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AN EXPLORATION OF FACTORS THAT CONTRIBUTE TO THE HIGH
ATTRITION RATE OF AFRICAN AMERICAN NURSING STUDENTS

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May 2012

submitted in partial fulfillment of requirements for the degree

MASTER OF SCIENCE IN NURSING

at the

CLEVELAND STATE UNIVERSITY

May 2018

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ABSTRACT

Although African Americans represent the largest minority group, studies show they have the lowest success rates in nursing programs. According to the AACN (2013), “African American nursing students have the lowest graduation rate when compared to other minority groups.” The lack of minorities providing care negatively effects healthcare outcomes and accessibility. In order to increase the number of practicing African Americans nurses, it is essential to gain an understanding of the circumstances that lead to successes and failures. The purpose of this qualitative, phenomenological research study is to provide insight into the positive and negative experiences of African American nursing students, to identify and implement appropriate interventions to increase the number of successful graduates. This study recommends facilitation of social bonds, enhanced mentoring and effective teaching pedagogies to foster retention. This study will use Vygotsky’s Social Development Theory (1978) as a theoretical framework to guide the development of interview questions, as social interaction is key to cognitive development. The data collected through the interview process will be explored using Colaizzi’s (1978) method for analysis and synthesis of themes.

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CHAPTER I

INTRODUCTION

Registered nurses are an integral part of the healthcare system and make up the largest number of healthcare professionals. According to the Bureau of Labor Statistics (2015), “The employment rate for registered nurses is expected to grow by 16% between 2014 and 2024, which is more than double the average rate of growth for a profession.”

The rapid growth rate can be attributed in part to better management of chronic diseases and the baby boomer generation. Growth in the nursing profession is paramount to meeting healthcare needs; however, the demographics of the nursing population do not mirror the demographics of the population served.

Individuals from minority groups comprise more than one third of the population in the United States (U.S.), accounting for nearly 40% (U.S. Census Bureau, 2016). This number will continue to grow resulting in the minority becoming the majority. A 2015 survey by the National Council of State Boards of Nursing found that 80.5% of registered nurses were White (NCSBN, 2015). Having an imbalance or underrepresentation of a particular group in healthcare is one of the contributing factors to healthcare disparities. The National Prevention Council has determined that having a diverse healthcare and public health workforce is a key strategy in the elimination of health disparities (U.S.

Department of Health & Human Services, 2014). As a result, federal programs were developed to support and expand the healthcare education opportunities for minority students through the Patient Protection and Affordable Care Act. The absence of a diverse workforce leads to “lingual and cultural barriers, bias, and clinical uncertainty” reducing the quality of care provided (LaVeist & Pierre, 2014, p. 11). It is important to find ways to positively impact the success of minority nursing students in order to see an increase in the number of practicing minorities.

This thesis will explore the experiences of African American nursing students during nursing school in the context of Vygotsky’s Social Development Theory. Lev S. Vygotsky was a Russian psychologist very intrigued by the mind and intellectual development. His theory included three leading themes to describe how learning takes place: social interaction, the more knowledgeable other, and the zone of proximal development. Vygotsky (1978) believed that the social environment greatly impacted an individual’s ability to build higher cognitive skills. Vygotsky (1978) stated that:

Every function in the child’s cultural development appears twice: first, on the social level, and later, on an individual level; first, between people and then inside the child. This equally applies to voluntary attention, to logical memory, and to the formation of concepts. All the higher functions originate as actual relationships between individuals (p. 57).

Social interaction is essential for cognitive development. Experiences and interactions with others help shape how learning occurs and how knowledge is exchanged. The social aspect of learning so prominent in Vygotsky’s theory is especially salient for African American nursing students. African Americans are frequently characterized as social learners that depend on harmonious interaction and collaboration to facilitate learning (Coleman et al., 2017; Tolbert-Hill, 2003; Wighting, 2005). While most published

research explores the learning style of African American children, learning styles can be linked to culture. Culture is learned in childhood and remains relevant throughout the life span. Also, the way that children learn and perform in grade school can predict how they learn and perform in institutions of higher learner (Fearing, 1996).

Two themes from Vygotsky's theory, more knowledgeable other and zone of proximal development are widely respected and applied in education. The more knowledgeable other can refer to a teacher, coach, parent or peer who has a higher level of understanding of a concept than the learner. The more knowledgeable other acts as a facilitator of learning, and promotes instructional scaffolding. The more knowledgeable other helps the learner reach the Zone of Proximal Development (ZPD). ZPD refers to the learner's ability to reach a higher cognitive level by collaborating with peers or teacher guidance than the learner would reach working alone.

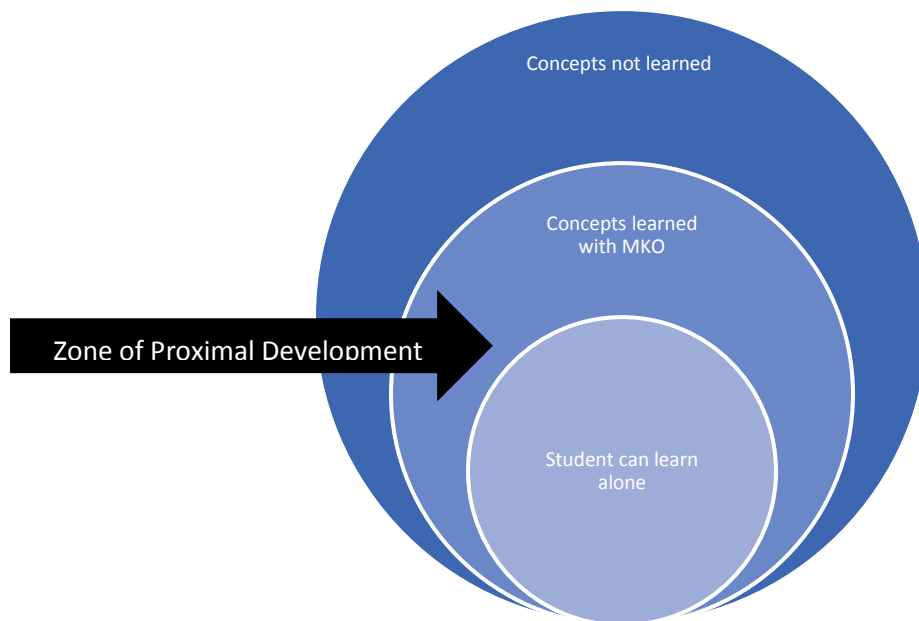


Figure 1: Zone of Proximal Development using a more knowledgeable other.

African American students attending predominately White colleges may not have the opportunity to reach the ZPD due to the lack of full social interaction. African

American students struggle to make connections with peers and faculty who are not representative of their own race or culture. Culture and language also play an important role in cognitive development. Culture and language can determine how information is shared and process, and even how we memorize and understand that information. According to Vygotsky (1978), full social interaction is necessary to reach this zone of development.

