeed while not being focused solely on their own personal successes as leaders within their profession.

Chapter Summary

The participants who were interviewed experienced a variety of different aspects along their career pathways towards leadership success within the profession of nutrition and dietetics. These participants discussed how career influencers related to mentoring, work, education, and diversity affected their direction and their decision to pursue a career in nutrition and dietetics. Along with these career influencers a variety of personality traits emerged, which showed some interesting similarities among a large majority of participants in regard to the areas of practice and their career pathways. In addition, certain types of career transformations caused turning points and new directions to occur along these participants' pathways.

Lastly, the journeys to transformational leadership practices shared by these participants were filled with a variety of challenges and successes, which led to them being recognized as leaders within the dietetics profession. Being charismatic, inspirational, intellectual and considerate of others were all leadership components that these participants used to effectively serve as transformational leaders. The closing remarks shared by the participants highlighted some of the admired qualities and words of wisdom that they wanted to share with future dietitian leaders within the profession of nutrition and dietetics.

The next chapter with conclusions follows.

CHAPTER 5

CONCLUSIONS

During my doctoral studies I became very interested in the relationships that exist among the career pathways chosen by leaders in the healthcare professions. As a registered dietitian and involved leader within both the local and state levels, I have found it meaningful and also beneficial to my own career pathway development to remain an involved leader within my professional associations. That is why I was drawn towards investigating this topic area of interest. I wanted to explore areas where dietitians hold leadership positions and are able to incorporate the skills acquired to assist them in their own career planning pathways. The literature contains a large amount of research related to the nursing and medical professions related to career planning and leadership development, but there is a lack of research specifically related to dietitians. Therefore, I wanted to specifically investigate the career pathways of women who are recognized as leaders within the profession of dietetics.

In this study I interviewed 20 Registered Dietitians; in order to be considered as a potential subject, certain selection criteria were identified. These were: being a Registered Dietitian who is currently credentialed by the Academy of Nutrition and Dietetics for at least the last 5 consecutive years, who met at least one of the three following criteria in order to be identified as a leader within the dietetics profession: (1) held an elected position at the district, state or national association for the Academy of Nutrition and Dietetics; (2) held a position as a

department chair or professor of a credentialed program in dietetics; or (3) received a recognition award within the healthcare or business field as being an exemplary leader for the profession of dietetics. In this study I sought to answer the following research questions:

1. What are the career pathways of leaders in the field of dietetics?
2. What transformations did these leaders experience?
3. How did they emerge into leaders?
4. What are the personal attributes of a leader?

This chapter includes an overview of the significant findings of the study, a discussion of the research questions in relation to existing literature on this topic area of interest, limitations of the study, conclusions, recommendations, and a researcher's reflection. Figure 7 provides a connection between the main themes and subthemes that emerged based on the research questions.

Research Question #1

What are the career pathways of leaders in the field of dietetics?

Based on the findings from this study, it appeared that the various career pathways held by the participants were influenced by a variety of factors that affected the direction and pathways chosen. As discussed in Chapter 4, a variety of career influencers, such as mentors/supporters, work, education, and diversity affected the personal career pathways chosen by these participants. A total of 20 Registered Dietitian Nutritionists were chosen and interviewed as subjects for this study. The breakdown for areas of current practice were: thirteen in Education, four in Business Industry, and three within the Healthcare area.

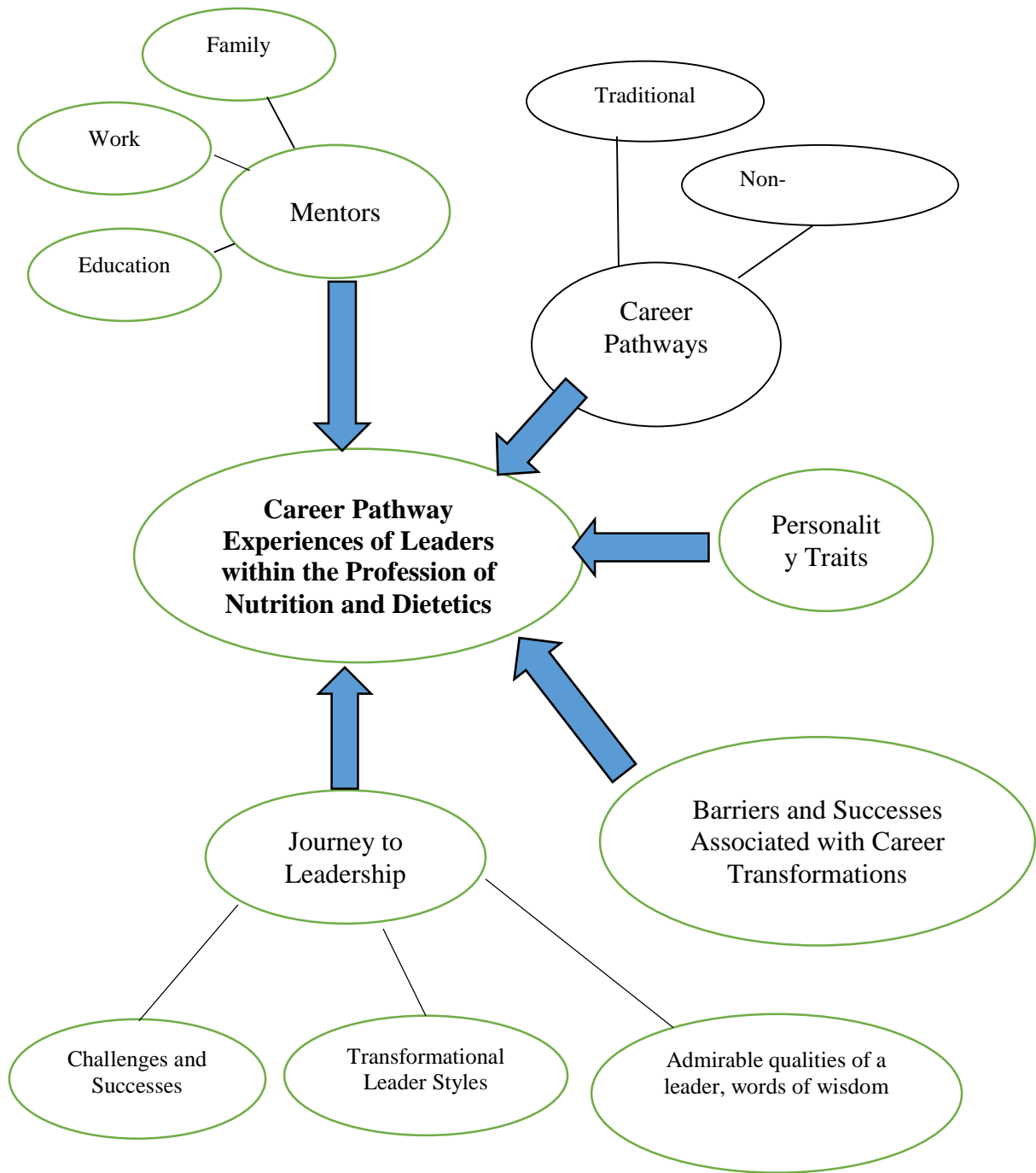


Figure 7. Connection between the main themes and subthemes that emerged based on the research questions.

The influence of mentors was an important component that affected the development of one's career pathway. As discussed by Gabriele and Min (2010), mentoring plays an important role in the development of the skills, abilities and ongoing nurturing support needed by one to succeed and advance in their careers. Therefore, mentoring as a career influencer played a very important role and was evident in the personal stories shared by the participants when they were interviewed. Since the profession of nutrition and dietetics is based largely of women, it was important to realize how mentoring can differ between men and women. Washington (2010) mentioned how it is often difficult for women to be able to find a mentor and overcome career barriers.

Certain challenges faced by women are often related to corporate policies, stereotypes, compensation practices and overcoming the status quo of "old boy" networks. Also, issues related to the types of career choices women make versus men have been influenced by psychosocial factors. Women have traditionally been discouraged from pursuing science and technology careers, due to factors such as lack of role models, lack of career information, concerns related to juggling career and family, and sex-role stereotypes (Whitmarsh & Wentworth, 2012).

The participants within this study relied upon informal mentoring relationships for the large majority of personal experiences that they shared. These informal mentoring relationships which were discussed by the participants, who highlighted how having a mentor was beneficial to them as they navigated their own career pathways.

As discussed by Gloria,

My mentors did not always know that they were my mentors. Because I believe there is more than one way to do it. Sometimes, it is just reaching out and having a conversation with someone, they may not think of themselves as being a mentor, when in reality they are. Sometimes, we don't always even realize that we have a mentor and we can look back and say, oh my gosh...look how important that person was in my life. I always aimed to try and pick the minds and have conversations with those who I found inspiring and interesting. There were several people who influenced my career pathway, but I never really "officially" asked them to be my mentor.

