In 1965, the National Student Nurses Association (NSNA) established a minority recruitment project known today as the Breakthrough to Nursing (BTN) Project. This project promotes the development of the skills needed to be responsible, accountable members of the nursing profession who respect the differences and similarities between people, advocate high-quality care, utilize the principles of transcultural nursing, and facilitate the development of peer support systems that enhance recruitment and retention within the nursing profession. A study was conducted at the Bernard Hodes Health Care Division to discover how both student and faculty members of NSNA feel about the organization’s BTN Program on the eve of the celebration of its 40th anniversary in April. The results of this study are discussed here.

Background/Methodology

NSNA surveyed student members and faculty to gauge member demographics, solicit input on diversity issues, and gather insights and perceptions about the BTN Program. NSNA was also interested in documenting the impediments of under-represented individuals to entering nursing programs. As a profession, nursing is 88% Caucasian, according to the most recent findings in the National Sample Survey of Registered Nurses (U.S. Department of Health and Human Services, Health Resources and Service Administration, Bureau of Health Professions, Division of Nursing, 2000).

Bernard Hodes Group, a national recruitment communications company, agreed to assist in developing the survey questions and to host the survey online on a Hodes survey site. The Hodes Health Care Division and Research department developed the surveys in partnership with NSNA.

The surveys were live on the Web site from September 1, 2004, to October 15, 2004. NSNA promoted member participation through e-mail communications and through an ad published in Imprint, both of which directed members to the survey on the Web site. A total of 2,057 students and 121 faculty members responded to the survey, which consisted of a series of demographic (criteria) questions, multiple choice questions, ranking questions, and “essay” questions.

This article details faculty responses at the beginning of this article and then address some student concerns later in the article.

Demographics

Faculty survey respondents represented a wide range of schools (31 institutions from over 30 states). The largest percentage (50%) was between the ages of 45 to 54. One quarter (26%) was between 55 to 64, and one-fifth (18%) was between 35 to 44 years of age, which correlates to the overall national average of faculty age. Ninety-four percent of faculty respondents were Caucasian, with African-Americans comprising 3% of the sample, Asian Americans 2%, and Latinos/Hispanics 1%.

Faculty self-identified many areas of concentration, with med-surg topping the list at 28%, followed by 15% for nursing fundamentals, 8% for maternal/child, and 8% for psychiatric. The majority of faculty was associated with either ADN (45%) programs or BSN (44%) programs. A small percentage was associated with LPN to ADN, RN to BSN, generic master’s or generic doctorate programs.

Challenges to Entering Nursing

Respondents were asked to rank challenges to under-represented individuals wishing to become nurses. Faculty believed the need for financial assistance was the primary challenge (4.07 on a scale of 1 to 5), followed by lack of guidance in high school (3.81), lack of minority peers (3.52), and college entrance exams (3.45). Faculty ranked the perception of hospitals as intimidating workplaces lowest as a challenge (2.88).

Asked to rank the strongest deterrent to under-represented individuals in pursuing a career in nursing, 35% of faculty again ranked the need for financial assistance as the number-one reason, followed by lack of guidance in high school (15%). Lack of mentors was selected by 13% of respondents, followed by lack of minority peers at 11%.

Numerous faculty respondents commented on academic requirements, including the lack of basic preparation in math, science, English, and study skills from grade school on, as well as the impact this lack of skills has on successfully applying to nursing programs. Faculty members were asked if they had faced similar challenges in their journey to nursing, and 35% indicated they had. Of this group, 38% cited overall lack of guidance, 38% cited financial challenges, 17% cited negative perception of the profession/lack of role models, and 15% noted the difficulty of entrance exams, high admission standards, and lack of appropriate skills. Comments included, “My financial issues were all my own; no one was paying for my education. I received little or no guidance from the high school guidance office and from the financial aid office,” and “Not as an ethnic minority, but as a man. I needed male role models.”
Solutions

Faculty respondents cited early recruitment and mentoring as the most effective ways to interest minorities in the nursing profession. They also suggested using minority/non-traditional role models as spokespersons and in recruitment materials as methods of effectively recruiting diverse candidates into nursing.

A number of respondents also felt the BTN Program should be promoted within the nursing profession as a whole, keeping the program’s goals aligned with inclusive and broad-based goals of recruitment into nursing overall. Comments and suggestions included: “Summer camp experiences in the health care fields for middle school students,” “We need to inform guidance counselors that nursing is an option for the student who excels academically,” and “Highlight those who have ‘broken through’...don’t focus only on those who are CNOs – highlight the depth and breadth of everyday people.”

Cultural Competency and Transcultural Nursing

Respondents were asked if their institutions offered undergraduate cultural competency classes, and two-fifths reported that theirs did. Comments included: “Students are required to take a Nursing Diversity class in their first clinical semester,” and “Cultural competency is stressed throughout the curriculum, plus we have a global health and diversity course that all students are required to take.”