The academic achievement gap between African Americans and Whites is seen long before students arrive into the college setting. The National Assessment of Educational Progress (NAEP) is a test given to school-aged children across the U.S. at different intervals, testing knowledge in math and reading. The NAEP shows achievement gaps between White and African American students as early as fourth grade (National Center for Education Statistics, 2013). In Ohio, White students outscored African American students in both reading and math based on test results in 2013 (National Center for Education Statistics, 2013). This is the trend seen year after year throughout the country. Several causative factors have been explored in researching this gap such as, inadequate school funding, biased testing, and poor teaching practices (Baker, Farrie, & Sciarra, 2016; Rajagopal, 2011). Even when students enter college with similar grade point averages there is still an achievement gap seen. According to Ballen, Wieman, Salehi, Searle, and Zamudio (2017) active learning helps close the achievement gap seen at the undergraduate level in science, technology, engineering, and math students when grade point averages are similar.

African American students may benefit when social and cultural needs are acknowledged. According to Lynn (2006), when students are forced to learn new

concepts without connecting them to broader social, political, and economic process in society, learning is decontextualized. Learning is a holistic process, and much more than just providing new knowledge. Instruction that is not culturally relevant can cause student disengagement. Culturally relevant learning can be difficult to obtain for minority students. If the student is not engaged in the learning process, very little information is retained or understood.

1.1 Research Purpose

Although African Americans represent the largest minority group enrolled in nursing programs (NLN, 2013), studies show they have the lowest success rates in nursing programs when compared to other minority groups (AACN, 2013). What factors contribute to this high attrition rate? The purpose of this thesis is to explore the experiences of African American nursing students in an effort to determine unique barriers to success, uncover strategies that can lead to increased graduation rates, and provide schools of nursing with ideas for implementing interventions to improve the success of African American nursing students.

1.2 Research Questions

This research study explores two questions: What factors contribute to the high attrition rate among African American nursing students? What circumstances would improve the success rate of African American nursing students? Knowing what leads to failure or success is valuable information needed to move towards creating interventions with a goal of graduating more African American nursing students. Producing successful African American nursing graduates is essential to the health of the African American community.

CHAPTER II

LITERATURE REVIEW

The demographics of the nursing workforce do not mirror the population being served. More specifically, minority nurses are commonly underrepresented in major healthcare facilities. Only 19.5% of registered nurses in the United States are from minority populations (NCSBN, 2015). While there have been efforts to recruit minorities into the nursing field, minority students are not graduating. In order to devise and implement a plan to increase the success of minority students, barriers to success must be examined and understood. A review of the literature revealed several key variables related to minority success or failure. Those key variables are social bonds, financial stability, and support systems.

The review of literature also indicated a dearth of research in the area of minority nursing student retention. This omission may be due to the lack of knowledge related to the importance of having a diverse workforce, or the inability to relate to and thereby study the current problem of minority student attrition. There may be other competing interests, such as nursing leadership. A search performed in CINAHL using the search terms “nursing” and “leadership” yielded 7, 035 results. A search using the terms “nursing” and “diversity” yielded 1,507 results, which is less than 25% of the number of

research articles available on leadership. Furthermore using the search terms that are more specific to the topic at hand were as follows: “nursing” and “minority student” and “success” yielded 43 results, “nursing” and “minority student” and “retention” yielded 37 results, “nursing” and “minority student” and “recruitment” yielded 16 results, “nursing” and “minority students” and “barriers” or “obstacles” or “challenges” yielded 33 results. The dearth of research on this enigma signifies the need for more awareness in the nursing community and society as a whole.

2.1 Social Bonds and Student Success

Social relationships are important for the emotional well-being of young adults. The social environment also affects learning. According to Vygotsky (1978), social interaction is a fundamental determinant in cognitive development. Vygotsky’s Social Development Theory asserts that positive social environments and connections promote active learning (Vygotsky, 1978). Lack of healthy social relationships can lead to feelings of isolation and depression. African American students in predominately White colleges may feel isolated. A study by Payton, Howe, Timmons, and Richardson (2013) suggested that African American nursing students experience feelings of loneliness and isolation in nursing school. Students from this study reported being left out of study groups and being unable to relate to their White peers (Payton, Howe, Timmons, & Richards, 2013). A study by Dapremont (2014) found that African American students had less access to White study groups, and as a result felt less prepared for quizzes and tests.

Research suggests that high levels of stress and anxiety reduce memory (Nelson & Harwood, 2011). When the body detects stress and anxiety cortisol is increased. The

release of cortisol, a stress hormone, affects brain function. Stress and anxiety decrease concentration and lead to poor academic performance (Hubbard & Blyler, 2016). School itself is stressful, but feeling isolated adds another level of stress to the equation.

Forming healthy bonds with peers can help to ease stress. White and Fulton (2015) found that African American students reported better school experiences when they have friends to discuss problems and share ideas, rather than feeling alone and struggling to fit in with the group. Having a social bond with other students, especially students of different backgrounds can enhance the learning experience by adding a different perspective.

2.2 Financial Stability and Student Success

Financing school can be a challenging task for nursing students, especially African American nursing students. The burden of worrying about how to pay for school can definitely distract a student from studies. The added responsibility of working to cover school costs cuts into valuable study time. If a student works too much, exhaustion will hinder the ability to be productive and actively learn during class and clinicals. Gordon and Copes (2010) found financial aid counseling and monthly stipends to be beneficial in reducing financial strain. Many times African American students are the first to attend college in their families. This leads to a lack of knowledge regarding the process of applying for financial aid and scholarships.

Diefenbeck, Michalec, and Alexander (2016) reported that minority students were less likely to receive financial help from parents. One student participating in their study expressed having “a great deal of stress” due to financial problems, while another stated “my family does not help with school, I have to support myself” (Diefenbeck, Michalec,

& Alexander, 2016, p. 42). Graham, Phillips, Newman, and Atz (2016) listed both work interference and financial strain as barriers to retention of minority students.

2.3 Support and Student Success

College students need to feel supported by family, friends, and especially faculty. Providing support is important not only for lecture faculty, but clinical faculty as well. Lack of adequate support from faculty members can be perceived as discrimination by the student. The feeling of discrimination was reported in several studies as a barrier to success for minority nursing students. For example, Sedgwick, Oosterbroek and Ponomar (2014) interviewed 41 minority students about experiences during clinical. “Clinical instructors who used discriminatory language inhibited students’ sense of belonging” (Sedgwick, Oosterbroek, & Ponomar, 2014, p. 91). Students in this study also reported feeling discriminated against when it was perceived that less time was spent with them in comparison to their White peers (Sedgwick, Oosterbroek, & Ponomar, 2014). Faculty must be diligent in providing a milieu of equity and fairness in order to improve the success of the minority student. “Nurse faculty are key to helping minority students persist in attaining a nursing degree” (Baker, 2010, p. 219). Baker (2010) also offered the faculty perspective of barriers to success for minority students. Faculty availability ranked high as factor that determined minority success (Baker, 2010). When faculty members are available to assist students with problems and questions, students feel inclusion and support.

Students also feel more support when they have minority faculty as role models. Zajac (2011) found that minority students have a lack of perseverance when they do not have minority faculty as leaders, hindering the recruitment and retention of this group.

Minority students seeing another minority in the position they are trying to achieve may give more hope that they too can succeed. Faculty mentorship plays a huge role in minority student success (Murray, Pole, Ciarlo, & Holmes, 2016).

2.4 Rationale for Further Research

Current research shows that financial issues, lack of adequate support, and unsuccessful social bonding are persistent themes in the high attrition rate of minority students. Most of the current studies focus on minorities as a whole, which can include students of Hispanic, Asian, and Indian descent. This study will focus only on the African American nursing student. African American nursing students may face challenges that are unique and distinct from those of other minority groups.