This example as shared by Gloria and several other participants whose stories were highlighted in Chapter 4 supported the concept that role models/mentors can be defined as people whose lives and experiences have influenced the future career growth of another person in some capacity, such as being an informal mentor. As stated by Quimby and DeSantis (2006), individuals are often drawn towards seeking mentors who are similar to them in some way and this initial attraction can often lead to relationships built upon mutual trust, support, and the provision of valuable career guidance.

Another interesting finding related to the career pathways of these participants can be found in the type of area of practice for several of the RDNs who were recognized as being leaders within their profession. As stated previously, the largest majority of participants (13) were found to work in education. The career development of women occurs in a specific context, where the cultural values, customs, and norms of society are often implicitly provided about appropriate and inappropriate career paths for women.

As discussed by Cook et al. (2005) the macrosystem relates to career myths and certain stereotypes related to race and gender, where the White male privilege view on occupational choices often is embodied. As a result, the macrosystem values can become internalized by an individual, and can result in the microsystem level as being influential in how people are treated

on the basis of their gender or ethnicity. This ecological perspective on career development highlights the importance of how issues related to race and gender can influence the types of career choices that individuals may feel are appropriate areas for them to practice within.

Here are a few examples shared by participants as they relate to diversity and issues they encountered along their own career pathways.

As described by Lynn,

After I completed my undergraduate program at a HBC (historically black college), I needed to decide where to apply for my dietetic internship/graduate program. At that time, there were only two internships that existed and were operated by African American women. My undergraduate class size was quite large, so when our academic advisor was recommending where we could apply for internships/graduate school based upon our GPA, our advisor would not allow anyone with a GPA below 3.0 to apply for a White university program. Those who had average GPAs 2.5/2.6 were told to apply to HBCs. In my opinion, this seemed like racism against blacks by blacks... they only wanted to send those who graduate with honors as potential applicants to the White Universities, because they did not want the program to look bad in the eyes of internships/graduate schools that were overseen by White persons.

This example shared by Lynn highlighted an important career influencer for her along her own career pathway. She was one of the honor graduates from her HBC and she was mandated to apply to a White program. So, she received her MS in Dietetics and Nutrition from one of the leading White dietetic internship programs/graduate schools. But, along her pathway she became interested in how to translate all of the scientific stuff into simpler, layman terms that average African American and minorities could understand. This led to her pursuing her doctorate degree in Education and her involvement in the education area of practice focused on community nutrition for >40 years of her professional career.

In regard to being a male in this the predominately female dominated profession, John shared his own personal career insights,

I think that there are a lot more male RDNs in school foodservice around the county, so that is a great niche for males in our profession. But, I believe that the ratio of men to women RDNs still remains, like, 5% men to 95% women. But there has been a reported growth of 3-5% within the last 5 years, which even though not a huge growth is still an increase in the positive direction of gender diversity. As an educator at a university, I have noticed an increase in the percentage of male nutrition majors. It seems like the critical masses have determined that it is now becoming more socially acceptable for a male to consider being a nutrition major. I believe that the profession is starting to change and nutrition is becoming a profession and area of research that males want to be part of.

John shared how, since he joined his current position ~29 years ago as a professor of nutrition, he has seen the shift among gender patterns and the amount of males and females who are nutrition majors. But, based on his personal experiences he has noted that it is appearing to become more acceptable by males to consider being a nutrition major. At the institution where John is employed he shared how the current undergraduate nutrition club President is a male, which a definite change and is aligned with the future need for increased diversity within the profession of dietetics for future growth and development.

The career pathways of dietetic professionals are constantly changing and in order to remain competitive and at the forefront of what is occurring on a global scale, the profession needs to adapt and become more diverse. Among the participants highlighted within this study, a diverse representation was obtained. Personal experiences were shared by female and male subjects and noted differences did exist in their career pathways. Also, challenges and successes encountered by RDNs from diverse backgrounds such as African American, Hispanic/Latino,

and Asian/Indian were discussed. Based upon these findings valuable insights can be obtained, which can lead to the navigation of future RDNs on their own career pathways.

Research Question #2

What transformations did these leaders experience?

As expressed by the participants who were sharing their personal experiences, a variety of challenges and successes that they faced caused them to re-evaluate their career directions. Certain influencers such as power, ideology, race, class, and gender differences may exist, but transformative learning occurs when the adult learner is able to reason and assess the situation and make their own personal judgements (Mezirow & Taylor, 2009). For a transformative learning experience to occur, the learner must be capable of making an informed and reflection decision to act or not to act. As discussed by Kroth and Boverie (2009), the transformational learning process should take into consideration the individual's frame of reference such as his or her paradigm shifts.

The Passion Transformation model (Kroth & Boverie 2009) has underlying associations with Mezirow's Transformational Learning Theory, which is based on the process of interpreting the meaning of one's experiences to guide future actions. However, the Passion Transformation model is more concerned with the discovery process of how individuals are able to find passionate work and work environments. Certain transformational experiences that are not expected can cause individuals to "discover" or rethink what they believe that their careers or even their life pathway should be. This model is focused on the concept of career

transformations and how learning what one loves to do can allow an individual to adapt and make their own career transformations (Kroth & Boverie, 2009).

A variety of career transformation experiences were shared by participants; these situations related to “rethinking” their career pathways. Here are a few of the excerpts from examples previously discussed in Chapter 4. As discussed by Lynn,

Every time I walked into the room to give a diet instruction, they thought I was the tray-person because I was an African American woman. After trying to deal with these personal insults against me as a professional dietitian, I knew that I needed to quit and make a career change.

This example highlighted how Lynn felt discrimination against her based on her color in the profession of clinical dietetics. Despite her educational background, which qualified her as an expert on the therapeutic diets that she was prescribing, she felt unsatisfied and insulted by the lack of respect that she received from the majority of male patients that she encountered in the Veteran’s Affairs Hospital.

A similar example was experienced by another African American female, as described by Nancy,

So, I wrote an order and this doctor had a problem with what I had wrote, so when I was paged I went upstairs to talk with him. I don’t think he expected to see me... first of all I was a woman, secondly I was African American and his response was...oh... you are Dr. Nancy... I don’t know what he expected, I have no idea, but it was just the way that he responded that made me reconsider my career in clinical dietetics.

Nancy discussed how this experience along with a culmination of similar experiences related to her being an ethnic minority that caused her to reconsider her career path and decision to reconsider a different area of practice, which was not associated with the inpatient hospital setting.

These clinical experiences shared by the participants were both related to injustices that they felt based upon their gender and ethnicity. However, a similar example was also shared by Cathy who is a Caucasian female RDN. As discussed by Cathy,

So, I was just trying to make ends meet when I was 1st first out of graduate school, I ended up working at a long-term care center, knowing that this was not really where I wanted to stay... because I knew that I was more interested in preventative care. The turning point was when I was trying to offer nutrition advice to an inpatient who recently had heart surgery. During my nutrition consultation, the patient was completely disinterested and continued to stuff a Big Mac in his face, while I was trying to offer my advice on a therapeutic diet to him. This was very frustrating and this was the last straw for me... I knew that I needed to get out and make a career shift!!!

This personal story shared by Cathy highlighted how she had reached her limit, and she knew that she needed to make a career change and follow her underlying interests related to preventative nutrition care. This eventually led her to future positions, which were involved with the Statewide Nutrition Education Program and USDA TEAM nutrition programs that she found more satisfying based on her “re-discovery” of what she wanted to do with her career pathway.

These personal stories along with others shared in Chapter 4 highlighted the importance of how key career turning points that the participants encountered caused career transformations to occur for them. As Ibarra (2003) remarked, transformations often can lead to self-discovery and allow individuals to immerse in new identities and rethink the direction or pathway of their own lives. Through the career transformations experienced by these participants, they were able to make the needed changes to gain better control of their careers and attain better personal and career satisfaction.

Research Question #3

How did they emerge into leaders?

The journey towards leadership as described by the participants all shared a common theme; volunteerism, which emerged as being the most common aspect needed for leaders to continue along their career pathway towards leadership success. Bennis (2009) asserted that “the process of becoming a leader is as much the same process as becoming an integrated human being. For the leader, as for the integrated person, life itself is the career” (p. xxxii). One of the selection criteria to be chosen as a participant for this research study was that the participant needed to (1) hold an elected position at the district, state or national level of AND; (2) hold a position as a department chair or professor of a credentialed program in dietetics; or (3) receive a recognition award as an exemplary leader for the profession of dietetics. Of the participants chosen, the researcher was able to include seven Past Presidents of the Academy of Nutrition and Dietetics. This opportunity provided the researcher with a valuable opportunity to gain insight about the leadership journey that these individuals navigated to become the “voice” and a key influential leader of the Academy of Nutrition and Dietetics.

Given the lack of research specifically focused on leadership in dietetics, research was drawn from other allied health professions. The literature on nursing leadership discussed four different career paths chosen by nursing leaders. These pathways were identified as being: (1) Path of Ideals, (2) Path of Chance, (3) The Career Path, and (4) the Temporary Path (Bondas, 2006). The Path of Ideals can be characterized as having a personal drive or conscious choice towards becoming a nursing leader. The Path of Chance focused on leaders who were mentored

or guided through their pathway to leadership. The Career Path was focused on individuals who were more concerned with their own interests and ambitions. Lastly, the Temporary Path was described as a pathway taken to apply for a trial leadership position and the ability to step back from their position if needed (Bondas, 2006).

