

## Role out of Network of Black Male Nursing Leaders Mentorship Program

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### ABSTRACT

Despite nursing being the largest segment in all of the healthcare workforce, with over five million practicing registered nurses in the United States, Black males remain significantly underrepresented, comprising merely about 0.67% to 1% of the nursing workforce. This underrepresentation extends into leadership positions, where the number of Black male leaders in nursing is described as unquantifiable. In response to this disparity, five doctorally prepared Black male nurse leaders established the Network of Black Male Nurse Leaders (NBMNL). This paper discusses the establishment of the NBMNL, provides an update on the number of Black male nurse leaders, and explores the interest among Black male nurses in receiving mentorship to support their leadership development. The paper underscores the importance of mentoring and supporting Black male nurses to increase their representation in the field as well as improve the health outcomes of the communities they serve, thereby advancing health equity.

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### Introduction

The nursing profession represents the largest segment of the healthcare workforce, with nearly 5.2 million registered nurses (RNs) nationwide. However, only 89% of all licensed RNs are currently practicing or employed in nursing roles (Smiley et al., 2023). Within this workforce, Black (those who identify as African, African American, Afro-Caribbean, Afro-Latinx, and all other members of the African diaspora) nurses make up only about 6.3% of the nursing workforce (Smiley et al., 2023). This disparity is even more pronounced in leadership positions, where Black nurses are substantially underrepresented. With Black nurses substantially underrepresented in the nursing workforce, efforts to increase diversity and foster leadership development among this group are important for serving a diverse patient population and advancing health equity.

A well-documented and longstanding challenge in the nursing profession is the under-representation of males (AACN, 2023; National League for Nursing, 2020; Thompson et al., 2020). This underrepresentation is more pronounced for Black men, who

comprise approximately 0.67 or 1% of the nursing workforce (Jones et al., 2024). Given such low numbers, one could extrapolate that the number of Black men in leadership positions within the nursing profession is even more minuscule. According to the American Association of Colleges of Nursing (AACN, 2023), the number of Black males in nursing leadership is unquantifiable. The dearth of data and the underrepresentation of Black men in nursing leadership roles point to the need for new initiatives to track these vital statistics that are needed to promote diversity and inclusion within the highest ranks of the nursing profession.

Recognizing this disparity, five doctorally prepared Black male nurse leaders questioned how they could use their influence, lived experiences, and mentorship abilities to support and document the growth of future Black male nurse leaders. The development of such talent could significantly impact the lives and health of other Black men within the profession and the communities they serve. Mentoring and supporting Black male nurses may advance health equity by increasing the representation and leadership of underrepresented men in nursing.

In December 2023, the five doctorally prepared Black male leaders gathered to create the Network of Black Male Nurse Leaders (NBMNL). The NBMNL is committed to empowering Black male nurses by providing a robust support system, offering mentorship opportunities, and advocating for professional growth. The goal is to

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inspire and nurture future generations of nursing leaders who will champion diversity and drive innovation in healthcare, thus ensuring quality care for all communities. This paper aims to provide an update on the number of active Black male nurse leaders and to explore their interest in mentoring Black male nurses as they progress through their leadership journeys.

### *Need for Black Male Nurse Leaders and Mentoring*

This initiative aims to provide a supportive system for Black male nurses, offering mentorship, guidance, and opportunities for professional growth. Having faced a myriad of challenges as they advanced in their careers, the founders aim to inspire and nurture future generations of Black male nurse leaders. A key goal of this initiative is to identify current Black male nurses in leadership positions who are willing to serve as mentors. These mentors will then be paired with participants based on their specific needs and areas of professional development. By providing role models and drawing from the founders' lived experiences, the initiative strives to help Black male nurses overcome common obstacles, reach leadership positions within nursing, and advance health equity for all. Through formal mentorship and support, Black male nurse leaders will champion diversity, drive innovation in healthcare delivery, and ensure quality care across all communities.