Another concept missing from the literature is the resolve to succeed. As there are many barriers to successful matriculation, a certain determination is needed to progress to graduation. This study will also explore and address the resolve or determination of study participants and how it affects academic performance. Including this unexplored theme will provide vital information needed to facilitate successful graduation of African American nursing students. It is imperative that more African American nurses are on the front lines, caring for patients, and closing the gap in the quality and access of care. This is critical in reducing the health care disparities faced by the African American community.

CHAPTER III

METHODOLOGY

3.1 Research Design

The study is a qualitative, phenomenological research study that used open-ended interview questions to develop an in-depth understanding of the lived experience of the African American nursing student during the nursing school process. The interview questions were designed to elicit stories of their experiences surrounding the application, admission, and learning process in their nursing program. The Social-Cultural Theory of Vygotsky (1978) was utilized as the theoretical framework to develop interview questions, and the phenomenological data analysis method of Colaizzi (1978) was adopted to extract and synthesis themes.

3.2 Sample

The sample for this study consisted of undergraduate nursing students currently enrolled in a baccalaureate school of nursing located in a large mid-western city in the United States. A criterion sampling method was used to recruit nursing students who self-identified as African American. The sample size for this study was 11 students. The sample consisted of three males and eight females at varying points in the nursing program. Students were interviewed until data saturation, which occurred after the eighth

interview. Three more interviews were conducted after data saturation to ensure new themes would not emerge. The inclusion criteria for the nursing students besides being African American were as follows: 18 years of age or older, and at least in the second semester of nursing classes. Nursing students who are at least 18 years of age can provide their own informed consent, negating the need for parental consent. The students that have completed at least one semester have enough experience to provide information regarding challenges and supports encountered during the program.

3.3 Procedure

Before the research study began, permission was obtained from the Institutional Review Board at the university where the study was conducted. As the study includes human subjects, it must be approved to be sure no harm will be caused as a result of participating in the study and that no rights are violated. Once approval for the research study was obtained, flyers (Appendix A) were posted in common areas to interest students in study. Blast emails were sent by the university's school of nursing, and personal email invitations were sent by the researcher to students who self-identified as African American to request participation in the study. The emails explained the purpose of the study, the goals the researcher hoped accomplish, and how the study would be conducted. Implications of participation in the study and methods for ensuring confidentiality were explained in detail on participant consent form (Appendix B).

Students who participated in the study were not identified, but each interview was assigned a unique code to ensure confidentiality. Participants were also advised to omit any identifying information during the interview, such as professors' names or hospital facility names. The majority of the interviews were completed on campus in the SON,

and the remaining interviews were completed in a private room in the library. During the interview process the researcher used ten predetermined open-ended questions (Appendix C) to elicit thoughts and feelings about nursing school. Participant interviews lasted from 25-70 minutes depending on the individual. The interviews were audio recorded using a Sony Digital Voice Recorder with PC link ICD-PX333 series. In addition to recording the interviews, field notes were also taken by the researcher, noting body language and facial expressions that could not be captured on the recording. After the interviews were completed they were transferred to a SanDisk Cruzer password protected flash drive. All information for this study is stored on a flash drive and remains in the locked office of the thesis chair to ensure the information is secured.

Interviews were transcribed by the researcher. Although this method is time consuming compared to using transcription software, it allows the researcher to be more immersed in the data, as it requires listening to each word multiple times. Transcripts from interviews were analyzed using Colaizzi's (1978) method of phenomenological data analysis to allow recognition of themes in the data. The data used in the analysis process were the recorded interviews, the field notes and the confirmation of findings with the participant. Using these three data allows for triangulation, which guides the researcher in developing a deep and accurate appreciation of the phenomena studied (Cater et al., 2014). Once themes or ideas were determined, the synthesized data was reviewed with participants to ensure their feelings and experiences were captured accurately. Data analysis in qualitative studies is circular, iterative, and progressive; therefore, it is the best method to explicate the findings of the interviews. The interview and analysis process continued until data saturation was achieved.

3.4 Colaizzi's 7 Step Method (Colaizzi, 1978; Sanders, 2003)

The first step in Colaizzi's method is to read and re-read transcripts to get a sense of the participant and the transcript. The interviews were conducted and transcribed by this researcher, which helped facilitate this process. The transcripts were checked against the audio recording on two separate occasions to ensure accuracy. The transcripts were then read on three separate occasions in their entirety, and continued to be read through in fragments throughout the process.

The second step is extracting significant statements. Each transcript was read and the statements that were significant to understanding the participant's experience as it pertained to the study were highlighted. This allows for easy identification of the extracted data when reviewing the transcript.

The third step articulating what each statement means. Each specific statement that was extracted is restated in more general terms. Reflexivity is important in this stage. The formulated meanings must match the participants' thoughts and feelings, not the researcher's. In order to ensure that this researcher's own experiences did not affect the interpretation of data, bracketing was done. Bracketing took place as a formal presentation of the research proposal including the researcher's prior experiences. The discussion included two educational research professors, two PhD students, and two faculty members from the SON. After the in depth discussion, personal knowledge and experiences of this researcher were documented in writing to keep on hand for data analysis.

The fourth step involves organizing the formulated meanings into themes. Completing this step involves reviewing the formulated statements and recognizing any similarities that exists.

The fifth step is integrating all of the ideas and themes into an exhaustive description of the phenomenon. During this phase, themes are grouped into categories of barrier or asset to the nursing school experience. Themes associated with data that presented a challenge were denoted in red ink and those that offered support in green ink.

The sixth step is describing the fundamental structure of the phenomena based on the extracted data and the themes and cluster that reveal themselves during the exhaustive process.

The seventh step is verifying findings with the participants in the study. Due to scheduling conflicts returning to participants in person to confirm finding was difficult; therefore, validation of the findings was performed using a combination of phone calls, text messages, and emails with most participants. There were four participants that the researcher was able to speak with face-to-face. All participants agreed with the findings of the researcher as they pertained to the reported experience.

CHAPTER IV

RESULTS

This study includes results from eleven participants. The respondents included eight females and three males all at different levels in the baccalaureate nursing program. Analyzing the results of the survey began with extracting statements and phrases that were significant to understanding the experience of the participant's nursing school journey thus far. See Appendix D for list of extracted statements.

After formulating meaning for the significant statements they were grouped into themes. The themes are then integrated into an exhaustive description of the experience. Exploring the experiences of the participants during matriculation through nursing school revealed several themes. The themes were categorized according to whether they were a support to the participants' journey through nursing school, or a barrier to their success. Four major themes emerged from the data that hindered success: inadequate preparation for college, lack of social connections, lack of support, being a non-traditional student. Four major themes emerged that support success: genuine interest nursing, self-esteem/resolve to succeed, minority mentors, alternative instruction methods.

