A project to increase educator cultural competence in mentoring at-risk nursing students

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Abstract

The purpose of this pilot project was to enhance faculty cultural competency in mentoring diverse students. The project was based upon Dr. Campinha-Bacote's Process of Cultural Competence in the Delivery of Healthcare Services model. A pretest–posttest design measured educator cultural competency in mentoring using the Inventory for Assessing the Process of Cultural Competence Among Healthcare Professionals for Mentoring (IAPCC-M). Fisher's analysis revealed a statistically significant increase in educator cultural competency with a two-tailed P value of 0.0011.
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Texas joins the nation in facing a critical registered nurse shortage, and nursing programs have been challenged to increase graduates fourfold by 2020 (Texas Team, 2009). To meet the challenges of a continued nursing shortage, the retention of students enrolled in schools of nursing is essential (Williams, 2010). Although there are no national attrition rate statistics, racial/ethnic minority students have higher rates of attrition than do their peers in nursing programs (Bednarz, Schim, & Doorenbos, 2010). Educators that are open to diversity and provide culturally sensitive learning opportunities that is respectful of the differences of others will improve the retention of students (Bednarz et al., 2010; Dewald, 2012). One way to enhance cultural congruence is to increase the cultural competency of nurse educators and nursing students throughout all aspects of nursing programs (Jeffreys, 2010). The question guiding this faculty

enrichment project is "For associate degree nursing faculty, what is the effect of computer-based modular education on cultural competency in mentoring the at-risk nursing student?"

Background

The ongoing nursing shortage intensifies the urgency to increase the retention of students currently enrolled in nursing programs. Enrollment has increased for all demographic groups in nursing programs; however, completion rates persistently remain low (Baum, Ma, & Payea, 2013). The highest attrition typically occurs within the first year of a nursing program (Chen & Voyles, 2013; Williams, 2010). Research describes factors including age, gender, English as a second language (ESL) or additional language, employment status, critical thinking skills, personality, self-efficacy, and academic engagement/support as key to academic performance (Pitt, Powis, Levett-Jones, & Hunter, 2012). The early identification of the at-risk student enhances the potential of student success intervention(s) (Harding, 2012; Jeffreys, 2014).

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A critical shortage of nursing educators presents multiple challenges because traditional and nontraditional students enter nursing school often underprepared. These students may exhibit poor test taking and study skills and may lack an understanding of the rigors of nursing school (Fuller, 2013; Hanover Research, 2011; Pitt et al., 2012). The nurse educator often has advanced degrees; however, they may lack formal preparation or the skills needed for the many facets of the nurse educator role (Schoening, 2013; Zungolo, 2004). Little research exists on the cultural competency of nursing faculty. The nurse educator must possess cultural competence as they interact with cultural diversity and role model culturally sensitive behaviors (Montenery, Jones, Perry, Ross, & Zoucha, 2013).

A role responsibility of the faculty at one associate degree nursing program is to provide support to nursing students. Data collected from interviews with faculty suggested that they were uncomfortable with mentoring at-risk students. In addition, the nurse educators expressed feeling insecure in their knowledge of bridges, barriers, and success strategies for the ESL student. The need for early identification of the at-risk student and enhancement of educator cultural competency in mentoring the student at-risk for course or program failure was the impetus for this pilot faculty enrichment project.

Literature Review

To meet the health care needs of a diverse population, educators must recruit, retain, and graduate diverse nursing students (Harris, Rosenberg, & O'Rourke, 2014). Early identification and early intervention for the at-risk or nontraditional student is critical to the possibility of maximizing student success interventions and improving academic outcomes (Harding, 2012; Jeffreys, 2014; Zhang, Fei, Quddus, & Davis, 2014). The highest attrition typically occurs within the first year of nursing and often in the first semester (Chen & Voyles, 2013; Williams, 2010).

Cultural competency is an imperative for nursing students and nurse educators. Campinha-Bacote (2007) defined *cultural competence* as "the ongoing process in which the healthcare professional continually strives to achieve the ability and availability to work effectively within the cultural context of the patient (individual, family, community)" (p. 15). A vast amount of literature describes cultural competency of nursing students; however, little research exists on cultural competency of the nurse educator who role model and teach this essential nursing concept. Today's classroom of culturally, academically, linguistically, and generationally diverse students presents the nurse educator with ongoing challenges (Bednarz et al., 2010; Jeffreys, 2014; Loyola, 2010). The nurse educator must possess cultural competency as they interact with cultural diversity and role model culturally sensitive behaviors (Montenery et al., 2013). Campinha-Bacote's model of cultural compe-

tence in health care delivery is a model that can be used to provide a framework for the development and implementation of cultural competence (Campinha-Bacote, 2010). The multifaceted role of the nurse educator includes teaching, role modeling, and the provision of culturally appropriate care. It is imperative that nurse educators develop cultural competency, cultural sensitivity, and cultural assessment skills to best serve the diverse student population of today.

According to Meier (2013), mentoring is a process where a seasoned or more skilled person serves as an advisor, role model, teacher, and/or counselor to a person with less experience or skills for the purpose of personal and/or professional development. The success of at-risk nursing students is dependent upon the use of mentoring in combination with teaching–learning strategies that facilitate student confidence and critical thinking (Corrigan-Magaldi, Colalillo, & Molloy, 2014). Engaging the student in a trusting relationship with an advisor or mentor and early intervention is effective in the enhancement of student retention and improving academic outcomes (Zhang et al., 2014). Faculty workshops and enrichment projects are recommended as a strategy to enhance educator cultural competency and provide mentoring skills needed for the at-risk student (Dudas, 2011; Greenberg, 2013; Harris et al., 2014; Scheele, Pruitt, Johnson, & Xu, 2011; Wilson, Sanner, & McAllister, 2010).

Methods

Purpose

The purpose of this pilot faculty enrichment project was to enhance faculty cultural competency in mentoring students who are at-risk for course or program failure through a series of four educational modules via the college computer learning management system. The project aims included the enhancement of faculty cultural competence, heighten awareness of personal cultural biases and assumptions, and increase knowledge of barriers and bridges to success of at-risk nursing students.

Design

A pretest–posttest design was used to evaluate faculty development following this pilot faculty enrichment project. The project was implemented in a associate degree nursing (ADN) program in east Texas during the fall semester 2014.

Sample

A convenience sample of ADN nurse educators that teach all levels in the nursing program and the student success specialist was recruited for participation in this enrichment project. Sixteen faculty volunteered to participate, which included 15 females and 1 male ($n = 16$). No further inclusion criteria were specified.