### *Understanding Black Male Nurse Leadership: Numbers and Mentorship Needs*

To quantify the number of Black male nurse leaders and assess interest in mentorship of Black male nurses, a survey was created and posted on LinkedIn (a professional social media outlet) inviting Black males to participate and visit the website to complete the survey. The survey also provided an opportunity to explore the interest of Black male nurses in having a mentor or the ability to dialog with similar individuals as they progress through their leadership journeys. A community forum was created for NBMNL members on LinkedIn and is open to all Black male nurses. The survey is also open to all Black male nurses and nurse leaders who are interested in taking it. The founders also contacted Black male nurses and nurse leaders within their professional networks and encouraged them to join the group and complete the survey. Anyone who is not a Black male nurse or Black male nurse leader was not admitted into the group. The initial post introducing the NBMNL and the goal of documenting Black male nurse leaders and providing mentorship garnered more than 1,600 likes, 275 comments, and 95 reposts on LinkedIn (Cowperthwaite, 2024). The survey was posted on LinkedIn in December 2023, and to date, over 130 Black male nurses have joined the group, and 85 individuals have completed the survey. No identifying data was requested or collected, and results only show aggregate data.

The survey gathered responses from 85 Black male nurses with credentials and working settings across the United States and several countries abroad. The age of respondents ranged from 18 to 50+, with the largest group of respondents ( $N = 43$ ) being between 40 and older. The years of leadership reported ranged from 1 to 5 years ( $N = 25$ ) to greater than 20 years ( $N = 9$ ) and 25 respondents chose "not applicable." Their education levels spanned a wide range, with 29 doctoral degrees (PhD, DNP), 25 with Master's degrees (29.4%), 27 with Bachelor's, and three with Associate's degrees. The majority of the doctoral respondents had a DNP in Nursing ( $N = 13$ ), followed by a PhD ( $N = 11$ ) and a combination of DNP and PhD ( $N = 2$ ). Additional doctoral degree respondents held PhD-BHA ( $N = 1$ ), PhD – HA ( $N = 1$ ) and DHA ( $N = 1$ ). The majority of the survey respondents reported the clinical setting as their work environment ( $N = 52$ ), followed by healthcare administration ( $N = 33$ ) and academia ( $N = 32$ ). Sixty-one (71.8%) of the respondents indicated they needed mentorship. This was further broken down to those who requested 1:1 mentoring ( $N = 35$ ), peer ( $N = 11$ ), and group-based ( $N = 14$ ).

**Table 1**  
Number of Respondents: 85

| Age Groups                                         | Number of Respondents | Percentage of Overall Responses |
|----------------------------------------------------|-----------------------|---------------------------------|
| 18–23                                              | 2                     | 2.4%                            |
| 24–29                                              | 15                    | 17.6%                           |
| 30–35                                              | 18                    | 21.2%                           |
| 36–39                                              | 7                     | 8.2%                            |
| 40–45                                              | 15                    | 17.6%                           |
| 46–50                                              | 9                     | 10.6%                           |
| 50+                                                | 19                    | 22.4%                           |
| Leadership Experience Years of Leadership          | Number of Respondents | Percentage of Overall Responses |
| 1–5 years                                          | 25                    | 29.4%                           |
| 5–10 years                                         | 10                    | 11.8%                           |
| 10–20 years                                        | 16                    | 18.8%                           |
| Greater than 20 years                              | 9                     | 10.6%                           |
| N/A                                                | 25                    | 29.4%                           |
| Highest Level of Education Degree                  | Number of Respondents | Percentage of Overall Responses |
| Doctoral                                           | 29                    | 34.1%                           |
| Masters                                            | 25                    | 29.4%                           |
| Bachelors                                          | 27                    | 31.8%                           |
| Associate                                          | 3                     | 3.5%                            |
| Other                                              | 1                     | 1.2%                            |
| Level of Doctoral Education Degree                 | Number of Respondents | Percentage of Overall Responses |
| DNP                                                | 13                    | 15.3%                           |
| PhD in Nursing                                     | 11                    | 12.9%                           |
| PhD – BHA                                          | 1                     | 1.2%                            |
| PhD – HA                                           | 1                     | 1.2%                            |
| DHA                                                | 1                     | 1.2%                            |
| DNP & PhD                                          | 2                     | 2.6%                            |
| Workplace Setting                                  | Number of Respondents | Percentage of Overall Responses |
| Clinical                                           | 52                    | 61.2%                           |
| Academia                                           | 32                    | 37.6%                           |
| Entrepreneurship                                   | 12                    | 14.1%                           |
| Healthcare administration                          | 33                    | 39.8%                           |
| Research                                           | 16                    | 18.8%                           |
| Military                                           | 11                    | 12.9%                           |
| Mentorship Requested/Needed                        | Number of Respondents | Percentage of Overall Responses |
| Yes                                                | 61                    | 71.8%                           |
| No                                                 | 24                    | 28.2%                           |
| Type of Mentorship Experience                      | Number of Respondents | Percentage of Overall Responses |
| One-to-one                                         | 35                    | 41.2%                           |
| Peer                                               | 11                    | 12.9%                           |
| Group based                                        | 14                    | 16.5%                           |
| N/A                                                | 25                    | 29.4%                           |
| Interested in Mentoring Expressed Desire to Mentor | Number of Respondents | Percentage of Overall Responses |
|                                                    | 74                    | 87.1%                           |
|                                                    | 11                    | 12.9%                           |