Identified Barriers to Success			
Inadequate College Preparation	Lack of Social Connection	Lack of Support	Non-Traditional Students
<p><i>“High school curriculum at all time low”</i></p> <p><i>“High school was mainly memorization”</i></p> <p><i>“I had no writing skills”</i></p> <p><i>“My vocabulary was poor”</i></p> <p><i>“I had to google man words just to understand what was being said”</i></p>	<p><i>“Stress and anxiety due to isolation”</i></p> <p><i>“No one to bounce ideas off”</i></p> <p><i>“Unable to gel or connect with anyone”</i></p> <p><i>“Ignored by peers”</i></p> <p><i>“Closed out of study groups”</i></p>	<p><i>“Barely talk to my family”</i></p> <p><i>“Mom does not understand”</i></p> <p><i>“Family is upset when I cannot attend a function”</i></p> <p><i>“School needs more support for minorities”</i></p>	<p><i>“Many students work for the experience, I work because I have to feed my family...I can’t just work when I want to”</i></p> <p><i>“I feel like the Mom of the group, I’m older than everyone”</i></p> <p><i>“It’s just me and my boys (two sons)”</i></p> <p><i>“I’m a single parent juggling school, work and home”</i></p>

Table I: Barrier Themes and Examples of Supporting Phrase

Identified Supports to Success			
Genuine Interest in Nursing	Self-esteem/Resolve to Succeed	Minority Mentors	Alternative Instruction Methods
<p><i>“Nursing is my calling”</i></p> <p><i>“Helping people makes me happy”</i></p> <p><i>“I want to help the underserved”</i></p> <p><i>“Nurse treat you with respect and dignity-I admire the profession”</i></p>	<p><i>“Confident in myself and my abilities”</i></p> <p><i>“No option for failure”</i></p> <p><i>“I have to succeed for not only me, but my community”</i></p> <p><i>“I can do or be anything I desire”</i></p>	<p><i>“The AA professor was like an unofficial mentor”</i></p> <p><i>“The AA professor was able to understand me and my experience”</i></p> <p><i>“I networked with successful AA nurses”</i></p> <p><i>“It would have been beneficial to have minority mentors”</i></p>	<p><i>“Difficult to understand when classroom and clinical are not integrated”</i></p> <p><i>“I can’t learn like that”</i></p> <p><i>“Too much busy work with no purposeful learning”</i></p> <p><i>“More simulation and case studies needed”</i></p>

Table II: Support Themes and Examples of Supporting Phrases

CHAPTER V

DISCUSSION

5.1 Barriers

5.1.1 Lack of adequate college preparation. Lack of adequate college preparation was a consistent theme when considering the barriers to student success. When asked if high school had prepared them for college level work, many of the participants answered with responses such as, “not at all” (Participant 4), “the high school curriculum was at an all-time low” (Participant 8), “in high school, it was more memorizing than understanding” (Participant 2). These students attended high school in the inner city where resources are scarce, and teachers are under pressure to teach to the test. One participant expressed that funding was so inadequate at her high school that students had to share books. Students are also not pushed to learn complex concepts or how to critically think. Laws such as the No Child Left Behind Act of 2001 created to bridge the gap on educational inequalities uses high-stakes testing to determine the fate of students and teachers. The test scores also influence the amount of funding allocated to schools. As a result, all focus is placed on passing said tests leading to a narrow

curriculum (Croft, Roberts, & Stenhouse, 2015). Exploring concepts that allow students to problem solve or critically think, such as creating science a science experiment, are

abandoned for test subject memorization.

In addition to test pressure, teachers may also not challenge African American students because they have a preconceived notion that they are underachievers and incapable of higher level performance. African American students experience bias from teachers based on negative stereotypes regarding “academic abilities and intellectual functioning” (Frye & Vogt, 2010, p.11). Teachers that have a false sense of students’ learning capabilities lack the motivation to match learning activities to the students’ achievement level. This false sense leads to lowered expectations and requirements of African American students, and becomes a self-fulfilling prophecy (Ferguson, 2003). It becomes a vicious cycle of the educators’ lowering standards and not challenging students, and in turn students meet the lowered expectation instead of rising to their full potential (Figure 2).

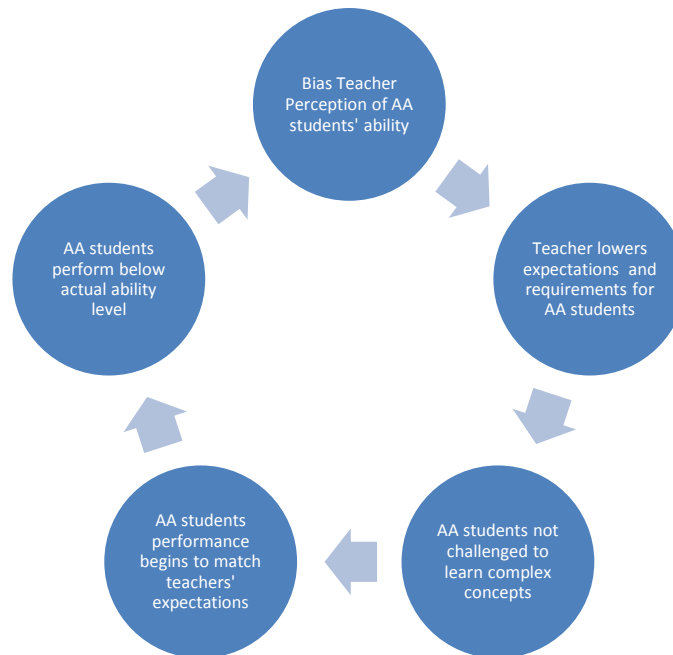


Figure 2: Cycle of Expectations vs Abilities

Students also expressed feelings of lacking college-level vocabulary and being unprepared to write scholarly papers. “I felt pretty well prepared except for the writing portion” (Participant 5); “I was not prepared for the professional writing” (Participant 4). One student attributed the lack of preparedness to write scholarly papers to African American culture. “But that goes back to African American culture that I’m aware of...my parents didn’t really read except for the bible, or a textbook. Reading helps you write” (Participant 7). Another student attributed it to a subpar school system, noting that relatives attending wealthy school districts were well-spoken. “I have friends and like cousins that graduated from...my vocabulary is completely different from theirs” (Participant 8). Home literacy practices and lack of exposure to early reading was cited by Craig, Zhang, Hansel and Quinn (2009) as factors that perpetuate the achievement gap between blacks and whites.

5.1.2 Nontraditional students. African American students are often non-traditional students. The National Center for Education Statistics uses the following criteria to identify non-traditional students:

1. 24 years of age or older
2. Part-time enrollment in school
3. Financial Independence
4. Full-time employment
5. Having dependents
6. Single parent
7. Did not receive standard high school diploma

A student has to meet only one of these criteria to be considered a non-traditional student. The majority of the students in this study meet more than one of the criteria listed. Non-traditional students tend to have higher attrition rates than traditional students. According to NCES, 38% of non-traditional students leave school after the first year, compared to only 16% of nontraditional students.

The students who were interviewed discussed lacking time to study and put their best effort into assignments because of competing responsibilities, such as work, children, spouses, and caring for elderly parents. “It wasn’t that I couldn’t get the A...I just didn’t have the time, so I did what I needed to do to pass” (Participant 7) “I have a family to support, I have to work” (Participant 9). “It is hard to study with the kids running around” (Participant 1). One student mentioned that she tries not to compare herself to other students because she understands that they are not always working from the same tool box. She further discussed how the majority of students still live home with parents or on campus with parents paying tuition. “Those students only work if they want to; I rely on work to survive” (Participant 6). Lin (2016) noted that nontraditional female students struggled due to insufficient family support and juggling multiple roles.