In breaking this down to types of educational programs, 36% of ADN programs, and 51% of BSN programs respondents offered these cultural competency programs.

When asked whether their organizations offered undergraduate courses on transcultural nursing, only 29% indicated their institution offered this option. In looking at types of respondents’ educational programs offering this option, 22% of ADN programs and 36% of BSN programs offered courses on transcultural nursing. Comments included: “This is one of the pervasive themes in our program. Culturally sensitive nursing is incorporated into every course,” and “Transcultural nursing is integrated throughout the nursing program.”

Student Comments of Interest to Faculty

Diversity: Many interesting comments on the issue of diversity and under-represented groups were discovered. Some students felt the survey reinforced racism in addressing the issue; others felt minorities were given more favorable treatment in terms of scholarships and tuition assistance. Those working in highly diverse communities and geographic areas where health care is well represented by minorities, reminded us of that fact. Others noted that although they live in diverse communities, they don’t see that diversity reflected in the health care facilities in their area. Some minority students recounted incidents of bias in their schools and in clinical settings. In addition, there were many comments about the issue of men being a minority in nursing and a few comments about the “feminization” of nursing curricula, programs, and traditions.

Older students with families, and second-career and second-degree students represented 67% of student respondents. This group encountered their own issues in attending nursing school, including juggling classes, jobs, and families, and inability to fully devote time to any of these responsibilities. A few respondents noted ageism in the school and clinical environments, and some made critical comments about the structure and task-oriented thrust of their nursing programs.

Reaching the under-represented: Student respondents recommended direct outreach to communities through such channels as mentorship programs, community job fairs, and seminars, as well as through the distribution of information to community centers, health centers, grocery stores, hospitals, and physician waiting rooms.

Some older respondents recommended providing information to young children in schools and/or sending this information home with these children. Information sent to the home would serve two purposes: informing parents about potential careers for their children as well as for themselves. Several respondents recommended providing information in the languages of the communities being served. Along with recruitment materials, a few suggested informational articles about nursing careers in community newspapers as a soft recruitment technique.

Older and second-career student needs: Older second-career students (the majority of the student respondents) recommended more nursing school programs during evening hours and weekends, as well as more school-sponsored child care for students to better accommodate the unique needs of individuals with families. Another suggestion was the implementation of scholarships specific to older students and men, and better dissemination of information about financial assistance already available.

Conclusion

There were some universal themes voiced by survey respondents in the faculty and student populations, such as the difficulty of being accepted into nursing programs, long waiting lists for these programs, and financial impediments. High school guidance counselors were seen as being of little use in pushing nursing as a career, and in fact, were often an impediment. Family and cultural views also initially hindered some students in reaching out to nursing careers.

The need to reach students early (before high school) was also underscored by many respondents on both the faculty and student sides. Many respondents cited lack of mentors and role models as an issue for under-represented individuals in considering nursing careers.

Clearly, there is much work to be done to increase minority participation in nursing. It is hoped this research reveals some starting points in addressing this vital issue. It will take cooperation and teamwork among educators, practice leaders, and the health care industry in general, to address these challenges.

Karen A. Hart, BSN, RN, is Senior Vice President, Bernard Hodes Group Health Care Division, New York, NY. Karen’s nearly 40 years in the health care arena include nursing staff and management positions, nurse recruitment, and management of the National Association for Health Care Recruitment. Bernard Hodes Group is a global full-service recruitment communications and marketing company with over 300 health care clients. Hodes has worked with several entry-into-nursing workforce initiatives, including the Virginia Partnership for Nursing, Oregon Center for Nursing and North Carolina Center for Nursing, in framing messages about nursing careers.

References

Vice Admiral Richard H. Carmona, 17th Surgeon General, Slated as NSNA Keynote Speaker in Salt Lake City

This year, NSNA is honored to have the Surgeon General Dr. Richard Carmona as the Keynote Speaker on April 6, 2005, during NSNA’s Annual Convention in Salt Lake City.

Vice Admiral Richard H. Carmona, MD, FACS, the 17th Surgeon General of the United States Public Health Service, will address students and faculty attending the 53rd Annual Convention. Born and raised in New York City, Dr. Carmona dropped out of high school and enlisted in the U.S. Army in 1967. While enlisted, he received his Army General Equivalency Diploma and joined the Army’s Special Forces, ultimately becoming a combat-decorated Vietnam veteran, following which he began his career in medicine.

After leaving active duty, Dr. Carmona attended Bronx Community College of the City University of New York, where he earned his associate of arts degree. Dr. Carmona worked as a nurse until he attended and graduated from the University of California, San Francisco, with a Bachelor of Science degree (1977) and medical degree (1979). At the University of California Medical School, Dr. Carmona was awarded the prestigious gold-headed cane as the top graduate. He has also earned a master's of public health from the University of Arizona (1998).