Based upon the findings from this research, it appeared that the RDN participants fell into a combination of the two Paths previously described above, the Path of Ideals and Path of Chance. Among the participants several shared stories which related closely with the Path of Ideals, which is focused on having a personal drive or conscious choice towards becoming a leader.

As shared by Lynn,

Everyone is a leader... they have to develop that potential within themselves... you have greatness inside of you, even if you don't seek to be the Academy President, but if you want to become a district President or a Dietetic Practice Group member, etc.... you can leader within your community, church, etc.... just find your inner strengths and believe in yourself.

This story highlighted the personal inner drive needed to become a dietetics leader. Lynn discussed the importance of developing one's leadership potential through becoming involved in volunteer opportunities. This concept was also supported by Rose,

Each of us has within us the power and the responsibility of leadership. How we use this power and fulfill our responsibilities ... is up to each of us. While there are people who are "born leaders," leaders can also be made. I believe that leadership is a skill that can be learned and put into action. Through my experiences, I have learned that leadership opportunities often arise when you are deciding what you are meant to do, especially if you are passionate about it. So, be sure to step back and assess your career, because as stated by (Bailey, 2011) "when leaders are able to find their niche, they are able to find their brilliance."

Rose discussed the importance of finding a career path that you are passionate about. She stated that “throughout your career journey you will be able to find leadership opportunities that align with your personal career interests. Because becoming a leader is something that everyone had the inner ability to achieve, they just need to believe within themselves and be motivated to do it.”

The second ideal described was the Path of Chance, which focused on having leaders who were mentored or guided along their own personal leadership journey. As discussed previously, informal mentoring existed among almost all participants. The concept of mentoring was an emergent theme and career influencer that affected the pathways chosen by the participants.

The influence of mentoring and the influential role it played in developing the leadership journey of Gloria is shared below,

One of my mentors named Lucy helped me understand workplace politics, the importance of networking, and how to choose the right battles to fight. She provided a kind, caring, professional community where I was able to learn during the first 10 years of my career. Another influential mentor was Marilyn, who coined the phrase “draw a bigger circle!” This helped me understand that when things change, which they always do-embrace the change by increasing the size of your mental circle! By drawing a bigger circle you can be a lifelong learner, open to new ideas with different ways of doing things.

Mentors are such an important component to the development of leaders, especially for women and marginalized population groups to find someone inspirational that they can connect with and establish a mutual trust. As discussed by Washington (2010), mentoring is a powerful tool for professional development. Women are changing the landscape of the workplace due to their increased level of participation and job opportunities within the workforce. However, even

though women are combatting the glass-ceiling dilemma they still remain in need of acquiring more available mentors to assist in the navigational labyrinth of professional and personal leadership development.

Research Question #4

What are the personal attributes of a leader?

In this section, I will discuss the personalities and styles which were self-reported by the participants. No measurement tool was used, but the personality styles described by the Myers-Briggs and Holland's Personality Traits were used as a classification method to organize the findings which were self-reported as the participants own interpretation of their personality styles and traits. A finding from the twenty interviews suggested that the most consistent personality trait self-reported was being an Introvert (fourteen participants) versus being an Extravert (six participants). In regard to the MBTI (Myers-Briggs Type Indicator) the one indicator that was focused on was "life attitude," which is categorized as being an extravert or introvert. As discussed by Barr & Barr (1989), extroversion is a process focused on the external world or people and activities, whereas introversion is more inwardly focused on concepts and ideas.

The theory related to selection of a vocation or academy major as an expression of one's personality is Holland's hexagon personality model. This model (Holland, 1973) classified people based on their resemblance to one or more of six theoretical or ideal personality types (Realistic, Investigative, Artistic, Social, Enterprising, and Conventional). The analysis performed within this study was through narratives and personal self-assessments where the participants shared descriptions about their own personality styles. Based upon these self-

assessments the researcher made correlations in the broad sense of how certain identifiable similarities were found among career pathways and leadership experiences of the participants chosen for this study. (Refer to Table 2 for Summary on Participants Personality Styles).

The findings from the narrative analysis showed that based on Holland's personality styles 100% of the subjects were reported as being social/helpers, which made sense since the career possibility of being a clinical dietitian was in this career grouping. According to Holland's Theory (1973, 1997) a social/helper often prefers social occupations and situations that involve the manipulation or others to inform, train, develop, cure or enlighten. These characteristics closely align with the mission and values of the profession of nutrition and dietetics. Some of the other key findings showed that 80% were conventional/organizers, 75% as investigative/thinkers, and 50% as enterprising/persuaders. (Refer to Figure 7 for Self-Report of Holland's Personality Traits).

Also, the concept of transformational versus transactional leadership emerged as a consistent pattern among all participants. As described by Burns (1978) transformational leadership style is a method that promotes followers to engage in a mutual process of raising one another to higher levels of morality and motivational goals. Transactional leadership which is focused on using rewards and punishment to influence employee behavior was not identified among any of the participants. Instead, the personal stories that were shared highlighted examples of the four components seen among transformational leaders: charismatic leadership, inspirational motivation, intellectual stimulation, and individual consideration (Bass 2008).

One of the most consistent styles that emerged was intellectual stimulation, which encouraged keeping a focus on the organizational plan and vision for the "whole" association,

not their own personal leadership agendas. Also the leadership style of individual consideration emerged, which related to leaders not becoming focused solely on their own personal agendas, but the needs required to promote the whole group.

As discussed by Caren,

I believe that it is important to achieve the organizational goals in any type of situation... and not to put your own personal agenda first. For example, when I am asking for more staff, I always tie it up to the upper organizational goals such as patient safety, because you have to tie into the larger picture when identifying your goals.

An example of how Anna uses her leadership skills to be more of a facilitator for the group is discussed,

I am a more a behind the scenes leader and act as a facilitator. Sometimes people may or may not even recognize where we are going or what we are doing? For example, I call people in for a meeting in the summer, to talk about our program. My method to make it work is to let people just talk the 1st day and some people feel good, where others wanted more structure. It is my responsibility to take notes and summarize, the key decisions that we need to make the next day. I believe that this is an effective leadership method which allows me to facilitate the decisions without having me tell people that this is the way it had to be done.

A similar viewpoint was shared by Kevin,

As a leader you may have certain personal goals or “pet projects”, but with the Strategic Plan that was developed in the early 90’s the Academy of Nutrition and Dietetics, there are certain goals that need to be accomplished. To be an effective leader I believe that even though there are areas that you might be passionate about as the leader, it is your responsibility to consider the goals of the association and what particular tasks and goals can be accomplished through your own efforts and also how to encourage others around you to recognize those goals as well.

As one can see the stories shared by these participants are closely aligned with the style of intellectual stimulation and individual consideration leadership.

In addition, the leadership styles of inspirational motivation and being a charismatic leader were evident in the experiences shared by participants. The style of inspirational motivation is focused on leader's who are able to inspire those around them to find personal meaning in their work. A charismatic leader is someone who makes those around them feel good and proud about the tasks that they were trying to accomplish. Through variations of each of these four leadership components, the participants were able to serve effectively as leaders and promote the forward success of the dietetics profession. Here are a few additional examples of personal experiences shared by participants which reflected their variations of these different leadership styles.

As shared by Kevin,

One of the best compliments I have ever been given, is that you let us do our jobs... in other words I entrusted and delegated tasks I did not micromanage. My leadership style is motivational and inspirational, which made people want to do a good job, rather than have someone breathing down their necks and criticizing them all of the time.

A similar example of being an inspirational and charismatic leader can be described by

Lynn,

As a leader I am not going to stand-up and be the most Academic person. Instead, I want to motivate people to be involved.... I might be fooling myself but I think I have a personality to bring people together. I provoke people to think, some people may say it is a negative or that it doesn't bring consensus... .but I like to raise questions and get others to think outside of the box.

Wendy also expressed how she found herself as a leader and the qualities that emerged aligned with the styles of intellectual stimulation and individual consideration. As stated by Wendy,

I know that I am not perfect, but I am open to other's providing input on how I can improve myself and the task on hand. I believe that it is important to be able to accept

criticism as a leader and keep it in perspective, because it often is not about you. Also, I like to lead but there need to be efficiencies and I am always looking for ways to make it easier for me or the next person who will be handling the task.

Another interesting viewpoint was shared by Kelly and how in order to be an effective leader one must take into consideration the various generations of individuals who are all together in the same workplace and be able to know how to keep all of them engaged and motivated to work together as a team:

I believe that it is important as a leader to learn more about the how to engage in the workplace 4 generations and identify what is important to each generation and what areas they find critical as we move forward and develop a plan that everyone in the group can work together on achieving for the future organizational growth.