5.1.3 Social disconnect. Vygotsky (1978) stressed the importance of social interaction and cognitive development. Culture is also an important piece of the puzzle. According to Vygotsky (1962), our culture dictates our skills and abilities. African American nursing students in predominately White colleges can have difficulty establishing relationships with their peers, hindering the learning process. There is also a lack of connection to faculty members, as very few of them are African American. When there is a lack of faculty, nurses, and peers that are African American it makes it difficult

for the African American student to self-actualize. Maslow's Hierarchy of Needs (1942) proposes that self-actualization allows one to perform at their full potential. It can be difficult to recognize that potential when the environment and culture of nursing and nursing education lacks the visual.

Study participants discussed feelings of isolation and dissonance during nursing school. "I'm like the lone black male"... "You can't make a connection or really gel with anybody, and it gets hard" (Participant 10). Another participant stated, "I just study alone" (Participant 3). One participant felt that his peers did not respect him enough to even say hello. "The program is predominately young white people and they probably find it difficult to associate with me. I try to greet people, but you greet people and they don't even answer" (Participant 9). Another participant expressed, "We stick out like sore thumbs" (Participant 1).

The inability to connect with peers on a social level excludes African American nursing students from participation in White peer study groups. "You see the White community in a group discussing and learning, and you want to join the group, but they don't allow you to join" (Participant 8). The minimal number of African American students makes it difficult for them to form their own group. "It's not many black people, so it's not enough to form a group" (Participant 2). African American nursing students who were able to join a study group expressed dissatisfaction with the experience. Some participants revealed that being accepted into White study groups made them feel more isolated, as their peers would use this opportunity to make them feel inferior. Participants expressed feeling their White classmates thought of them as unintelligent and incapable of adding meaningful information to the discussion. "When I'm studying with a group

my opinion does not matter because I am the dumb one, you know” (Participant 8). “They think they can’t learn from you” (Participant 2, Participant 8 & Participant 9). At times the discussions would get off topic in study sessions as one participant recalls that a White peer announced, “I don’t think white and blacks should repopulate because it’s tainting our (White) blood” (Participant 8). Another participant discussed how a peer used the study time to talk about Black hair was “nappy and unkempt” (Participant 2).

African American students also struggle with social connections because of the dearth of African American faculty. When posed with the question, “What has been the biggest challenge in nursing school so far?” and “What would you change about your nursing school experience?”, replies such as, “I don’t see myself represented in the teaching staff” (Participant 5). “They need more diversity, and to teach people to embrace the differences of others” (Participant 2) were given. Having nurse faculty who are minorities gives the minority student someone to relate to, and someone who may understand their unique challenges. According to the 2009 National League for Nursing Faculty Census, African Americans account for only 7.5% of nurse faculty.

5.1.4 Lack of support. African American nursing students are disadvantaged by the lack of support they receive from their families, institutions, peers, faculty, and sometimes employers. Support is crucial to the success of the college student. Advanced academic preparation does not substitute for the support needed to apply, enroll, and matriculate through college. “Social support strategies that sustain the preparation and success of all students are critical to improving academic achievement, raising expectations, and increasing college admission and graduation rates of underserved students (Education Resource Institute, 2007, p. 1).

Family support is an important factor in student success, but not all students have the luxury. This is particularly true with minority students. Many times minority students are charged with the responsibility of main care provider for the household, along with caring for sick siblings or grandparents. It can be difficult to prioritize study needs and the needs of the family, especially when the parents or family members have unrealistic expectations of the student. This is mostly experienced by first generation students, as the family is unaware of the time and dedication needed to be successful in school. According to Loftin, Newman, Dumas, Gilden, & Bond (2012) minority students report receiving criticism from family members for opting to study instead of attending a family gathering (p. 4). One participant from this study explained “I don’t really have a relationship with family...my mother, she doesn’t understand education, she didn’t even get her high school diploma” (Participant 8). Another participant stated, “My family is supportive until I can’t do something they want because of school” (Participant 1). “I would say my family is a hindrance, they don’t understand what I’m going through” (Participant 11).

Lack of support from the institution is also detrimental to the matriculation of African American nursing students. Universities should offer students services that are relevant and accessible to African American students. Services such as tutoring, multicultural student organizations and scholarship opportunities are essential for success. According to the National Survey of Student Engagement, “Engagement yields larger payoffs in terms of grades and retention for underprepared students and historically underrepresented students relative to otherwise comparable peers” (2009, p. 6).

Several participants in this study expressed disappointment with the student services offered. The two major services talked about were tutoring and African American student organizations. Students who were requesting tutors stated they only had access to graduate English students, so the only tutoring they received was for writing papers. “They have graduate students, but they’re not nursing students. So they are not able to give you any help in terms of nursing classes” (Participant 5). “They put me with a senior nursing student, but she said she didn’t remember the content from the class I needed help with” (Participant 3). “The student that was supposed to tutor me was busy juggling her own classes” (Participant 1). “I didn’t use tutoring services, but I have heard there are issues with it through other minority students” (Participant 5).

Participants also complained that African American student groups were unorganized and lacked faculty support. “There was a minority group I wanted to join, but it wasn’t well coordinated...it is not enough of us to organize something” (Participant 2). “It’s not really organized, so I’d rather spend that time studying” (Participant 6). “I paid the fee and joined, but I don’t like the way the activities are run...I didn’t know where they meet, what time they met, none of that stuff...and it’s hard to get in contact with any of the people on the board to get information” (Participant 5). “I felt like it was pointless, the instructors who run it were not minorities...and one of them was not friendly and seemed like she was a part of the group just to have it on her resume” (Participant 1).

Other participants expressed that they wanted to participate in minority organizations, but could not find the time. Studying, work and family obligations took precedence over group participation. “I’m so busy; I can’t really pick up anything else”

(Participant 6). “I’m trying to juggle being a good husband and studying for class, so I don’t really have the time available” (Participant 10). “Sometimes meetings conflict with assignments or my kid is sick” (Participant 9).

Peers and faculty members play an important role in African American nursing student success. According to McMahon and Tollefson (2018), peer support not only helps student excel academically, but is also essential for mental health. The participants in this study felt a lack of support from peers, stating that peers were “cliquey” (Participant 2) and “made everything feel like a competition” (Participant 5).

Study participants also expressed a lack of support from faculty. “I really do feel like some faculty don’t want to see minorities do well” (Participant 6). Another participant explained a time when he went to a professor for help, but did not receive assistance. “I went to her because I was having trouble, and her response was oh well if you fail take it again” (Participant 9). Participant 1 expressed feeling a lack of support when a professor told her “this program is geared toward 19 year old Caucasian girls.” Another participant expressed his disappointment with the attrition of his African American peers, stating that “we lost some people that would make excellent nurses due to lack of support” (Participant 7). He also went on to say “I don’t know if this is what they intend to do, but they do things as they think they should be done, but from the perspective of a white female” (Participant 7). Faculty support is important for all students, but especially for the African American student. Kezar and Maxey (2014) found African American student success was influenced by the amount of interaction with faculty more than any other race. It is clear the students feel that they have a different set of needs and they are not being met by the faculty members or the school.

