



## How to Increase Latino Participation in the Nursing Workforce: Best Practices at California Nursing Schools

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### EXECUTIVE SUMMARY

California is grappling with a serious nursing shortage that reflects a lack of minority involvement and, according to some, ultimately a lower standard of care for minority patients. Experts say boosting minority participation is a crucial component to help resolve this problem. This would both capitalize on the growing minority population as well as the understanding that the healthcare workforce needs to better reflect the greater population. Culturally and linguistically appropriate health care is needed to address grave disparities in minority health care outcomes, studies have shown.

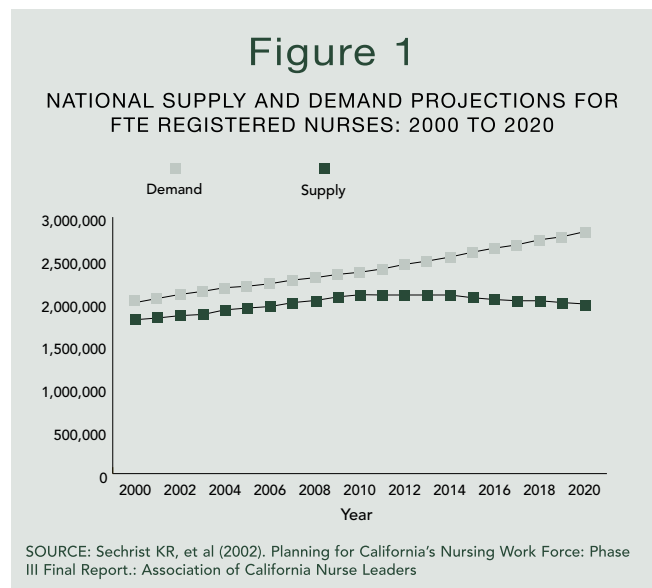
In April 2007, the Tomás Rivera Policy Institute (TRPI) released a study examining ways to bring more Latinos into nursing. By speaking with experts in the field as well as Latino nurses and nursing students, the study identified barriers that prevent Latinos from attending nursing school. Based on statistical analysis and expert interviews, TRPI researchers selected nursing schools with programs and policies that tackle these established barriers. The goal of this study is to explain the roadblocks and showcase the best practices for educators and policymakers in order to inspire change and reform in terms of successful recruitment and retention of nursing professionals, as well as to promote diversity within the profession.

### NURSING SHORTAGE AND MINORITY PARTICIPATION

At more than 2.2 million strong, registered nurses (RNs) represent the largest single occupation in the health care

industry.<sup>1</sup> Nonetheless, the United States is facing a nursing shortage as the current nursing workforce ages and retires coupled with increasing numbers of maturing patients requiring skilled nursing care. Escalating demands on the health care workforce require new nurses to have increasing technical expertise and implement mandatory minimum staffing ratios to improve health care outcomes.

The U.S. Department of Labor has projected the need for 1 million replacement nurses by 2010.



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To download and view the complete report, visit [www.trpi.org/PDFs/nursing.pdf](http://www.trpi.org/PDFs/nursing.pdf).

Out of a national workforce of 2,696,540 registered nurses, only 333,368 — or 13 percent — are of a minority group. More than 20,000 minority nurses are needed to increase their proportion by just 1 percent.<sup>ii</sup>

**Table 1**

**RACE/ETHNICITY OF REGISTERED NURSES COMPARED TO THE GENERAL US POPULATION**

RACE/ETHNICITY	% US POPULATION*	% NURSES**
Caucasian	75.1	86.6†
African American	12.3	4.9†
Asian or Pacific Islander	3.7	3.7
Hispanic	12.5	2.0
American Indian or Alaskan Native	0.9	0.5
Other race	5.5	N/A
Two or more races	2.4	1.2

\*Percentages add up to 112.4 percent because Hispanics may be of any race and are therefore counted under more than one category.