This section reviewed the various personality traits and attributes that can be found in a leader and were described based upon the findings from the personal stories shared by the various participants. These insights provide a valuable self-reported assessment on the key leadership characteristics that existed among recognized leaders, and can assist in the creation of future leadership development materials, which can be specifically targeted to RDNs.

Limitations of the Study

There are several limitations with this study. The first can be due to the narrative constructionist approach, there are limitations with the data analysis performed. This approach focused on contextual interrelations in the construction of narratives. This approach does not deal with specific self-contained stories. It also does not treat life stories as holistic accounts (Esin et al, 2013). However, the researcher did try to preserve the narrative truth in regards to the specific situations and key moments as described by each of the subjects.

Another key limitation can be related to the personal association with the type of subjects and their professional involvements in leadership positions within their professions. The potential of researcher bias existed because the researcher was also a Registered Dietitian and professional colleague, who has held a variety of leadership positions within her professional association, Academy of Nutrition and Dietetics. Therefore, the researcher may have included some potential bias in the development and administration of the interview questions to the subjects. As described by (Chase 2005; Denzin & Lincoln, 2005) researchers who have studies based upon in-depth interviews often are faced with the difficulty of shifting their understanding of the nature of the interview questions and answers. It is often a delicate balance of accomplishing the task of transforming the interview-interviewee relationship into one of a narrator and listener.

When the researcher created a broad set of interview guide questions, this was to assist the interviewee in sharing their own personal story and discussion about the topic being investigated. But, it should be noted that personal influence and close proximity to the topic being investigated may have influenced the shaping and direction of certain questions that were being asked of the subjects during the interview (Chase 2005; Denzin & Lincoln, 2005). In regards to the health professions, it is often common to have an interest in the views and ideas of their colleagues. There are advantages associated with interviewing peers such as having a greater understanding for the cultural concepts being discussed and less room for misinterpretation. Also, peer interviews can create a balance of equality between the researcher and interviewee, allowing the participants to open-up and trust the researchers. However, limitations can exist such as the potential for misunderstandings to occur from the assumptions

of common values and beliefs. Also, there can exist the danger of over-involvement and identification with colleagues (Holloway & Wheeler, 2010).

Another limitation can be the challenge of data interpretation and preservation of meaning when translating interview transcripts. When translating the interview transcripts the researcher used coding and categorizing, which in narrative analysis can sometimes fragment the stories being shared by the participants (Mills & Berks, 2014; Creswell, 2007, 2013). However, in order to preserve and allow the interviewee voice to be heard a section identified as “words of wisdom” was included in the analysis of the narrative transcripts.

The sample group consisted of two male participants included within this study. However, this gender distribution is common within the healthcare profession, especially within the field of nutrition and dietetics where 2016 registry statistics of credentialed RDN’s show 93.84% are female, 3.82% are male and 2.33% are non-reported (CDR, 2016). Also, for ethnic diversity there were two African American, two Hispanic/Latino, and one Asian/Indian represented from among the twenty participants chosen for this study. Therefore, the findings from this study cannot be generalized for all RDN’s who may be from diverse ethnic backgrounds. As reported in the 2016 registry statistics ethnic breakdown by group are: 76,690 are White; 3,780 are Asian/Indian; 3,030 are Hispanic/Latino; and 2,490 are African American are reported as being RDN’s (CDR, 2016). However, the issue of diversity and lack of representation remains an area of concern within the field of nutrition and dietetics and this study even though not generalizable to a wide group, does contain valuable perspectives about issues faced along their career and leadership pathways of participants from these diverse ethnic groups.

Conclusions

This study captured the personal stories and voices of these Registered Dietitian Nutritionists (RDN's), as they described the challenges and successes that they faced along their own career and leadership pathways. As discussed by (Kobel, 1997; Laramée, 2014) very little research exists related to leadership and career pathway development of RDNs. However, the findings from this research identified the influence of mentors, career pathways, personality traits, transformational leadership and career experiences, and the personal leadership journey of participants as integral to the understanding of the career pathway and leadership experiences of registered dietitians. These findings are much needed as a contribution towards the lack of literature specific to RDN's. Due the every changing landscape of the allied healthcare professions, the dietetics profession needs to focus on gaining a better understanding about leadership, specific to dietetics professionals. The personal experiences shared by these participants discussed the transformational leadership experiences that they faced along their career pathways, which led to their development into becoming recognized leaders of the dietetics profession.

Recommendations for Future Research

Based upon the findings from this research, there are several areas that could be identified for future research. First, the issue of diversity (gender and ethnicity) within the dietetics profession needs to be further evaluated. Despite, recent efforts to promote the growth of diversity, statistics reflect that there still exists a definite need to diversify the profession. As

the United States becomes more culturally diverse, it is important that the dietetic practitioners who are assisting them with meal planning, recipe modifications and adherence to therapeutic diets are equipped with the cultural knowledge to assist them. Therefore, future research should aim to focus on specific minority groups within the profession and gain insight about their career pathway and leadership experiences that they encountered.

Another idea for future research would be to evaluate the career pathways and leadership involvement among newly credentialed RDNs. By investigating the career influencers and level of involvement or interest in leadership roles would provide valuable insights to assist in the future training and development or programs for this population group. Currently, the AND offers programs to assist with career planning and leadership development, but insights gained from a study specifically targeted at this audience would offer new and valuable data that currently does not exist.

In the past, the AND offered a Leadership Institute, specifically created to help develop the leadership potential of members. However, in recent years this offering is no longer available. Additional research needs to be conducted on leadership and career pathway development among the profession of dietetics. It is important for dietitians to be able to reflect upon their own leadership styles and explore various methods and techniques that can allow them to enhance their leadership abilities and acquire leadership positions within the rapidly expanding area of healthcare in our society today. If dietitians want to remain relevant as the nutrition content experts, they need to have influential positions of leadership within the healthcare profession. They need to hold influential leadership positions, so their voice can

continue to be heard as the nutrition experts in the ever-changing landscape of healthcare in our current global society.

A key theme that emerged was the influence of mentors in the career pathway development of dietetic professionals. It would be interesting to evaluate how leaders within the dietetics and nutrition profession mentor other professionals. This topic was highlighted within this research study, but future research could expand and identify how the mentoring of students, newly credentialed RDNs and nutrition colleagues across various disciplines can influence the success of the nutrition profession in promoting and training future leaders.

Another recommendation for future research would be to consider using a measurement tool such as the Myer's Briggs Type Indicator or Holland's Personality Style on various types of leaders within the dietetics and nutrition profession. It might be useful to have a specific classification that is based upon test results to classify and interpret how personality styles may affect the leadership styles and career pathway choices of dietetics professionals. This research was qualitative, but future research related to this topic should consider using quantitative measurement tools to better assess and classify personality styles.

This research study focused specifically on credentialed RDN's, but the field of nutrition is filled with many other professionals who were not included. It would be beneficial for future research to include how nutrition professionals (PhDs in nutrition, food scientists, food industry, culinary, business, public health agencies, politics, etc...) value the importance of leadership within their own career pathways. It would be useful to investigate how collaboration and working relationships exist between RDNs and other nutrition professionals. In order to promote leadership and career pathway growth and success all areas of nutrition professionals not solely

RDN's should be taken into consideration, so that findings can be applied and generalized to a larger sector of this population group who are all associated with the field of nutrition.

Lastly, an interesting area to explore may be related to career pathway growth and a deeper investigation into why certain areas of nutrition seem to promote and have a higher rate of leaders versus others. The field of nutrition is very extensive and is not limited to RDNs; therefore, further investigation into the working relationships, successes and barriers that are faced by PhDs in nutrition, food scientists, food industry, culinary, business, public health agencies, politics, etc... would provide valuable insight into how "all" nutrition professionals can continue to work collaboratively and effectively together. We should also consider looking at the field of nutrition from an international viewpoint and take into consideration collaborations among various countries and how we can all work together as nutrition professionals to lead the future health and wellness of our entire global society.

Implications

Through the process of acquiring subjects who met the requirements needed to qualify as being a recognized leader within the profession of dietetics, I was humbled by the willingness of my colleagues to assist me by being part of my dissertation research. The idea of career pathway and leadership research specific to dietetics, is an area where very little research has been published. However, the importance of leadership for our profession of dietetics is such an important area, where future attention needs to be directed. When I approached potential subjects to be included within my study, I was overwhelmed by their genuine interest in this topic and how they were extremely generous in sharing their time for the interviews and

communication with me throughout the data collection process. I strongly believe that it is imperative for future dietetics practitioners to gain a better understanding about the importance of career influencers (mentors, work, education, diversity) and how these factors can play an integral role in their own career pathway directions.

Another key area that needs to be better understood is related to leadership development. The ongoing promotion of creating effective leaders is something that the dietetics profession needs to embrace. As shared by McCollum (2014), “the challenges that we are willing to embrace, the risks we are willing to take, and the leadership we demonstrate together will affect the health of our nation and determine the opportunities for our profession for generations to come.” I believe that my research study identified several key areas related to leadership and career pathway development, which were based upon the personal stories and words of wisdom shared by these recognized leaders within the profession of nutrition and dietetics.