5.2 Supports

5.2.1 Self-esteem/resolve to succeed. Chung, Turnbull, and Hansen (2017)

found that the life experiences of non-traditional students gained through working and/or caring for others may contribute to a higher resiliency. Higher resiliency, perseverance, and grit help to increase the chances of success for the African American nursing student and also improve the overall experience. This grit and resolve to succeed pushes a student to continue working through challenges, obstacles and failures. Several of the participants in this study attributed current success to self-confidence and resilience. “I think honestly my confidence [has been the biggest help]...my mom always instilled in me that I was smart and capable and that I didn’t have to fit in any group” (Participant 3). “Failure isn’t an option for me, I can’t afford failure” (Participant 5, 6 & 11). “I have to succeed for not only myself and my family, but for the culture, for all of us” (Participant 10). Another student talked about how her strength and self-esteem came from a higher power. “Prayer and church has gotten me through, I pray before each exam and He gives me strength” (Participant 2). According to Boyd-Franklin (2010), spiritualism and religion play a huge role in surviving racism, adversity, and loss in the African American community. Eight of the eleven participants expressed a strong sense of faith and spirituality.

A positive sense of self and racial identity is extremely important to the African American student. This is particularly true of those African American students in predominately White school environments. Lack of self-esteem can cause stress, anxiety, and poor academic performance leading to imposter phenomenon. Imposter phenomenon

is characterized by persistent feeling of inadequacy and incompetence despite accomplishments and performance (Lige, Peteet, & Brown, 2017).

5.2.2 Genuine interest in nursing. Naturally, students tend to perform better in subjects that interest them. A study by Allen & Robbins (2010) found a direct link between interest-major congruence and timely degree completion. Interest-major congruence can help keep students motivated to learn and achieve academic success. It is important to pay attention to the intrinsic motivators for students, as they are often the strongest and have the most impact on student outcomes. While student success can sometimes materialize through external rewards such as grade point average, the main sources of motivation are “interests and curiosity sustaining the passion, creativity, and efforts toward learning” (Augustyniak et al., 2016, p. 466).

Many African American nursing students choose nursing as a major to help others, more specifically other African Americans. The history of racism and discrimination, events such as the Tuskegee experiment and lack of access to care, urge many African Americans to take action. “Many are not being treated equal, so I just want to get my hands in that and help the community” (Participant 8). “It’s all about the greater good and if I can save one person or feel like I got through to someone, educated someone that’s a win for my community” (Participant 7). “In a previous experience nurses treated my family with so much respect and concern...you know that’s not always the case...it made me really appreciate nurses” (Participant 2). “I want to be the example for other young black males in this white female dominated field, letting them know this is cool and socially acceptable” (Participant 10).

5.2.3 Minority mentor. Many studies have proven that mentors have a positive impact on student success. For African American students in particular, not only is having access to a mentor important, but having a mentor that is minority is quintessential. Mentoring has a long history of success dating back to ancient Africa with extensive kinship systems and rites of passage initiations guiding young men and women in their morals and behavior; therefore, mentoring has been the foundation of learning in the African American community (Sinanan, 2016). One of the most important aspects of learning for success in school is socialization to the academic and clinical environment. Socialization to the new environment is best achieved by someone who understands the environment as the student perceives it, further proving the need for African American mentors for African American students. One of the most cited reasons for lack of African American faculty is lack of support offered to these faculty members once hired (Salvucci & Lawless, 2016). Other reasons include low salary for faculty members and perceived lack of opportunity (Salvucci & Lawless, 2016).

The following are the study participants' feelings regarding minority mentors: "It's not enough African American professors, but the ones who are there really make sure we got it down" [understanding of learning material] (Participant 2). "I was lucky enough to have a black nurse as a mentor, and she helped me tremendously, especially when I thought I wouldn't make it through...but it wasn't set up through the school (Participant 4). "It would be nice to have a black male nurse as a mentor, it helps you see that success is possible (Participant 10). "Dr. XX is kind of like a mentor, just not officially. She told me about her struggles in school and she made it...that helps me feel

if I put in the work I can do it too” (Participant 5). “I really wish they had a minority mentorship program” (Participant 11).

5.2.4 Alternative instruction methods. Because teaching and learning involve much more than just students receiving information from teachers, learning styles and culturally competent pedagogies are of important matters for schools of nursing. Learning styles can be influenced by a number of factors such as, age, sex, cultural norms and values, and environment. Styles of learning are often looked at in childhood. There are not many studies that explore the learning styles at the collegiate level and even less that concentrate on the African American college student. According to Tolbert-Hill (2003) African American children’s preferred learning style includes social/affective emphases, communalism, expressiveness, movement and harmony. Rovai, Gallien and Wighting (2005) explored African American college students finding that “many White university classrooms consist of lecture and question-answer techniques that are antithetical to African Americans’ dominant learning styles of cooperation, extensive interaction, and field dependency” (p. 366).

Participants in this study expressed difficulty with grasping the material and dissatisfaction with the way the teaching was structured. Many of the participants in this study reported having to repeat one of the courses in the program. Some students felt that some of the activities or assigned work did not help them learn the material. In some cases it was seen as “busy work” to “weed out” the minorities (Participants 2, 5, 7, & 9). “I almost did pass the first semester. You’re teaching about the pneumothorax, but I have no idea what you’re talking about...I have to see it, then I see it in clinical and it’s like...oh, I get it now (Participant 2). That is an example of student explaining that

lecture alone is not an effective way for her to learn because she had no prior knowledge to connect to the lecture. Clinical experience is a great way to reinforce concepts presented in the classroom. The disadvantage is that students will not have the opportunity to see all disease processes in their clinical time. Including short videos of patients exhibiting certain disease processes, or better yet allowing students to act out disease processes as a learning tool may help bridge that gap, especially for African American students.

5.3 Limitations

There are a few limitations with this study. This study included nursing students from only one university limiting the generalizability of results. The study participants are also current students. Skepticism of confidentiality may have caused participants not to fully share negative experiences, for fear of private thoughts and feelings being revealed to peers and faculty.

CHAPTER VI

IMPLICATIONS

African American nursing students face many systematic barriers to success. Vygotsky's Theory of Social Development must be understood and used to guide schools of nursing. Historically Black colleges and universities (HBCUs) account for a mere 3% of colleges in the United States; however HBCUs confer 40% of the science degrees awarded to Black students in the United States (Lancaster & Yonghong, 2017). The difference is the milieu. Institutions that are predominately White must take care to provide a learning environment that is engaging, relatable, accessible and supportive. Taking a socio-cultural approach to the facilitation of learning is key. A sense of belonging and forming social connections are important to the academic success of African American students, which means recruiting and retaining more African American students, as well as African American faculty members. If students see more faces that match theirs, they become more aware that success is an option. The environment is less stressful because meaningful bonds and friendships are formed.

Schools of nursing may benefit from building alliances with local minority organizations, so that minority nursing students can be matched with minority nurse mentors. This not only gives the student someone that can help guide them in their

journey of becoming a registered nurse, but also someone who understands their struggles and can show them what success looks like as an African American nurse. An example would be CSU joining with the Cleveland Council of Black Nurses to develop a mentorship program for incoming minority nursing students. According to Payton, Howe, Timmons, and Richardson (2013), African American students may respond better with a minority mentor because it is easier for them to express their feelings without feeling inferior.

The style in which education is delivered should be revisited for improvements. African American students are more responsive to collaborative learning activities, rather than didactic (Cabrera, Colbeck, & Terenzini, 2001). This population benefits from working together with others in small groups to increase understanding of concepts and how to critically think. Smaller classroom sizes may also increase African American student likelihood of requesting help from professors when unable to grasp concepts. According to Lancaster & Yonghong (2017) African American students may be reluctant to ask for help in larger classrooms for fear of feeding into the stereotype that they are deficient.

