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-
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;
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

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

Access references at myamericanurse.com/?p=72286.

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