Twenty-five (29.4%) indicated no mentor preference. Seventy-four (87.1%) of the respondents indicated that they were interested in mentoring others. See Table 1 for survey results.

Additional information obtained from the survey revealed that most respondents were primarily located along the east coast of the United States, with a few responses from other countries such as Nigeria, Cameroon, and the United Kingdom (Table 2). The respondents practiced in a variety of nursing positions and roles ranging from new graduates, nurse managers, directors, and associate professors were reported (Figure 1). Challenges shared by respondents, ranged from a lack of diversity and professional advancement to leadership and leadership positions. The most

**Table 2**  
State/Country of Residence

| State/Country            | Number of Respondents | Percentage of Overall Responses |
|--------------------------|-----------------------|---------------------------------|
| CA                       | 4                     | 4.76                            |
| DL                       | 2                     | 2.38                            |
| FL                       | 4                     | 4.76                            |
| GA                       | 7                     | 8.33                            |
| HI                       | 1                     | 1.19                            |
| IL                       | 2                     | 2.38                            |
| LA                       | 3                     | 3.57                            |
| MD                       | 8                     | 9.52                            |
| MA                       | 1                     | 1.19                            |
| MI                       | 1                     | 1.19                            |
| MS                       | 2                     | 2.38                            |
| MO                       | 1                     | 1.19                            |
| NC                       | 20                    | 23.80                           |
| NY                       | 1                     | 1.19                            |
| NJ                       | 1                     | 1.19                            |
| OH                       | 1                     | 1.19                            |
| PA                       | 1                     | 1.19                            |
| SC                       | 1                     | 1.19                            |
| TX                       | 9                     | 10.71                           |
| TN                       | 2                     | 2.38                            |
| VA                       | 2                     | 2.38                            |
| WI                       | 1                     | 1.19                            |
| Country                  |                       |                                 |
| Abuja                    | 1                     | 1.19                            |
| United Kingdom           | 1                     | 1.19                            |
| Kent, England            | 1                     | 1.19                            |
| Kildare, Ireland         | 1                     | 1.19                            |
| Limerick, Ireland        | 1                     | 1.19                            |
| Littoral, Cameroon       | 1                     | 1.19                            |
| Port Harcourt, Nigeria   | 1                     | 1.19                            |
| Rivers State, Nigeria    | 1                     | 1.19                            |
| Rwanda                   | 1                     | 1.19                            |
| South Yorkshire, England | 1                     | 1.19                            |

frequently reported challenges among the respondents were "lack of representation" and "advancement opportunities." Other notable challenges included "microaggressions," "difficulty with communication and positioning for leadership roles," followed by "general career advancement barriers." The least frequently mentioned challenges were "implicit biases," "work-life balance issues," "staff engagement challenges," and "gaining buy-in/idea acceptance" (Figure 2).

