

# Black Americans in nursing education

Reflecting on the past and looking toward the future.

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By 2060, Black, Indigenous, and people of color (BIPOC) are expected to make up more than half of the American population under 18 years (Vespa and colleagues). As diversity increases, nurses must provide culturally competent care. Despite many calls to support BIPOC nurses and grant funding to assist with recruitment and retention, the racial disparities among nursing students and faculty are real, particularly among those who are Black.

Although Black Americans make up 13% of

the U.S. population, only 11% of bachelor-level nursing students (American Association of Colleges of Nursing), 10% of RNs (Campaign for Action), and 9% of academic nurse educators (National League for Nursing, 2017) are Black. And according to the National Center for Education Statistics, only 40% of Black college students graduate from a 4-year degree program within the first 6 years of enrollment, compared to 74% of Asian students, 64% of White students, and 54% of Hispanic students. With the push to increase the number of nurses with a bachelor of science in nursing (BSN), college graduation rates are an important benchmark.

The lack of racial diversity may lead to feelings of isolation, misunderstandings, and lack of community among BIPOC nursing students and faculty. The need to focus on recruiting and retaining Black nursing students and faculty, in particular, is critical. This article provides insight into the historical relevance of Black nurses and institutions promoting nursing education for Black Americans, highlights the experiences that led the authors to become nurse educators, and offers suggestions for improving Black nursing student and faculty recruitment and retention.

## Looking back

The low number of Black nurses in the United States isn't a new phenomenon. Throughout the 19th century and first half of the 20th, Black students, nurses, and educators fought for equality. Mary Eliza Mahoney, the first Black professional nurse, and Estelle Massey Riddle Osborne, the first Black nurse to earn a master's degree, are among several Black pioneers of nursing education who displayed courage and perseverance in the face of hostile political and social climates in the days af-

## Black nurse educator pioneers

For centuries, Black nurses have been blazing a trail for today's nurses.

Year	Name	Pioneering act
1879	Mary Eliza Mahoney	First Black professional nurse
1931	Estelle Massey Riddle Osborne	First Black nurse to earn a master of science in nursing degree
1955	Elizabeth Lipford Kent	First Black nurse to earn a doctorate of philosophy (PhD) in nursing
1971	Lauranne Sams	Founded the National Black Nurses Association
1987	Sallie Tucker-Allen	Founded the Association of Black Nursing Faculty
1988	Randolph Rasch	First Black man to earn a PhD in nursing
2005	Courtney Lyder	First Black male dean of a U.S. school of nursing



Sources: Association of Black Nursing Faculty 2018, Berger 2011, Darraj 2005, Hanink 2018, NYU Rory Meyers College of Nursing 2020

ter slavery, in the share-cropping era, and during implementation of Jim Crow laws. (See *Black nurse educator pioneers*.)

Historically Black colleges and universities (HBCUs) also have been critical to educating Black nurses. For example, Hampton University created the first masters and doctoral programs for Black nurses, and Florida Agricultural and Mechanical University's 85-year-old BSN program is the longest continually running BSN program for Black nurses. (See *HBCU contributions*.)

### The need for diversity in nursing education

Cultural competency and humility don't begin at the bedside; they begin in the classroom. Just as access to culturally diverse healthcare providers can lead to reductions in health disparities among minoritized groups, culturally diverse nursing faculty may help reduce disparities in nursing education and facilitate BIPOC student success. Racially diverse nursing faculty can leverage their unique lived experiences to foster inclusion and diversity among nursing students, resulting in improved patient care quality and overall health.

Racially isolating experiences, alienation, and overt or covert discrimination can create

barriers—including lack of financial support, inadequate emotional and moral support, as well as insufficient academic advising, mentoring, technical help, and professional socialization—for student success. Cultural alienation may contribute to a perceived lack of support from White classmates and faculty, which leads to discomfort using available university resources. The result may be an inability to improve study habits and test-taking and time management skills. Although many of these barriers were present in the authors' lives, we successfully graduated from our nursing programs and are now advocates for increased racial diversity in nursing education. (See *Our reflections as Black nursing students and educators*.)

### Recruiting and retaining racially diverse nursing students

To attract diverse nursing students, colleges and universities must display a strong, clear, and genuine commitment to diversity. They also should identify and address cultural barriers and needs and hire faculty who are supportive and culturally sensitive to help prevent and counter intentional or unintentional discrimination. Addressing healthcare disparities requires that nursing faculty not only teach, but also serve as role models in the classroom;

## HBCU contributions

Currently, 101 historically Black colleges and universities (HBCUs)—down from 121 in the 1930s—operate in the United States. Of those, 41 have nursing programs. Less than 10% of all Black U.S. college students attend HBCUs, but these institutions educate 12.5% of Black chief executive officers, 40% of Black congresspeople and engineers, 50% of Black lawyers and professors at primarily White institutions, and 80% of Black local, state, and federal judges. The following HBCUs have made great strides in providing nursing education to Black students.