The literature regarding career pathway development and leadership specific to the field of nutrition is limited. Therefore, consideration for some of the above-stated areas for future research would contribute greatly toward the professional literature. We are now living in a global society where nutrition is of ongoing importance and relevance. Therefore, investigation into successful career pathway development and leadership training will only continue to strengthen the value of nutrition professionals for both personal and professional success in their future endeavors.

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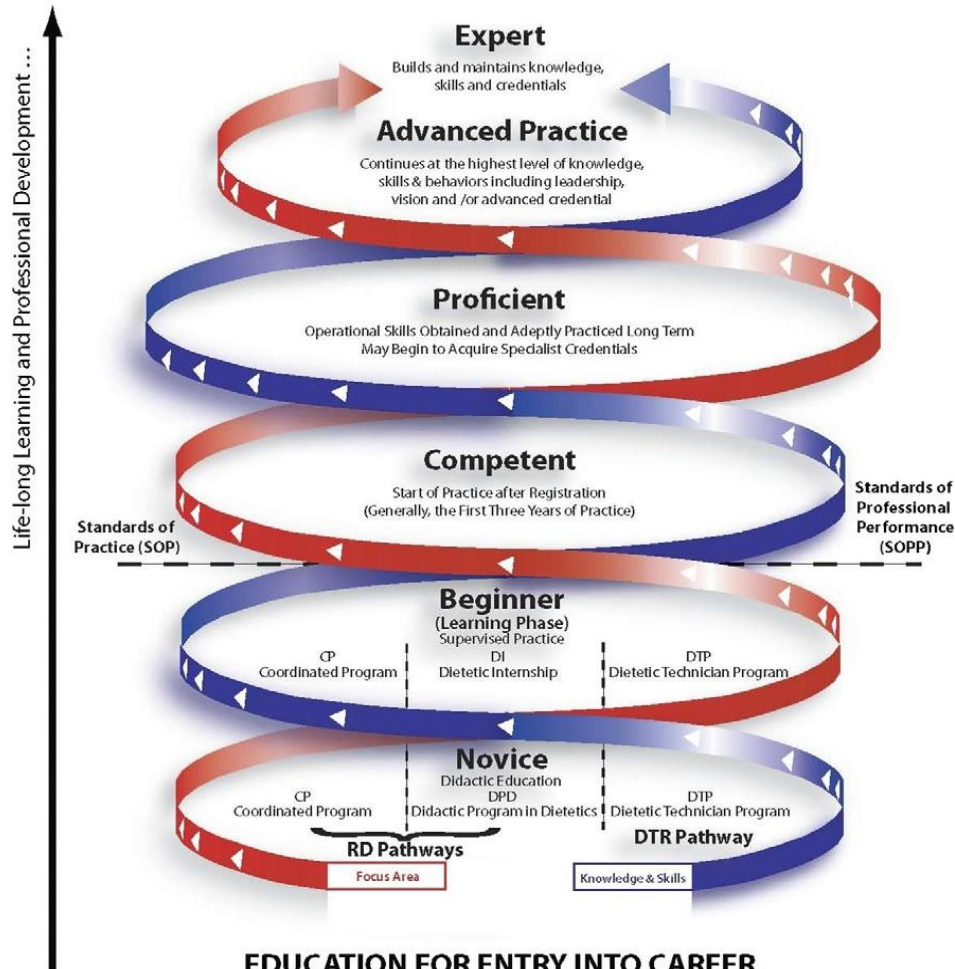
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APPENDICES

APPENDIX A

ACADEMY OF NUTRITION AND DIETETICS CAREER GUIDE

Dietetics Career Development Guide



EDUCATION FOR ENTRY INTO CAREER Associate, Baccalaureate or Advanced Degree

Definition of Dietetics: Dietetics is the integration, application and communication of principles derived from food, nutrition, social, business and basic sciences, to achieve and maintain optimal nutrition status of individuals through the development, provision and management of effective food and nutrition services in a variety of settings.

Approved 9/29/10; 10/11/10

APPENDIX B

HISTORY OF DIETETICS EDUCATION COMMISSION ON ACCREDITATION FOR
DIETETICS EDUCATION POLICY AND PROCEDURE HANDBOOK OF THE
ACADEMY OF NUTRITION AND DIETETICS

History of Dietetics Education

The early leaders in ADA laid a strong foundation for dietetics education. Throughout its history, ADA has continued to provide leadership for a dynamic, progressive system educating entry-level practitioners.

1923–The ADA Education Section first discussed plans for courses for student dietitians.

1924–The minimum specifications for a course for student dietitians were introduced by Ruth Wheeler, PhD.

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1927–The “Outline for Standard Course for Student Dietitians in Hospitals” was approved by the Association. It required that students have a baccalaureate degree with a major in foods and nutrition and receive at least six months of training, under the supervision of a dietitian, in a hospital.

1928–A list of hospitals with the approved course was published.

1929–The need for evaluating course quality became evident as the number of programs increased. It was decided that each hospital on the approved list was to be visited by a committee of three ADA members. The members were chosen for their ability in the educational field, their understanding of the hospital situation and their geographic location. These site visits were conducted every two years.

1932–An administrative course for dietitians was developed, and recommended academic requirements for dietitians were outlined.

1947–Plan I, academic standards for entering internships, was published.

1955–Plan II, which included four subject areas and a range of semester credit hours, was published.

1958–Plan III, which included required areas of learning and designated core subjects, emphases and concentrations, was published.

1962–The first Coordinated Undergraduate Program was developed. As an accredited program, it integrated experiential and academic components in an undergraduate curriculum.

1971–Plan IV, with competency-based minimum academic requirements, was introduced.

1973–Individualized, post-baccalaureate Dietetic Traineeships began and were approved.

1974—In response to a need for support personnel at the associate's- degree level, Essentials were published for approving Dietetic Technician Programs.

1974—In an effort to maintain appropriate standards for program review, ADA began program accreditation and was recognized by the U.S. Department of Health, Education and Welfare, now USDE, as the accrediting agency for Dietetic Internships and Coordinated Undergraduate Programs. At the same time, the Commission on Postsecondary Accreditation (COPA), to be succeeded by the Commission on Recognition of Postsecondary Accreditation (CORPA), also recognized ADA as an accrediting agency for Coordinated Undergraduate Programs, and later for Dietetic Internships.

1986—The ADA Council on Education (COE) implemented a new structure with three subdivisions: Division of Education Programs, Division of Education Standards and Division of Education Accreditation/Approval.

1987—The Knowledge Requirements for Dietitians were implemented, as Plan V, under the Standards of Education. The Standards of Education were the minimum criteria to be met by all dietetics education programs. Approval of Preprofessional Practice Programs (AP4s), as an alternative to Dietetic Internships, began.

1988—All individual experiential pathways for registration eligibility were discontinued by the Commission on Dietetics Registration (CDR).

1991—The number system (plans I to V) for ADA's approved academic requirements was discontinued. The Standards of Education were updated to reflect results of the 1989 Role Delineation Study. Programs approved as meeting the Knowledge Requirements for Entry-Level Dietitians were designated as Didactic Programs in Dietetics (DPD). Programs were expected to continually update their curriculums based on current practice in dietetics.

1993—The ADA Board of Directors, the House of Delegates, COE and CDR approved the recommendation from the ADA/CDR Dietetics Education Task Force to accredit all dietetics education programs with a supervised practice component.

1994—A plan to accredit Dietetic Technician and Preprofessional Practice Programs, as well as Coordinated Programs and Dietetic Internships, was implemented. Preprofessional Practice Programs were designated as Dietetic Internships when accreditation was conferred.

1994—The Standards of Education were revised to reflect environmental changes affecting dietetics practice, to add new requirements for continued USDE recognition, and to clarify and streamline the criteria and documentation required for accreditation and approval.

1994–The ADA Bylaws were amended to create the administratively autonomous Commission on Accreditation/Approval for Dietetics Education (CAADE) to replace the COE Division of Education Accreditation/Approval.

1994–ADA/CDR Future Search Conference was held to determine the direction of dietetics education and credentialing to meet the challenges of future practice. The Educational Competencies Steering Committee was formed to address the first priority recommendation for education from the Future Search Conference. The charge was to “identify core competencies for all dietetics practitioners and develop a new matrix for more opportunities for concentration based on additional knowledge and skills.”

1995–Surveys of dietetics educators and practitioners and CDR Practice Audit of practitioners and employers were conducted.

1996–On the basis of national survey data, foundation knowledge, skills and competencies for entry-level dietitians and dietetic technicians were developed. These recommendations for preparing entry-level practitioners were approved by the Council on Professional Issues (CPI) and forwarded to CAADE for implementation.

1997–The Standards of Education were revised to incorporate recommendations for competency-based education and for emphasis areas for entry-level dietitian supervised practice programs.