As previously mentioned, mentorship emerged as a key need, with 87.1% of respondents desiring mentorship support compared to 12% who did not indicate a need. The focus on desired mentorship included individuals who could assist with career development, leadership, and management skills, followed by clinical specialties for advanced practice RNs (Figure 3). The overall goal of the desired mentorship experience was to achieve career advancement, professional growth, networking opportunities, and guidance.

## Creating a New Vision for Black Male Nurse Leaders

In this paper, we reiterate the low number of Black male nurses in leadership roles and provide findings that describe the mentoring needs of Black male nurses. Black male nurses who desire to advance into leadership positions desire mentorship. Given the variety of identified mentorship needs, a big challenge for this endeavor is having mentors who have prior experience serving in that capacity and who are willing to share their expertise as well as the time and commitment to undertake such an initiative. The survey identified additional challenges such as vetting potential mentors, the ratio of mentors to mentees, potential personality conflicts, regional location, time zones, and the ability to communicate in a manner that is nonthreatening or judgmental to mentors and mentees. Most important is establishing trust and confidence among those participating, whether in 1:1 or group mentoring scenarios. Establishing a safe zone or cone of silence is of utmost importance. The resilience, overcoming, learning/leading, and excellence (ROLE) Framework helps to guide and address the challenges identified by the survey and serves as a roadmap to meet the individualized needs of each participant.

## ROLE Framework

Understanding that mentorship needs may take on many forms, the founders sought to identify a framework that would meet the needs of participants. The ROLE framework, which outlines key qualities and actions necessary for effective leadership development among Black male nurses was adopted as the framework for this initiative. Mentoring has proven to be highly effective in nurturing diverse leaders, yet traditional organizations often overlook the potential of peer mentoring (Murrell et al., 2021). Recognizing and cultivating qualities for leadership development, particularly among minoritized individuals, is crucial. The NBMNL Mentorship Program exemplifies the ROLE framework, providing a clear framework for achieving success in Black male nursing leadership.

Resilience is particularly important for Black male leaders, enabling them to confront systemic racism and hierarchical inequities prevalent in nursing (Iheduru-Anderson, 2021). Despite national and local efforts, systemic and structural racism persists, hindering the progress of many Black nurses into leadership roles (Cineas & Schwartz, 2023). Cultivating resilience through mentorship programs is important for empowering Black male nurses and nurse leaders.

Overcoming biases remains a significant barrier to the advancement of minority groups, emphasizing the importance of diversifying the healthcare workforce (Cineas & Schwartz, 2023; Murrell et al., 2021); Black nurses, disproportionately affected by racism, suffer profound impacts on their mental well-being (Brathwaite et al., 2023; Cineas & Schwartz, 2023; Murrell et al., 2021). Thus, overcoming biases becomes imperative in fostering diverse



**Figure 1.** Current position (Word Cloud) 33% of respondents answered "nurse."

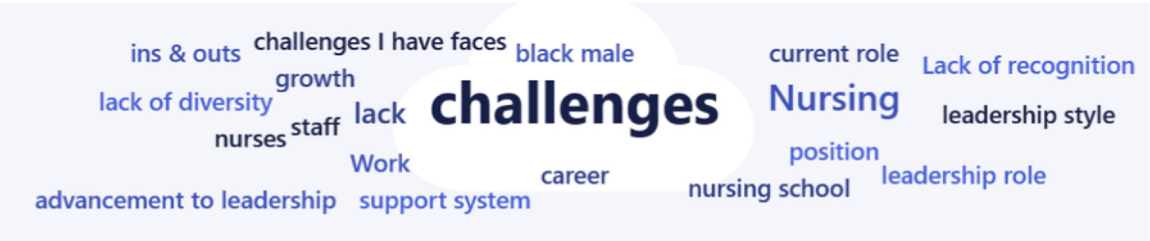


Figure 2. Current challenges (Word Cloud) 19% of respondents answered “challenges.”



Figure 3. Type of mentor desired (Word Cloud) 15% of respondents answered “mentor.”

leadership. Addressing biases combined with support for the mental well-being for Black male nurses, is important to empower them as leaders capable of driving meaningful change within the healthcare system.