Efforts should be made to link life experiences to clinical experiences to lecture lessons. Many times there are instances where the lecture is focused on cardiology, but students may have clinical on a renal floor. This shift makes it harder for this group to make connections and learn the material. Professors should also ensure that assignments given to students are well thought out and add to the learning experience. Assignments that do not enhance students' learning of a particular concept are often label as busy work by students. Some students feel that busy work is a way to weed out African American

students because they are usually non-traditional students juggling other responsibilities and therefore are working against time constraints.

Schools of nursing may also benefit their minority students by teaching diversity courses, which helps other students to understand, embrace and learn from their African American peers. Providing purposeful and guided interactions through strategically assigned group projects may help break down barriers between minority and majority interaction and collaboration.

CHAPTER VII

CONCLUSION

The problems that lead to the high attrition rate of African American nursing students are multifactorial. Underrepresentation of African Americans in healthcare and nursing in particular can have negative effects on access to and delivery of healthcare for African American patients leading to disparities. Examining the experiences of the African American nursing student helps provide an understanding of the barriers and supports that can be determining factors between matriculation and attrition. This study revealed several key factors that were already discussed in the literature; however, there was new information that emerged in this study.

Much of the literature shows positive effects of having a mentor during nursing school, but the literature does not discuss the importance of those mentors matching the race/ethnicity of the mentee. This situation exists because of the scarcity of African American role models in nursing schools. The literature also does not explore how genuine interest or resolve to succeed can be used to increase student success. Evaluating how to incorporate students interests into learning or exploring if resolve to succeed is a characteristic that can be manipulated may be helpful. Traditional instruction methods

should also be updated based on the evidence, but change in practice is usually far behind the evidence.

This study interviewed students from one university. Continued research is needed and should include college a vast variety of colleges. This study included current students in the nursing program. If the real problem is attrition, further studies are needed to explore the experience of the African American students who have failed out of nursing programs to understand their perspectives.

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APPENDIX A: Recruitment Flyer



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I am inviting you to take part in a research study. I want to explore the experiences of African American nursing students in nursing school.

If you volunteer you will be interviewed about your experience in nursing school. The digitally recorded voice interview will take 30-90 minutes and you may stop at any time. Your responses will remain confidential.

If interested in participating, please contact:
Shanell Hill, RN
216-577-0716
s.d.hill56@csuohio.edu

APPENDIX B: Informed Consent



Cleveland State University

School of Nursing

Informed Consent

Dear Potential Participant:

My name is Shanell Hill, RN. I am a graduate nursing student at Cleveland State University. I am inviting you to take part in a research study. The purpose of the study is to explore the experiences of African American nursing students while in nursing school. This study also aims to learn how to improve the graduation rate of African American nursing students.

If you decide to take part in this study you will be interviewed about your experience in nursing school. The interview will take place in a private area in Julka Hall or any other CSU location that offers privacy of your choice. The interview will take 30-90 minutes and you may stop at any time. Your responses will remain confidential. The information will only be shared with my thesis committee. We ask you not to discuss the interview with others to protect your own privacy. If published, no report will include any personal information that will identify you.

Your voice will be digitally recorded. Recordings will be transcribed verbatim by the researcher. All recordings and transcripts will be stored in a locked cabinet in the office of Dr. Linda Wolf, Julka Hall 268. Only the researchers will have access to the records. With the exception of the loss of confidentiality, there are no risks greater than those of daily living for an African American nursing student. All efforts will be made to maintain your confidentiality and your privacy, but this cannot be guaranteed. There are no direct benefits to participate in this study.

Taking part in this research study is voluntary. If you choose not to participate, it will not affect your studies here. If you decide to take part in the study, you can quit at any time without penalty.

For further information regarding this research contact:

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Thesis Advisor

"I understand that if I have questions about my rights as a research subject I can contact the Cleveland State University Institutional Review Board at 216-687-3630."

There are two copies of this letter. After signing them, keep one copy for your records and return the other one. Thank you in advance for your cooperation and support. Please indicate your agreement to participate by signing below.

“I am 18 years old or older and have read and understand this consent form and agree to participate.”

Signature _____ Date _____
Print Name _____ Date _____

Interview Questions

1. What prompted your interest in nursing?
2. How did your high school education prepare you for college?
3. Describe your relationship with your peers.
4. Describe your relationship with your family.
5. What has been the biggest challenge in nursing school thus far?
6. Have you ever been referred for tutoring?
7. Tell me about your participation in student services?
8. Does your family support and encourage you?
9. Would you change anything about your nursing school experience?
10. What has been the biggest help for your studies?

APPENDIX D: Extracted Significant Statements

	PARTICIPANT #1	PARTICIPANT #2	PARTICIPANT #3	PARTICIPANT #4	PARTICIPANT #5	PARTICIPANT #6	PARTICIPANT #7	PARTICIPANT #8	PARTICIPANT #9	PARTICIPANT #10	PARTICIPANT #11
Question #1	Nurses better than doctors. Spend more time caring for patient. Treat the person not disease.	Nurses show respect and concern. Appreciation of nursing service	Always wanted to help people. Nurses help more than doctors	Wanting to take care of sick family. Multiple opportunities.	It was my calling. Watching nurses give care.	Desire to learn more about cancer. Multiple family members with cancer.	It's all about the greater good. If I can help one person it's a win for my community.	Many people not treated equal. I want to help the people who cannot advocate for themselves	Enjoy working with people. Understanding their concerns. Being a professional. Support my family.	Being the example for other black males. Always took care of sick family, recognized by healthcare professionals for good care.	Makes me happy to help others
Question #2	I thought they pushed us. But others in nursing school knew much more than me. Did well in high school, but struggling in nursing school. Failed 2 courses.	Public-not prepared for anything, memorization. Homeschooler d-prepared to study independently and apply knowledge. Not prepared for nursing school. Almost Failed 1st semester.	Not for study techniques. Content wise, I learned a lot in high school.	Not prepared at all. Professional writing had me completely lost. Others seems so much more prepared. Had to review over and over	I feel it did prepare me. But this material is rough, I almost didn't make it.	Didn't take high school seriously, so no. I have to take it seriously now because it costs.	Honors student, felt prepared aside from writing.	Did not prepare me, poor curriculum, sharing books. Other family members in other schools more advanced. Difficult to fill out job application.	It was different because its more than just learning the material. There was no application on people. It's much more work, plus clinical.	No, did not prepare me for real life. Basic material, just get good grades and leave. Not designed to be preparatory	Not at 1st. Switched districts senior year that helped. So much time wasted getting class under control no learning, teacher not interested in teaching.