1999–In response to changes in higher education, CAADE implemented the same accreditation process, including a validation component (e.g., an on-site visit by a team of peers), for DPDs as that used for other dietetics education programs.

1999–The ADA Bylaws were amended to reflect changes in the Commission’s name and functions. CAADE became the Commission on Accreditation for Dietetics Education (CADE).

2001–CADE board approved new 2002 Eligibility Requirements and Accreditation Standards, developed by the Accreditation Standards Committee based on national data, effective March 1, 2003.

2005–CADE Accreditation Standards Committee expanded and charged to begin review and revision of the 2002 ERAS—an activity conducted at least every five years in response to significant events impacting dietetics education and practice.

2008–CADE board approved new Eligibility Requirements and Accreditation Standards revised by the Accreditation Standards Committee based on national data, effective March 1, 2009.

2012–The American Dietetic Association and the Commission on Accreditation for Dietetics Education changed their names on January 1, 2012 to the Academy of Nutrition and Dietetics and the Accreditation Council for Education in Nutrition and Dietetics (ACEND).

2012–The ACEND board of directors approved the 2012 revision of the accreditation standards for all program types, to be effective June 1, 2012.

APPENDIX C

PROFESSIONAL DEFINITIONS FROM THE ACADEMY OF NUTRITION AND
DIETETICS AND THE STATE OF ILLINOIS

Educational and Professional Requirements for Registered Dietitians

Registered Dietitians (RDs) are food and nutrition experts who have met the following criteria to earn the RD credential:

Completed a minimum of a bachelor's degree at a US regionally accredited university or college and course work accredited or approved by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) of the Academy of Nutrition and Dietetics.

Completed an ACEND-accredited supervised practice program at a health-care facility, community agency, or a foodservice corporation or combined with undergraduate or graduate studies. Typically, a practice program will run six to 12 months in length.

Passed a national examination administered by the Commission on Dietetic Registration (CDR). For more information regarding the examination, refer to CDR's website at www.cdrnet.org.

Completed continuing professional educational requirements to maintain registration.

Some RDs hold additional certifications in specialized areas of practice. These are awarded through CDR, the credentialing agency for the Academy, and/or other medical and nutrition organizations and are recognized within the profession, but are not required. Some of the certifications include pediatric or renal nutrition, sports dietetics, nutrition support, and diabetes education.

In addition to RD credentialing, many states have regulatory laws for dietitians and nutrition practitioners. Frequently these state requirements are met through the same education and training required to become an RD.

College Coursework

Dietitians study a variety of subjects, ranging from food and nutrition sciences, foodservice systems management, business, economics, computer science, culinary arts, sociology, and communication to science courses such as biochemistry, physiology, microbiology, anatomy, and chemistry.

International Professionals

Individuals who completed their education and training outside of the US, or received credentials in another country, may be eligible to become credentialed RDs in the US. Individuals who have completed the education and credentialing requirements in one country may be eligible for

another country's credentialing examination if the two countries have entered into a “reciprocity” agreement to allow this. If reciprocity does not apply, you must have your academic degree validated as equivalent to the bachelor’s or master’s degree conferred by a US regionally-accredited college or university and complete an ACEND-approved supervised practice requirement to establish your eligibility to sit for the exam. It is important to note that all individuals who establish registration eligibility — whether under the provisions of a reciprocity agreement or through the combination of a validated academic degree and supervised practice program — must successfully write the Registration Examination for Dietitians to earn the RD credential.

Employment Opportunities for Registered Dietitians

Registered dietitians work in a wide variety of employment settings, including health care, business and industry, community/public health, education, research, government agencies, and private practice. Many work environments, particularly those in medical and health-care settings, require that an individual be credentialed as an RD.

RDs work in:

Hospitals, HMOs or other health-care facilities, educating patients about nutrition and administering medical nutrition therapy as part of the health-care team. They may also manage the foodservice operations in these settings, as well as in schools, day-care centers and correctional facilities, overseeing everything from food purchasing and preparation to managing staff.

Sports nutrition and corporate wellness programs, educating clients about the connection between food, fitness and health.

Food and nutrition-related business and industries, working in communications, consumer affairs, public relations, marketing, product development, or consulting with chefs in restaurants and culinary schools.

Private practice, working under contract with health-care or food companies, or in their own business. RDs may provide services to foodservice or restaurant managers, food vendors and distributors or athletes, nursing home residents or company employees.

Community and public health settings, teaching, monitoring and advising the public and helping improve their quality of life through healthy eating habits.

Universities and medical centers, teaching physician’s assistants, nurses, dietetics students, dentists and others the sophisticated science of foods and nutrition.

Research areas in food and pharmaceutical companies, universities, and hospitals directing or conducting experiments to answer critical nutrition questions and find alternative foods or nutrition recommendations for the public.

DTR Educational and Professional Requirements

Dietetic technicians, registered (DTRs), are trained in food and nutrition and are an integral part of the health-care and foodservice management teams. DTRs have met the following criteria to earn the DTR credential:

Completed a dietetic technician program approved by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) of the Academy of Nutrition and Dietetics, that includes 450 hours of supervised practice experience in various community programs, health-care and foodservice facilities and has completed at least a two-year associate's degree at a U.S. regionally accredited college or university.

OR

Completed coursework in an ACEND-accredited didactic program or coordinated program in dietetics and has completed at least a bachelor's degree at a U.S. regionally accredited college or university.

After completing the degree and dietetics coursework, pass a national examination administered by the Commission on Dietetic Registration (CDR). For more information regarding the examination, refer to the CDR website.

Completed continuing professional educational requirements to maintain registration.

College coursework

The course work for dietetic technicians includes a variety of classes in food and nutrition sciences, foodservice systems management and a range of general science courses.

Employment opportunities

Dietetic technicians, registered work independently or as a team member under the supervision of registered dietitians in a variety of employment settings, including health care, business and industry, community/public health, foodservice and research.

Many work environments require that an individual be credentialed as a DTR.

DTRs work in:

Hospitals, HMOs, clinics, nursing homes, retirement centers, hospices, home health-care programs and research facilities helping to treat and prevent disease by conducting screens,

gathering data and performing other tasks to assist the registered dietitian in providing medical nutrition therapy as an important part of health-care teams.

Schools, day-care centers, correctional facilities, restaurants, health-care facilities, corporations and hospitals, managing employees, purchasing and food preparation and preparing budgets within foodservice operations.

Women, infant, children (WIC) programs, public health agencies, Meals on Wheels and community health programs, developing and teaching nutrition classes for the public.

Health clubs, weight management clinics and community wellness centers, helping to educate clients about the connection between food, fitness and health.

Food companies, contract food management companies or food vending and distributing operations developing menus, overseeing foodservice sanitation and food safety and preparing food labeling information and nutrient analysis.

Licensure

Forty-six states currently have statutory provisions regarding professional regulation of dietitians and/or nutritionists. The rationale for legislatures acting to protect these titles is simple: the public deserves to know which individuals are qualified by education, experience and examination to provide nutrition care services.

Enacting licensure laws in states that do not have a law remains a high priority of the Academy of Nutrition and Dietetics. Many will say that in an era of less government, fewer licensure laws are necessary and that government should be getting out of this arena. The Academy strongly rejects this notion. State legislatures are charged with protecting the health and safety of the public. Accordingly, every state regulates occupations and professions that have an impact on the public's health and safety.

Unfortunately, until relatively recently, the vital link between nutrition and good health had not been fully recognized. As the public has become aware of the importance of good nutrition, many entrepreneurs have taken advantage of the newly recognized market. While many of these products and services may be worthwhile when used in the context of an overall good nutrition regimen, some are simply capitalizing on an uninformed public that is eager for information.

Licensing dietitians and nutritionists assures the public that individuals disseminating nutrition advice have the appropriate education and experience. Individuals seeking nutrition advice who are medically compromised deserve the assurance that the individual treating them has the requisite education and experience. Licensure laws protect the public from unscrupulous and unqualified individuals who would portray themselves as nutrition experts.

As educated and qualified healthcare practitioners, dietitians and nutritionists have the primary obligation to promote public health. The rationale behind licensure is consistent with this obligation. Licensure laws are not intended to restrict freedom of speech or to monopolize any business. The same arguments opposing licensure laws could be used against licensure of physicians, nurses and other healthcare professionals, but legislatures in every state have recognized that the protection of the public health justifies regulation. The same argument should prevail when discussing the licensure of dietitians and nutritionists.

PROFESSIONS AND OCCUPATIONS

(225 ILCS 30/) Dietitian Nutritionist Practice Act.

(225 ILCS 30/45) (from Ch. 111, par. 8401-45)

(Section scheduled to be repealed on January 1, 2023)

Sec. 1. Short title. This Act may be cited as the Dietitian Nutritionist Practice

Act. (Source: P.A. 97-1141, eff. 12-28-12.)