The strategy of learning and leading plays a pivotal role in developing diverse leaders, especially as the number of minorities in healthcare continues to rise. However, there persists a gap in the representation of Black individuals in leadership and faculty roles despite increasing numbers and advanced degrees (Iheduru-Anderson, 2020). Minoritized groups, particularly Black males, must be afforded equitable opportunities for learning and leadership to address this disparity (Iheduru-Anderson, 2020).

Excellence in leadership is integral to fostering transformation within a diverse workforce, necessitating the engagement of all individuals (Lasrado & Kassem, 2021). Elevating Black males into leadership positions serves as a catalyst for advancing excellence in healthcare (Lasrado & Kassem, 2021). The ROLE framework offers a constructive pathway towards rectifying inequities faced by Black males and enhancing workforce diversity. Table 3 outlines the next steps for achieving our vision for the mentoring program, detailing specific initiatives and actions designed to empower and advance Black male nurse leaders within our community. This strategic approach aims to position schools and Colleges of nursing as focal

points driving such initiatives, achieving diversity, equity, and inclusion (DEI) goals, and driving transformative change within academic institutions to foster a sense of belonging among marginalized groups (Cary et al., 2020).

The ROLE framework for promoting Black male nurse leaders was developed through a combination of insights from experienced Black male nurse leaders, hands-on experience in nursing and organizational leadership, and a refinement process based on feedback from other nursing leaders with expertise in DEI, belonging, and inter-professional education. Recognizing the underrepresentation of Black men in nursing leadership roles, this framework serves as a foundational tool for nursing programs and organizations.

As a limitation to our paper, it should be noted that the paper does not present results from a rigorous scientific study. Instead, it documents a needs assessment. This distinction is important for interpreting the scope and application of the findings presented. For example, it was conducted utilizing data collected from a survey posted on LinkedIn which excludes all Black male nurses and nurse leaders who are not on LinkedIn or those who were not aware of the survey or its importance. In addition, the survey responses are based on self-reports which may not always be the most accurate. The founders met to ensure most response categories were comprehensive, but some categories may have been excluded.

**Table 3**  
Areas and Strategic Initiatives for Achieving the Vision of Advancing Black Male Nurses in Leadership

| Areas                                                  | Strategic Initiatives                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|--------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Representation and Advancement Opportunities           | <ul style="list-style-type: none"><li>• Establish partnerships with leadership to prioritize diversity in leadership development.</li><li>• Create transparent and accessible advancement pathways for Black male nurses.</li><li>• Implement training on recognizing and addressing microaggressions.</li><li>• Develop workshops to enhance communication skills, negotiation tactics, and leadership presence.</li><li>• Facilitate networking opportunities with diverse mentors.</li><li>• Encourage support groups for sharing experiences and strategies, for example, Academy Health Emerging Diversity Leaders.</li></ul> |
| Addressing Microaggressions and Communication Barriers |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Building Supportive Networks                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Inclusive Policy Making                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Continuous Monitoring and Feedback                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                                                        | <ul style="list-style-type: none"><li>• Involve experienced Black male nurses in policy-making to ensure inclusivity and relevance of policies to recruitment challenges, for example, a limited number of Black male nurses currently in the pipeline.</li><li>• Establish a feedback loop to continuously adapt the mentoring program based on participant insights and needs.</li></ul>                                                                                                                                                                                                                                         |

## Summary

Black male nurses need mentorship as they attempt to grow professionally. Using the results of the survey, the founders of this initiative have a strong desire to help meet those needs. In addition to matching respondents with other mentors who responded to the survey, future opportunities include a series of online podcasts and webinars to bring attention to the leadership opportunities available to Black male nurses. These planned leadership development programs would address specific situations, such as how to deal with conflict resolution and micro-aggression in the work environment, personal relationships, and how to maintain work-life balance that promotes well-being. Additional webinars will focus on advancing education, research, and scholarship initiatives.

Future plans include a Black Male Nurse Symposium that would feature a keynote speaker, poster and podium presentations, in-person dialog/networking, development of career goals, and the opportunity to share personal experiences. Ultimately the success of this program can be measured through the monitoring of the career progression of the mentees and feelings of professional support throughout their professional journeys.

## CRediT Statement

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The authors declare no conflicts of interest.

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