Dr. Carmona has worked in various positions in the medical field including as a paramedic, registered nurse, and physician. Dr. Carmona completed a surgical residency at the University of California, San Francisco, and a National Institutes of Health-sponsored fellowship in trauma, burns, and critical care. Dr. Carmona is a Fellow of the American College of Surgeons, and he is also certified in correctional health care and quality assurance.

Prior to being named Surgeon General, Dr. Carmona was the chairman of the State of Arizona Southern Regional Emergency Medical System, a professor of surgery, public health, and family and community medicine at the University of Arizona, and the Pima County Sheriff’s Department surgeon and deputy sheriff.

The Board and Staff of NSNA are honored to have this distinguished educator and health care administrator as our Keynote Speaker and hope you will join us on April 6 at the Salt Palace Convention Center to hear him speak.

Celebrate National Nurses Week: May 6-12, 2005

National Nurses Week begins each year on May 6th, marked as RN Recognition Day, and ends on May 12th, Florence Nightingale’s birthday. These permanent dates enhance planning and position National Nurses Week as an established recognition event. As of 1998, May 8 was designated as National Student Nurses Day, to be celebrated annually. And as of 2003, National School Nurse Day is celebrated on the Wednesday within National Nurses Week (May 6-12) each year. (Previously, the fourth Wednesday in January had been set aside for the recognition of school nurses by the National Association of School Nurses.)

The nursing profession has been supported and promoted by the American Nurses Association (ANA) since 1897. Each of ANA’s state and territorial nurses associations promotes the nursing profession at the state and regional levels. Each conducts celebrations on these dates to recognize the contributions that nurses and nursing make to the community.

The ANA supports and encourages National Nurses Week recognition programs through the state and district nurses associations, other specialty nursing organizations, educational facilities, and independent health care companies and institutions.

In honor of National Nurses Week and RN Recognition Day, registered nurses around the country are encouraged to wear the official “RN Pin.” The pin can be purchased by calling 1-800-445-0445. In addition to wearing the RN Pin, nurses will be asked to dress in uniform on that day.

ANA, through its 54 constituent member associations, its Associate Organizational Members (AOMs), and organizational affiliates, advances the nursing profession by fostering high standards of nursing practice, promoting economic and general welfare, promoting a positive and realistic view of nursing, and lobbying Congress and the regulatory agencies on health care issues affecting nurses and the public.

In addition, nurses are encouraged to observe and participate in Cover the Uninsured Week, April 30-May 8, 2005. Nurses see firsthand the consequences that stem from a lack of health insurance coverage: sicker patients who have postponed needed health care. More than 1,000 events will take place during Cover the Uninsured Week, involving nurses, doctors, union members, business owners, hospitals, members of religious groups, students, grandparents, and people from all walks of life and every point of view. For more information, go to www.CovertheUninsuredWeek.org.

Traditionally, National Nurses Week is devoted to highlighting the diverse ways in which registered nurses, the largest health care profession, are working to improve health care. From bedside nursing in hospitals and long-term care facilities to the halls of research institutions, state legislatures, and Congress, the depth and breadth of the nursing profession is meeting the expanding health care needs of American society.

NSNA and the National League for Nursing are co-sponsoring this exciting workshop entitled, Do Your Exams Pass the Test? A Practical Guide to Test Development for Nurse Educators, on Wednesday, April 6, 2005. Please consider attending this all-day workshop with speakers Patricia A. Mahoney, MSN, RN, and Tracy A. Ortelli, MS, RN. The workshop is designed to provide nurse educators with strategies to improve their ability to develop multiple-choice and alternate items that assess higher-order/critical thinking. Topics covered will include the use of Bloom’s Taxonomy to code test items; item-writing guidelines; how to transform knowledge and comprehension-level items into items at the application and analysis-level; developing a test blueprint; understanding item analysis; an overview of computer adaptive testing; and the implications of the changes to the NCLEX® Test Plan. For more convention details and information about the speakers, visit the NSNA Web site (www.nsna.org).

Once you have finished with this newsletter, please pass it along to share with a colleague or friend.
The Best Prep Course for the NCLEX®-RN

NSNA has partnered with Nursing Spectrum to present another outstanding NCLEX review course. The three-day review will be held June 2-4, 2005, at the Chicago Marriott Northwest, Hoffman Estates, IL.

All attendees will receive a free book entitled, NCLEX®-RN Review, published by Thomson Delmar Learning, and free access to Delmar's online NCLEX-RN Review Course.

The course discussion focuses on topics that appear most frequently on the examination, test-taking skills, information about scheduling your test, test scoring, and helpful hints for taking the test. Quizzes throughout the three-day course give you the opportunity to validate your learning and practice NCLEX-type questions.

Three Ways to Register
3. Fax – Complete the registration form from the Web site and fax to 781-863-6277, Attn: Nancy Kilker.

Congratulations to the National Spirit of Nursing Winner

Jennifer Bridges
University of Arkansas for Medical Sciences
Little Rock, AR