Dietitian nutritionist; qualifications. A person shall be qualified for licensure as a dietitian nutritionist if that person meets all of the following requirements:

(a) Has applied in writing in form and substance acceptable to the Department and possesses a baccalaureate degree or post baccalaureate degree in human nutrition, foods and nutrition, dietetics, food systems management, nutrition education, nutrition, nutrition science, clinical nutrition, applied clinical nutrition, nutrition counseling, nutrition and functional medicine, nutrition and integrative health, or an equivalent major course of study as recommended by the Board and approved by the Department from a school or program accredited at the time of graduation from the appropriate regional accrediting agency recognized by the Council on Higher Education Accreditation and the United States Department of Education.

(b) Has successfully completed an examination authorized by the Department which may be or may include examinations given by each of the American Clinical Board of Nutrition, the Certification Board of Nutrition Specialists, the Clinical Nutrition Certification Board, and the Commission on Dietetic Registration, or another examination approved by the Department.

The Department shall establish by rule a waiver of the examination requirement to applicants who, at the time of application, are acknowledged to be certified clinical nutritionists by the Clinical Nutrition Certification Board, certified nutrition specialists by the Certification Board of Nutrition Specialists, diplomats of the American Clinical Board of Nutrition, or registered dietitians by the Commission on Dietetic Registration and who are in compliance with other qualifications as included in the Act.

(c) Has completed a dietetic internship or documented, supervised practice experience in dietetics and nutrition services of not less than 900 hours under the supervision of a certified

clinical nutritionist, certified nutrition specialist, diplomat of the American Clinical Board of Nutrition, registered dietitian or a licensed dietitian nutritionist, a State licensed healthcare practitioner, or an individual with a doctoral degree conferred by a U.S. regionally accredited college or university with a major course of study in human nutrition, nutrition education, food and nutrition, dietetics, food systems management, nutrition, nutrition science, clinical nutrition, applied clinical nutrition, nutrition counseling, nutrition and functional medicine, or nutrition and integrative health. Supervised practice experience must be completed in the United States or its territories. Supervisors who obtained their doctoral degree outside the United States and its territories must have their degrees validated as equivalent to the doctoral degree conferred by a U.S. regionally accredited college or university.

(Source: P.A. 97-1141, eff. 12-28-12.)

APPENDIX D

OVERVIEW OF *DIETETICS EDUCATION TODAY* COMMISSION ON ACCREDITATION
FOR DIETETICS EDUCATION POLICY AND PROCEDURE HANDBOOK OF THE
ACADEMY OF NUTRITION AND DIETETICS

The **Schematic for Dietetics Education** (Fig. 1) encompasses two components required to educate a dietetics practitioner: (1) Didactic education, which provides the *foundation knowledge* necessary to function in society and on which practitioner competencies can be built; (2) Supervised practice, which provides the *practitioner competencies* essential to perform the specialized functions of an RD or a DTR.

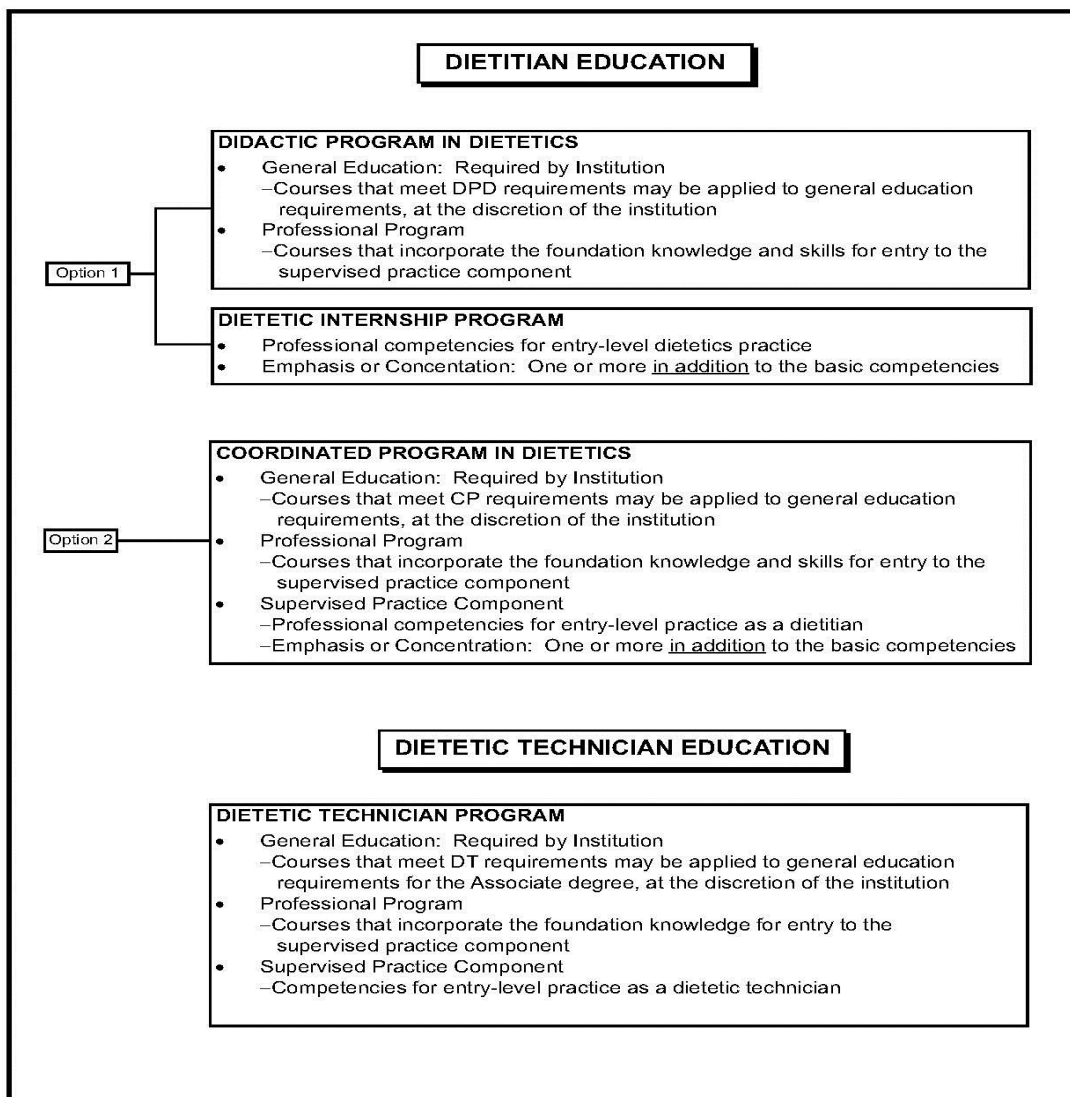


FIG 1. Schematic for Dietetics Education

APPENDIX E

CAREER LADDERS FOR RDS IN HOSPITAL SETTINGS

Setting	Level	Requirements
Pediatric Hospital	Level I	RD eligible
	Level II (novice) Level III (competent) Level IV (proficient-expert)	RD; LD + 1 yr pediatric experience or 3 years clinical experience RD, LD, master's or specialty certification, 4 years pediatric experience or 6 years clinical experience RD, LD, CSP, master's 8 years experience or 7 years clinical + 4 years pediatric *Master's degree counts as 1 year experience. CNSD counts as 0.5 years experience; CSP and COE count as 1 year experience. 2.5% pay increase with advancement to next rank.
Pediatric Hospital	Staff Clinical Nutritionist	Master's degree + 1 year experience or bachelor's degree + 3 years pediatric experience.
	Coordinator Specialist	Master's degree + 2 years pediatric experience. Master's degree + 3 years pediatric experience.
Clinical Setting	Clinical Dietitian I Clinical Dietitian II	Entry Requires a certification exam. Salary is 5% more than level I. Employee receives 3% increase when passing certification exam.
Clinical Setting	RD or RD eligible	
	Clinical Dietitian Specialist	Advance certification or master's degree with 2-3 years clinical experience.
	Transplant Nutrition Specialist	RD + master's degree and advance certification + 3-5 years clinical experience.
Clinical Setting	Clinical Dietitian	RD
	Clinical Dietitian Specialist	Advanced Certification
Clinical Setting	Technician RD	
	RD/Advanced Practitioner Manager	
FIG 3: Examples of current career ladders that exist in hospital settings		RD + 1 year experience RD + 3 years work experience, advanced degree or specialty certification RD + advanced degree, 3 years experience OR bachelor degree + 5 years experience.

Source: Academy of Nutrition and Dietetics 2002 Practice Report, 102(9) p. 1314.

APPENDIX F

INTERVIEW GUIDE QUESTIONS (MAIN RESEARCH QUESTIONS)

1) What are the career pathways of leaders within the field of dietetics?

- Why did you decide to pursue a career in dietetics? Was there a specific area that you were more inclined to pursue based on your background, history or personal influences?
- What was your educational background (undergraduate/graduate) degree pathway to becoming a dietitian?
- What different professional/work positions have you held as a dietitian?
- Do you feel that there are potential barriers that must be overcome by women/men in the field of dietetics?
- Do you feel that the profession of dietetics is becoming more diverse as a result of changes within our global society? If so, what types of changes do you think need to occur in the training, background of dietitians so they are better equipped to meet these potential needs?

