



Measuring success: Results from a national survey of recruitment and retention initiatives in the nursing workforce

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ABSTRACT

Objectives: The purpose of this study was to identify common components of diversity pipeline programs across a national sample of nursing institutions and determine what effect these programs have on increasing underrepresented minority enrollment and graduation.

Design: Linked data from an electronic survey conducted November 2012 to March 2013 and American Association of Colleges of Nursing baccalaureate graduation and enrollment data (2008 and 2012).

Participants: Academic and administrative staff of 164 nursing schools in 26 states, including Puerto Rico in the United States.

Methods: Chi-square statistics were used to (1) describe organizational features of nursing diversity pipeline programs and (2) determine significant trends in underrepresented minorities' graduation and enrollment between nursing schools with and without diversity pipeline programs

Results: Twenty percent ($n = 33$) of surveyed nursing schools reported a structured diversity pipeline program. The most frequent program measures associated with pipeline programs included mentorship, academic, and psychosocial support. Asian, Hispanic, and Native Hawaiian/Pacific Islander nursing student enrollment increased between 2008 and 2012. Hispanic/Latino graduation rates increased (7.9%–10.4%, $p = .001$), but they decreased among Black (6.8%–5.0%, $p = .004$) and Native American/Pacific Islander students (2.1%–0.3%, $p \geq .001$).

Conclusions: Nursing diversity pipeline programs are associated with increases in nursing school enrollment and graduation for some, although not all, minority students. Future initiatives should build on current trends while creating targeted strategies to reverse downward graduation trends among Black, Native American, and Pacific Island nursing students.

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Introduction

It's been nearly a decade since the Sullivan Commission Report, "Missing Persons in the Health Professions," and the Institutes of Medicine's "In the Nation's Compelling Interest" were released, each highlighting the lack of underrepresented minorities (URMs) in medicine, dentistry, and nursing (Sullivan, 2004; Smedley, Butler, & Bristow, 2004). The health care professions have responded to the lack of diversity within their ranks through the development of a range of "pipeline" initiatives created to attract and retain historically underrepresented minority students into the health professions. For instance, the American Association of Medical Colleges' 3000 by 2000 diversity initiative sought to increase the number of URMs entering the medical profession. Although the initiative fell short of its numeric goals, it did have a number of important successes, which included establishing pipeline programs as an effective intervention to support students from college to graduate education and increasing URM matriculates to medical schools by 36%, thereby reversing over 20 years of negative enrollment (Terrell & Beaudreau, 2003). Similarly, within dentistry, the Robert Wood Johnson Foundation and California Endowment provided funding for a large-scale dental pipeline initiative in 2002, which resulted in a 77% increase in URM applicants and a 27% increase in URM enrollees (Andersen et al., 2009). Although a number of environmental scans and pipeline program evaluations have examined the impact of diversity initiatives in medicine and dentistry, no studies to date have undertaken similar evaluations of aggregate diversity initiatives in nursing (Terrell & Beaudreau, 2003; Formicola et al., 2009).

Nurses represent the largest proportion of health care workers in the United States, with an estimated 3 million individuals currently licensed nationally (U.S. Department of Health and Human Services, 2008). However, URMs collectively make up only a quarter of the nursing workforce (Health Resources and Services Administration [HRSA], 2013). Recent estimates suggest that minorities currently comprise a third of the U.S. populace (Institute of Medicine [IOM], 2011), but are expected to increase to 54% by 2050 (Bernstein & Edwards, 2008). These figures reveal that although nursing has made progress toward diversifying in recent decades, it has not kept pace with demographic trends. The risks associated with a health care workforce that does not reflect the shifts in the nation's demographic profile includes widened threats to minority health, gaps in cultural and linguistic competence, decreased patient satisfaction, and reduced

access and use of health care services (Meghani et al., 2009).

In this study, we address the lack of aggregate data related to diversity initiatives in nursing through the conduct of a national survey of schools of nursing in the United States. The results of this study revealed core components of diversity pipeline programs and their impact on graduation and enrollment.

Background

Diversity pipeline programs traditionally promote the academic and professional achievement of minorities in the profession. According to the Institute of Medicine's "Future of Nursing Report," "creating bridge programs and educational pathways between undergraduate and graduate programs... appears to be one way of increasing the overall diversity of the student body and nurse faculty" (IOM, 2011, p. 208; NCEMNA, 2010). Pipeline programs represent a set of strategic interventions to address the persisting challenges experienced by individuals and groups in accessing a profession or field. Within the health professions, pipeline programs generally target racial minority groups or those from low socioeconomic backgrounds (HRSA, 2006). Pipeline programs in nursing possess several aims ranging from mere exposure to nursing careers to support of student achievement at every postsecondary level (i.e., BSN to the PhD). Structurally, programs are focused on one or all of the following goals: (1) recruitment and increasing enrollment, (2) maintaining student engagement and retention, and (3) increasing certification/degree completion.

Although varied in nature, pipeline programs attempt to address the many barriers and obstacles that make careers in health care out of reach for many minorities. Common barriers experienced by URM nursing students include academic underpreparation; English as a second language; and unwelcoming institutional climates that together can undermine the confidence and, ultimately, the achievement of those students (Amaro, Abriam-Yago, & Yoder, 2006). Despite increased federal and philanthropic efforts to increase minority representation, we know very little about nursing diversity pipeline programs. Subsequently, our study asks, "What works?" and "What features are most effective in assisting minorities to pursue and persist to graduation in nursing?" Although several studies have examined the effectiveness of pipeline programs in nursing, three major limitations abound. First, there is a general lack of critical evaluations of existing nursing diversity pipeline programs. Second,

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