\*\* Figures total to less than 100 percent because some nurses chose not to report their racial/ethnic background

† Non-Hispanic

SOURCE: Schaffner and Ludwig-Beymer 2003

Many experts say increasing minority participation is a key component in reversing the nursing shortage.<sup>iii</sup> But nursing has yet to draw on the burgeoning minority youth population. In California, for example, Latinos are one of the fastest growing, youngest and largest minority groups, and it is projected that, by the fall of 2014, the majority of new high school students will be Latino.<sup>iv</sup> Though Latinos are quickly becoming the majority population in California, they currently comprise only 4 percent of registered nurses. Not only does this present a disparity in terms of racially concordant health care for the state's growing Latino population, it means that, if trends continue, California will suffer one of the most severe nursing shortages in the country. One encouraging note is that minority nursing school enrollments have increased in recent years. Still, given their overall underrepresentation in nursing, increasing numbers of new minority graduates each year has to be ongoing in order to improve workforce diversity.

### **IMPORTANCE OF MINORITY PARTICIPATION IN HEALTH CARE PROFESSIONS**

Minority participation in health care professions can help improve access and quality of care for minority patients, studies also suggest. Development in this direction would help alleviate disparities in the quality of health care for minority and non-minority populations — differences that

cannot be explained by access-related factors such as insurance status and income.<sup>v</sup> Studies show that minority patients not only are more likely to seek out racially similar health care providers, but also to have greater trust<sup>vi</sup> and report greater satisfaction and use of health care services when they have these providers.<sup>vii</sup> Finally, minorities are more likely to practice in underserved areas.<sup>viii</sup> Latino patients face additional access barriers due to limited English proficiency. Latino health care providers are more likely to be Spanish-speaking and have a better understanding of Latino culture, thereby providing the culturally and linguistically appropriate health care needed to bridge these disparities.

### **BARRIERS TO INCREASING LATINO PARTICIPATION IN NURSING**

To increase the number of minorities in the nursing profession, there are barriers to participation that must be acknowledged and addressed. TRPI spoke with experts as well as Latino nurses and nursing students in California and identified the following barriers to Latinos entering the field of nursing:

#### **Family-related Barriers**

First- and second-generation Latinos tend to be vulnerable to a poor perception of the nursing profession in their families' countries of origin. This lack of family support or even active discouragement from the pursuit of nursing as well as a pressure to attend nursing school near the family's home can conspire to deter potential students.

#### **Financial Barriers**

Students said financial hurdles were the main roadblock that prevented them from succeeding in school. Often a need to contribute to family income and a reluctance to access financial aid forced students to work long hours during school. In other cases, seasoned RNs put off graduate nursing education in favor of work.

#### **Pre-college Barriers**

Students who are the first in their families to attend postsecondary school tend to be academically disadvantaged compared with peers. In other cases, language barriers and inadequate high school preparation lead to higher dropout rates. Many students are inhibited from entering nursing by low expectations from teachers or outright discouragement by school counselors.

#### **Lack of Latino Leadership in Health Professions**

Study participants identified a lack of Latino nursing role models as well as a lack of Latinos in leadership positions both professionally and academically.

#### **Sociocultural Barriers**

Studies document that minorities may feel out of place on college campuses. Research also suggests that men tend to have an aversion to nursing as a profession, limiting the number of prospective Latino nursing students.

## STUDENT VOICES: STORIES FROM INTERVIEWEES

### Reluctance to Access Financial Aid

Many Latino students did not access or understand financial aid opportunities and as a result they delayed additional schooling and faced serious academic challenges.

One nursing student's family did not believe in accessing financial aid or taking out loans, simply explaining "we don't like to take on debt." They decided that his older brother should be the one to go to college. The nursing student and his single mother worked as janitors so they could pay cash for his older brother to attend UCLA. He then enrolled in a private LVN program, also paying in cash. After 10 years he paid cash for a private ADN degree, only obtaining an RN license with the encouragement of hospital co-workers.

One Latina nurse attended a four-year private BSN program. Despite being an "A" student, she was ineligible for many government loans and financial aid packages because she worked to support her family while she was in high school. She continued to support her mother throughout nursing school. As a nurse, she now makes well over \$100,000 per year. However, while she was a nursing student she had to cut down on her working hours to finish her studies. This resulted in her mother being evicted from her apartment, and the student forced to live out of her car and sleep on an ex-boyfriend's parents' couch for a semester.

