

Sigma's 30th International Nursing Research Congress
Desired and Received Support for Racial and Ethnic Minority Nursing Faculty
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Background: Racial and ethnic disparities in health care persist despite significant efforts to explore approaches in their reduction (Institute of Medicine [IOM], 2002). In recognition of this situation, the US Department of Health and Human Services published their Disparities Action Plan. The Disparities Action Plan recommended strengthening US workforce diversity as a means of eliminating wide health disparities and achieving health equity (HHS, 2012). Overwhelming studies support the idea that diversity in the healthcare workforce is one of the essential strategies that can improve the quality of health care and health outcomes for minorities and underserved population (American Public Health Association [APHA], 2009; Betancourt, Green, Carrillo, & Ananeh-Firempong, 2003; Castillo & Guo, 2011; Kington, Tisnado, & Carlisle, 2001).

Despite ongoing engagement to enhance workforce diversity in health care, many challenges exist that is rooted in historic and contemporary inequities. Efforts to diversify the health care workforce need to include robust strategic plan to diversify the health care faculty (Kaufman, 2007; Nivet et al., 2008; Robert Wood Johnson Foundation [RWJF], 2007). The findings from the National Center for Education Statistics revealed that while nearly 30 percent of undergraduate students around the nation are considered minorities, only 12 percent of full time faculty come from minority backgrounds (Musu-Gillette et al, 2010). Additionally, the full -time professors of color are just around 9 percent (Musu-Gillette et al, 2010). The composition of the faculty does not mirror the changing demographics in academia, especially within nursing discipline as even less evidence of diversity exists among nursing faculty positions (Phillips, & Malone, 2014; National Advisory Council for Nursing Education and Practice [NACNEP], 2013).

The importance of a diverse faculty and their abilities to attract and recruit students from underrepresented minority groups play an important role in promoting diversity (Stanley, Capers, & Berlin, 2008). In addition, minority faculty can be mentors, role models and create a sense of belonging and community that can encourage retention of the underrepresented minority students. In the discipline of nursing, there is a greater urgency as there is a significant shortage of nursing faculty (Peter, 2014). In particular, the shortage of nursing faculty from minority backgrounds is alarming (Stanley, Capers, & Berlin, 2008). National Advisory Council on Nurse Education and Practice reported that the lack of diversity among nursing faculty lags behind overall minority representation among U.S. faculty across disciplines (NACNEP, 2010).

A great need for a body of research exists to further understand the desired and received support as shared by the minority nursing faculty to facilitate their success in academia. Understanding the issues minority faculty face can help in creating successful recruitment and retention efforts, targeting potential under-represented minority educators who can better meet the changing landscape of the student demographics and contribute to the health equity efforts.

Purpose: The purpose of this online survey is to examine the desired and received support for racial and ethnic minority nursing faculty in the U.S. to facilitate their success in academia. We hope this study contributes to enhance the satisfaction, retainment and promotion of minority faculty in nursing schools throughout the U.S.

Methods: In this descriptive survey study, we developed an 18-item online survey in Qualtrics and pilot tested in two racial/ethnic minority faculty at Seattle University College of Nursing for content validity. The survey was also reviewed by three senior faculty members with expertise in instrument tool development. After modifications, the survey was distributed to racial and ethnic minority faculty in the U.S. via email by contacting Deans/Chairs/Directors of 83 nursing schools with potentially high numbers of racial and ethnic minority faculty. The research team searched racial and ethnic minority faculty of the nursing schools' website by name and picture, and contacting the President/Key Personnel of other professional organizations such as National Coalition of Ethnic Minority Nurse Association, Asian American Pacific Islander Nurse Association, National Association of Hispanic Nurses, National Organization of Nurse Practitioner Faculties, American Nurse Association, American Association of Nurse Practitioner. Racial and ethnic minority faculty in nursing schools throughout the US at all levels who are full time or part time, non-tenure track and tenure track/tenured with various teaching years are invited to participate. Racial minority faculty include American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or other Pacific Islander and Mixed Race. Ethnic group include Hispanic or Latino. Any faculty not meeting the inclusion criteria filled out the survey will be excluded from our analysis. The survey will be available for 16 weeks from September 2018 - December 2018. Data analysis will occur in January 2019. Descriptive statistics will be used to analyze the data. A summary of themes will be identified from the qualitative open-ended questions.