2) What transformations were experienced along these leaders' career pathways?

- Why is it important for leaders to be identified as being both professional and personal within the field of dietetics?
- What impact did the educational experience of the dietetics program or internship have, if any on your development into becoming a dietetics leader within your career pathway?
- Were there any significant situations or events that affected the career pathway that you chose to pursue?
- How would you best describe your personality? Do you believe that the profession you chose can be related to your own personality type?
- Have you ever participated in a personality type inventory? If so, do you mind sharing the personality traits that were identified?
- Do you consider yourself to be athletic and enjoy working outdoors with objects, tools, plants or animals?
- Based on your own personal traits do you enjoy analyzing or solving problems?
- Has anyone ever referred to you as being artistic or imaginative?

-The profession of dietetics is often characterized as a social/helper profession: do you think that this is an accurate description; if so, why or why not?

-Do you consider yourself to be an effective leader or someone who is good at managing organizational goals or tasks?

-Based on your preferences do you enjoy working with data and numbers?

-What personal characteristics might have influenced your career path, professional involvement and satisfaction and career achievement?

-What environmental characteristics might have influenced your career path, professional involvement and satisfaction and career achievement?

3) How did they emerge into becoming leaders?

- Tell me about your journey (successes and challenges) to become a leader?

- Why do you believe leadership is important in dietetics for career planning and professional development?

- Do you feel that leadership contributes to personal awareness and self-efficacy among RDs?

- Do women/men need specific types of peer mentoring to aid in career development pathways?

- Do the mentoring activities of RD leaders serve as a valuable contribution towards the field and future developments for the field of dietetics?

4) What personal attributes or traits do these leaders possess?

- How do you think someone else would describe you, being that you are recognized as a leader within the profession of dietetics?

- Do you agree that effective leaders must possess a vision, passion and the ability to encourage others to achieve goals?

-How important do you believe motivation is for a leader to possess when inspiring others?

-How would you describe your leadership style? (charismatic, inspirational motivation, intellectual stimulation, individualized consideration)

-When faced with a stressful situation in the workplace environment how would you respond?

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- If you had to describe yourself would it be an introvert or an extravert?
- When responding to situations do you prefer to follow unconventional or conventional methods for solving problems?
- Would you consider yourself someone who easily forgives others for making mistakes?
- How would you describe your level of organization when trying to accomplish tasks?

Additional Questions/Background:

- Who are other leaders that you admire and why?
- What words of wisdom would you like to share with young professionals in the field who want to become leaders?
- Is there anything else that you would like to share regarding your leadership experiences and/or career pathway as a dietitian, which is important for others to know about?

APPENDIX G

SAMPLE SCRIPT INITIAL CONTACT

Hello _____,

My name is Paula Milas Sochacki, and I am currently a doctoral student at Northern Illinois University, Illinois, with a dissertation focus on the career pathway development of leaders within the field of dietetics. My areas of practice in dietetics have been mainly within renal nutrition. But, I have also worked at several of the teaching hospitals in the Chicago area. In addition, I have been teaching as an adjunct faculty member at both Benedictine University and Dominican University located in Illinois.

My past experiences have allowed me to serve as a past president of our affiliate West Suburban Dietetic Association of Illinois, and currently I am the Membership Chair for the Illinois Academy of Nutrition and Dietetics. Through these experiences the topics of leadership and career pathway development among dietitians has sparked an interest that I have continued to research and will be focusing on for my dissertation research.

Given your leadership experiences as _____, I am reaching out to ask if you would be interested in being a potential subject for my dissertation research.

My goal is to conduct an initial interview with a shorter follow-up interview. I am expecting that each interview should last between 1-1.5 hours. I know that the option of meeting face to face for interviews can be difficult given that I am from Illinois and hoping to recruit subjects from across the United States. So, if we are unable to meet with one another for a face-to-face interview, the option of Skype or Phone Conferencing can be used for the interviews.

I believe that your experiences as a leader within the dietetics profession make you an excellent potential subject for my dissertation research.

Thank you for your consideration in being a subject for my dissertation research.

Please contact me at parasolp@aol.com / 630-607-4125. Once I hear from you, I will contact you to set-up an appointment.

Sincerely,
Paula Milas Sochacki, MPH, RD, LDN
Doctoral Student, Northern Illinois University
parasolp@aol.com
630-607-4125

APPENDIX H

SAMPLE SCRIPT INITIAL CONTACT FOR FOLLOW-UP
AFTER CONFERENCE RECRUITMENT

Hello _____,

My name is Paula Milas Sochacki, and I am currently a doctoral student at Northern Illinois University, Illinois, with a dissertation focus on the career pathway development of leaders within the field of dietetics. My areas of practice in dietetics have been mainly within renal nutrition. But, I have also worked at several of the teaching hospitals in the Chicago area. In addition, I have been teaching as an adjunct faculty member at both Benedictine University and Dominican University located in Illinois.

My past experiences have allowed me to serve as a past president of our affiliate West Suburban Dietetic Association of Illinois, and currently I am the Membership Chair for the Illinois Academy of Nutrition and Dietetics. Through these experiences the topics of leadership and career pathway development among dietitians has sparked an interest that I have continued to research and will be focusing on for my dissertation research.

I just wanted to follow-up and thank you for taking the time to meet with me during the FNCE conference. It was great being able to talk with you and discuss the overall plans of my dissertation research.

Given your leadership experiences as _____, I am reaching out to ask if you would be interested in being a potential subject for my dissertation research.

My goal is to conduct an initial interview with a shorter follow-up interview. I am expecting that each interview should last between 1-1.5 hours. I know that the option of meeting face to face for interviews can be difficult given that I am from Illinois and hoping to recruit subjects from across the United States. So, if we are unable to meet with one another for a face-to-face interview, the option of Skype or Phone Conferencing can be used for the interviews.

I believe that your experiences as a leader within the dietetics profession make you an excellent potential subject for my dissertation research.

Thank you for your consideration in being a subject for my dissertation research. Please contact me at parasolp@aol.com / 630-607-4125. Once I hear from you, I will contact you to set-up an appointment.

Sincerely,
Paula Milas Sochacki, MPH, RD, LDN
Doctoral Student, Northern Illinois University
parasolp@aol.com
630-607-4125

APPENDIX I
CONSENT FORM

Consent Form

Department of Adult and Higher Education Northern Illinois University, IL

I agree to participate in the research project titled (The Secret Recipe to Leadership and Career Pathway Success in Dietetics) being conducted by Paula Milas Sochacki, and Dr. Laverne Gyant at Northern Illinois University. I have been informed that the purpose of the study is to gain a better understanding of the career pathways of women who have become leaders within the field of dietetics. The primary focus of this study will be targeted on women leaders within the field of dietetics, but male leaders will be included to provide an alternative viewpoint in order to not overlook the issue of gender as a diversity issue within this female-dominated profession.

I understand that if I agree to participate in this study, I will be asked to do the following: participate in two sets of interviews (an initial and follow-up), each lasting approximately 90 minutes.

I am aware that my participation is voluntary and may be withdrawn at any time without penalty or prejudice, and that if I have any additional questions concerning this study, I may contact Dr. Laverne Gyant at (815) 753-1423. I understand that if I wish further information regarding my rights as a research subject, I may contact the Office of Research Compliance at Northern Illinois University at (815) 753-8588.

I understand that the intended benefits of this study are that very little research has been conducted specifically on dietitians related to career pathway development and leadership. The additional insight that will be gained from the findings of this study will provide valuable information, that can contribute to the professional literature and possibly assist future leaders not only of dietetics but other allied health and education professions.

I have been informed that there are no reasonably foreseeable risks that I could experience during this study. I understand that all information gathered during this experiment will be kept confidential by assigning a pseudonym name to identify the participant throughout all of the transcription and coding processes. No personal information will be used that could potentially link the identity of the participant to their interview responses.

I realize that Northern Illinois University policy does not provide for compensation for, nor does the University carry insurance to cover injury or illness incurred as a result of participation in University sponsored research projects.

I understand that my consent to participate in this project does not constitute a waiver of any legal rights or redress I might have as a result of my participation, and I acknowledge that I have received a copy of this consent form.

Signature of Subject / Date

I am aware that both sets of the interviews (initial and follow-up) will be tape-recorded.

Signature of Subject / Date

APPENDIX J

PSEUDONYM AND GENDER OF PARTICIPANTS

Table 5

Pseudonym and Gender of Participants

Participant Name	Participant pseudonym used in the study	Gender
	Mary	Female
	Cathy	Female
	Betty	Female
	Lisa	Female
	Pam	Female
	Wendy	Female
	Kevin	Male
	Gloria	Female
	Rose	Female
	Nancy	Female
	John	Male
	Andrea	Female
	Sarah	Female
	Anna	Female
	Ellen	Female
	Lynn	Female
	Beth	Female
	Kelly	Female
	Joan	Female
	Caren	Female