Year	Institution	Contribution
1881	Spelman Seminary (now Spelman College)	First nursing school for Black students
1889	Dillard University	Division of nursing established; oldest continuously operating nursing school at an HBCU
1918	Prairie View Agricultural and Mechanical University	First HBCU to establish a nursing school west of the Mississippi River
1922	Howard University	First HBCU to establish a bachelor of science in nursing (BSN) program
1936	Florida Agricultural and Mechanical University	BSN program established; oldest continually operating BSN program at an HBCU
1976	Hampton University	First master of science in nursing program established at an HBCU
1999	Hampton University	First doctorate in nursing program established at an HBCU

Sources: Anderson 2017, Clark Hine 1989, HBCU Colleges 2020, Minority Nurse 2013, Scrubs Magazine 2016, Thurgood Marshall College Fund 2019

interact with patients, nurses, and other healthcare professionals in clinical practice; and conduct research relevant to the healthcare needs of minoritized, underserved populations.

Successful BIPOC student retention frequently faces challenges—such as inadequate academic preparation, lack of social adjustment to predominately White institutions, financial constraints, lack of faculty support, and low self-esteem—associated with socioeconomic and psychosocial status. Many schools of nursing have implemented retention strategies that offer mentorship, tracking systems for early identification of and intervention for at-risk students, scholarships, and strategies for student success. Yet, it's the social and academic systems of the institution that influence student integration. It's important to provide a formal environment of assistance that includes academic advising, mentorship programs, and peer support to create student allegiance to the institution, which in turn will increase the

likelihood of academic and social success.

Successful students have the potential to become successful faculty, but recruiting Black faculty is an ongoing issue. Cultural biases, such as White faculty and students' negative thoughts about Black faculty's physical appearance and speech, can create barriers to recruitment and retention. This can cause Black faculty to express the same feelings of isolation as Black students. They also may lack proper work resources and experience toxic work environments in which they're not respected by students, faculty, or administrators. Recruiting and retaining Black faculty will require changes in workplace culture and exclusivity, and mentoring is an important strategy for achieving those goals.

### Mentoring

The literature is replete with articles on mentorship in nursing. However, few mentoring programs address or meet the specific needs of Black students. Some would argue that the needs of BIPOC students are no different

from the needs of White students, so all mentoring programs should be created equally. However, many BIPOC students are at a disadvantage because of family issues; lack of academic preparedness, financial support, and role models; and little parental knowledge of nursing education processes. Nursing school faculty and administrators should promote mentoring programs that address those needs.

Mentorship programs with formal diversity and inclusivity plans, structured enrichment and academic support, and activities that promote integration and engagement within the school community can help ensure BIPOC student success. These programs also should provide open communication and accessibility, goals and challenges, and mutual respect and trust. Without mentoring programs tailored to meet diverse students' needs, the attrition rate of undergraduate and graduate students will continue to grow, leading to a diminishing diverse workforce. The fewer diverse nursing students there are, the fewer diverse nurse educators there will be. And we'll continue to face health disparities and inequalities related to an inability to meet the cultural needs of our increasingly diverse society.

## Looking forward

We hope that the diversity of the nursing profession will soon be more representative of the diversity of the U.S. population in general and the geographic regions in which we live and work. When diverse nursing students interact with faculty who reflect the communities from which the students come, they thrive. When White nursing students hear the perspectives and experiences of BIPOC faculty, they have the opportunity to become more well-rounded, caring, and empathetic nurses. Increased diversity is beneficial to everyone. When diversity is at play, the sum is truly greater than its parts.

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Access references at [myamericannurse.com/?p=72286](https://myamericannurse.com/?p=72286).

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## Our reflections as Black nursing students and educators

As we reflect on the Black pioneers in nursing education and the educational institutions that provide professional development opportunities for Black undergraduate and graduate nursing students, we also reflect on the experiences that led us to become nurse educators. Three of the four authors attended public, primarily White institutions (PWIs) with 5% to 10% of our nursing class composed of Black students. The remaining author attended a private historically Black college and university (HBCU) where more than 95% of the students in her nursing class were Black.

Those of us who attended PWIs had fewer Black faculty members than the one who attended the HBCU. Two of us completed nursing school without ever having a Black nursing professor, and one was taught by only two Black tenure-track nursing professors. Some common themes of our nursing school experience include feelings of isolation and reaching out for support from non-Black faculty. This lack of representation among faculty and peers is what inspired us to become nurse educators.

Our colleague who attended the HBCU had a very different experience. She was assigned an upper-class mentor, regularly walked past a nursing hall of fame displaying photos of Black nurses, and most of her nursing professors were Black. Still, the lack of representation among Black nursing students and faculty at other U.S. universities and health-care facilities sparked her desire to become a nurse educator.

Now, as master- and doctoral-prepared nurse educators, we are again experiencing a lack of representation among our nursing peers. Each of us has taught as clinical or course faculty at various PWIs in the eastern and western United States; one also has taught at an HBCU. We met while working at a university with more than 1,000 nursing students, but only five Black nursing faculty—three in the undergraduate program and two in the master's program. This Black faculty-to-student ratio isn't reflective of the geographic area in which the university is located, where more than 67% of local residents are Black. This type of racial disparity motivates us to be the best possible educators we can as well as advocates for increased recruitment and mentoring of Black nursing students and faculty.