Results: We have over 110 participants so far. The survey will be closed in December of 2018.

Conclusion: pending

Title:

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Keywords:

disparities in health care, racial and ethnic minority faculty and support in academia

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Abstract Summary:

Diverse faculty attract students from underrepresented minority groups and play an important role in promoting diversity. The purpose of this study is to examine the desired and received support for racial/ethnic minority faculty in the U.S. to facilitate their success in academia.

Content Outline:

I.INTRODUCTION

1. Institute of Medicine states healthcare disparity continues to exist.
2. The need to strengthen the workforce diversity to better reflect our nation's growing diverse population is one of the solutions to address healthcare disparity.

II.BODY

Main Point #1: Healthcare workforce has not matched the increased diversity found within the general population.

Supporting point #1

- a) The need for diversity in health care workforce has received support from numerous experts and organizations.
- b) US Dept. of Health and Human Services recommends strengthening workforce diversity as a means to eliminate wide health disparities and to achieve public health equity.

Main Point #2: Diverse faculties contribute to the attraction and recruitment of students from underrepresented communities by serving as mentors and role models

Supporting point #1

- a) National demographic studies suggest that while nearly 30% of undergraduate students are minorities, the percentage of full-time professors of color seems to hover between 9 and 12% and attaining diversity in faculty has fallen short of success
- b) A clear consensus exists among educators, administrators and governing bodies that faculty diversity is necessary to appropriately care for a diversifying nation and to address well documented inequalities within minority communities.

Supporting point #2:

- a) Contrast is even more stark for nursing education institutions.
- b) National Advisory Council on Nurse Education and Practice reported that the lack of

diversity among nursing faculty lags behind overall minority representation among U.S. faculty across disciplines.

Main Point #3: The dramatic difference between stated goals and the current situation is rooted in a number of historic and contemporary inequalities.

Supporting point #1

a) To increase minority interest and involvement in nursing academia, it is crucial to understand what mechanisms of recruitment and retention have been effective for current minority nursing faculty members.

b) Understanding the issues minority faculty face is necessary to further efforts, targeting potential under-represented minority educators who can better meet the changing landscape of the student demographics and contribute to health equity efforts

III. CONCLUSION

1. Gap exists in what strategies or programs can best support our racial/ethnic minority nursing faculty.

2. Further research is needed as well as implementation of innovative programs to support these efforts.

First Primary Presenting Author

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Author Summary: Dr. Ro is a assistant clinical professor at Seattle University and her area of educational scholarship is in the area of diversity among nursing profession. She is also interested in understanding the risk factors that influence health such as cultural factors and social determinant of health. Her overarching goal is to create successful recruitment and retention efforts, targeting potential under-represented minorities who can effectively contribute to the health equity efforts

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Author Summary: Dr. Sin's research expertise includes cardiovascular health

promotion and vascular health and Alzheimer's dementia. She has conducted several pilot studies to promote cardiovascular health among minority Korean Americans by reducing physical inactivity and depression. She has been working on vascular injury, neurodegeneration, and dementia since 2018. Since Dr. Sin is a minority faculty, she has conducted a survey study about strategies to promote success among minority faculty in academia.

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Author Summary: Dr. Villarreal has spent the past 25 years as a clinical pharmacist, working to promote diversity in the field of health care. His interest is the representation of ethnic and racial minorities within academia and student bodies and he is honored to be a part of the research presented in this abstract.

Fourth Author

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Author Summary: Jessie is very passionate about working towards health equity and diversity. Eager to gain experience in a healthcare setting, she volunteers at the Bellevue Kaiser Permanente Urgent Care Center in the CT/X-Ray departments. She serves as one of six students on the Bellevue City Youth Link Board, promoting youth engagement with community issues and determining resource allocation for related programs; their focus this year is on equity of services for mental health and homeless youth.