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<p>Feel like the mom of the group. Stick together with other AA. White students secretive with info.</p>	<p>Ok with some. Mostly feels like a competition, no teamwork. Even though nursing is about working together. Feel that other think I'm dumb. AA try to help each other since only a few. It is very cliquey. White students seem unfamiliar with blacks. Inappropriate comments. They think I'm only there b/c of minority status, like I don't belong.</p>	<p>With some well. But others, there have been racial slurs toward me. Run-ins with students. They question my knowledge. Only 1 person AA that I really gel with, study with.</p>	<p>Not close with any peers. Stay out the way. Had close relationships in CC</p>	<p>Generally I get along with people well. But here I am quiet. The one student (AA) I built a relationship with is no longer in the program. Don't talk to anyone else.</p>	<p>It's pretty good. I'm an introvert, so I have not meet many.</p>	<p>It's interesting. White peers more distant. Closest relationship with clinical peers. The racial divide is very apparent. They form study groups without you. Such an imbalance of opportunity. Offensive comments</p>	<p>I'm considered the dumb one of the group. My opinion doesn't matter. Racism lives on. Offensive conversation and comments</p>	<p>Some are nice, but most don't want to associate with you. They feel like they can't learn from you. They are young and white, very different from me. Ignored when I greet others. Awkward & uncomfortable.</p>	<p>I'm friendly, but I'm twice their age. It's Meh I guess. I am not really seen as equal. I have to work really hard to prove myself.</p>	<p>I really have no interaction with them. I don't know if it's them or me.</p>

Question #3

	PARTICIPANT #1	PARTICIPANT #2	PARTICIPANT #3	PARTICIPANT #4	PARTICIPANT #5	PARTICIPANT #6	PARTICIPANT #7	PARTICIPANT #8	PARTICIPANT #9	PARTICIPANT #10	PARTICIPANT #11
Question #4	Everybody wants their time. They don't understand the time I need to devote to school. Supportive until you can't make a family function. College grads more supportive.	My family is a great support system. Always helpful. There to talk to about anything. Mom and Dad both college grads.	My family is extremely supportive. Both college grads. Always pushing me to do my best. Lots of encouragement.	It's pretty good. They are supportive. But it is hard. I'm a single mom raising a son, while in school.	I don't have a lot of support. I rarely speak with them.	They play a positive role in my life, but they do not live here. I am an out of state student. So it's hard.	Very supportive. Good role models. All professionals and college educated. Values education. I'm blessed.	I don't really have a relationship with them. It's just me and my boys. Mother doesn't understand education. No help with my boys.	My family tries to be there for me, give me time to study. I'm the man of the house so I have to work to pay the bills. They can't help with that. So it makes the program hard.	I took care of the family growing up while my mom worked. So she is very supportive of me. My husband is also supportive.	My family is not at all supportive. It really bothers me. There is no push or drive coming from them.
Question #5	Readmission after failing out. Not getting proper feedback from instructors.	Hard time understanding layman's terms. People laugh and think I'm dumb.	Being 1 of 6 in a class of 82. Abilities hugely underestimated. Having to prove myself to peers, even patients and hospital staff.	Difficult to understand what information is important. Having to read things multiple times before understanding. Having no idea how to write a paper. No study skills.	Lack of support. Inability to connect with other students. I'm so different, my story is completely different. Didn't see myself represented in staff. Feeling isolated	High expectations and not wanting to fail adds stress. Keeping momentum. Comparing self to others. Others have tools not available to me, uneven playing field.	Workload is unrealistic. They lose people with life experience b/c they treat all like 18 years old. See very capable, qualified peers (AA) not make it. No scaffolding. No common sense taken into consideration	The competition and cutlines. People feeling like they can't study with you. Not being able to feel welcomed.	Too much information, too fast. Not being able to discern what was important from professors. Professors not caring whether I get it or not, unhelpful. Program not structured for people working and taking care of families. No flexibility.	Feeling depressed and isolate, not being able to connect with peers. Mounds of paperwork that did not help my understanding of concept.	Keeping the pace, material comes very fast. Unable to move forward if you miss one concept because everything relates. Not having a support system.

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Question #6	I asked for a tutor up front. Put me with an accelerated student. Unhelpful because she overwhelmed herself. Notified school, nothing else offered.	The professors were able to offer extra help. Referred but did not engage.	No tutoring available for content understanding. Only writing center referrals. It was a struggle to try to get tutoring.	The staff made us aware tutoring was available. Never referred.	That's one of the problems. No tutors just graduate English students unfamiliar with nursing. No structures program	I've reached out for tutoring, but they don't really have it. I was never referred	Only to the skills lab. No tutoring for theory content available.	Never referred or offered	Asked for help, told if you don't pass you can take it over. No tutoring available.	They don't have tutors. I had to retake the class.	I was never offered tutoring.
Question #7	Nursing school feels segregated from the rest of the college. No minorities in the minority in the minority group.	I tried. Not enough support leading to disorganization. Study and go home	Yes, needs to grow. Makes it relevant, feels unhidden.	Not here. Valued at previous school, gave sense of purpose and giving back. Less connected here.	Paid fee, but no info given. I was really excited about it. It fell through.	No time. Need all free time for studying and assignments.	Not much, only if the activity was significant. Excuse talking to minorities about careers in nursing.	Not much. I'm interested in going out into community.	No time for extra activities.	Reached out for mental health counseling. Feeling anxious, unable to connect with peers.	I joined SNA, but not very active right now.
Question #8	Professors usually have open door policy and are helpful.	Not enough AA professors, but the ones here are very helpful. They really took interest in my learning	Generally they are helpful, some more than others	Most professors are helpful. Not much contact outside of class	They are pretty good. Do not offer enough support to minorities. Feels like they try to weed out minorities.	Rude and condescending. Don't want to see minorities do well. Weed out. Deceptive with scoring.	Only two supportive. Know subject matter, but not how to educate. Prejudgment	Great so far.	Don't care if I get it or not. Ignore my concern. Tell me I'm incapable.	They're ok. Need better evaluative method.	Some professors discouraging. Not helpful when struggling. Most helpful and understanding.

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Question #9	Help students feel include. Told program for 19 year old white female. Too many students in the class to effectively learn.	Order of classes. Eliminate busy work, professors not reviewing. Not enough education on cultural diversity. No teaching on interacting with AA patients. Need more AA professors. Clinical reinforce classroom learning.	More involvement in student organizations. Being accepted and thought of as equal.	Order of classes. Better organized instruction. More focused instruction.	Offer more support to AA students. Reduce frivolous assignments. All students receive fair treatment. Structured tutoring. Mentor program for minority students.	Improved organization of program. Professors held accountable. More AA professors.	More simulation. Increase diversity and encourage students to embrace differences in both peers and patient. More meaningful assignments vs busywork. Scaffolding.	Difficult to say. Need more time.	Focus on school, no working. Need to offer review of performance. Learn missed concept. Improved communication.	More hands on. More integration between classroom and clinical. More help with coping being minority, male and black. More diversity. Minority mentor.	Improved communication. Treating each student individually, like they teach us to do with patients. They seem to have no understanding that life happens. Talk to me and see what's going on if you see me failing.
Question #10	Support from AA peers.	Prayer and going to church. Family support.	Confidence instilled from mom. Ability to work alone. Belief I can do anything.	Scholarship money, allowed me to work less. Networking with successful minority nurses. Prayer. No option to fail.	God. Failure not an option, son counting on me. Connection with AA professor.	Helpful staff. Respect from AA professor. High expectations of myself.	Belief self-confidence. Very religious upbringing, faith. simulations	Helpful professors. Faith. Passion for helping community.	My family. My faith. Encouragement from my job.	Mental health counselor. Spiritual centering. Family support. Drive to improve image of community.	Having peace within myself. The Lord gives me that strength. I pray.