### Low Expectations and Discouragement from Educators

Educators and secondary school counselors with low expectations for minorities and negative biases toward nursing often tried to track Latino students away from nursing into nonprofessional jobs.

*"I wasn't sure that I should be [a nurse] because everyone said nursing was too hard ... they thought I should be a teacher."* – Latino nursing student

*"I became a nurse and [pursued] my Ph.D. ... specifically because [my boss] said I wouldn't be able to do it."* – Latino nursing professor

Yet another student wanted to be a doctor. Her community college counselor cited statistics on how few Latino doctors there were in an effort to convince her of the unlikelihood of her completing a medical education, and to encourage her to pursue a lower skilled social service job. The student, who is currently pursuing a master's degree in nursing, was motivated to pursue a career in health care because of and despite this counselor and other naysayers.

### System Barriers: Higher Education

The vast majority of California nurses (and particularly minority nurses) are trained at community colleges. Unfortunately, the community college system is severely underfunded and has above-average drop-out rates. Additionally, gaps in communication about operations at all levels of nursing programs hinder students trying to navigate the system.

### EXEMPLARY PRACTICES

Case studies of schools exemplary in addressing barriers to Latino participation in nursing<sup>†</sup> identified the following best practices:

#### Improve Latinos' Understanding of Nursing

Developing ties to local high schools facilitated outreach and promoted nursing. Satellite campuses and distance learning brought nursing programs to minority communities.

Latino nursing students were more inclined to delay additional schooling or face serious academic challenges rather than seek out or accept financial aid.

California overall spends 23 percent less per community college student than the rest of the country as a whole.

### Tailor Nursing Education to Working Students

Night and weekend programs accommodated working students at programs that successfully attracted minorities. Some schools actively helped students access outside funding to offset student expenses. Flexible and online graduate level nursing programs allowed working nurses to advance in the field.

#### Provide Student-Centered Programs or Strong Student Services

Schools tackled the many academic barriers Latinos face through programs such as probational admissions policies, small learning communities, strong campus resources including retention services and learning centers, skills assessments and referrals for incoming and current students, and designated recruitment and retention staff.

<sup>†</sup> See full report at <http://www.trpi.org/PDFs/nursing.pdf> for schools identified and methodology in how schools were selected.

## Highlight Latinos in Leadership Roles

Schools with reputations for supporting diversity were able to attract minority faculty. One doctoral nursing program recruited promising minorities from their master's programs.

## Create Culturally Aware and Supportive Learning Environments

Certain practices sent strong messages to minority students that they were valued and supported. One school offered staff and faculty the ability to directly debit funds from their paychecks to fund student scholarships. Other supportive practices included campus marketing materials and activities highlighting a focus on diversity, ethnic nursing societies and mentorship programs, and mandatory cultural competency components in school curriculum.

## Expand Capacity and Resources with Limited Funding

Schools found unusual ways to overcome budget cuts, capacity constraints and faculty shortages. Strong leaders developed collaborations and partnerships to increase capacity and access to nursing. Other schools used retention staff to train nursing faculty and actively sought external funding for diversity initiatives.

## FUTURE DIRECTIONS AND POLICY IMPLICATIONS

This study identified a number of unique nursing programs in California that are exemplary in meeting the needs of Latino students — and ultimately helping patients and society as a whole. All nursing programs are overworked and underfunded, but these schools prove that effective practices can be implemented without disrupting day-to-day workings of a program, and they can actually

improve them. In many cases, strong leadership facilitated collaborations among what had been competing groups, with individuals taking risks so all parties benefited. In the end, these leaders' risks paid off, improving the reputation of the nursing programs, increasing their schools' capacity, attracting additional resources, and increasing the ability of the school to meet the needs of minority students.

One concern highlighted by this report is that despite innovative practices of dedicated nursing programs, many barriers remain. However, policymakers, the nursing community, and other stakeholders can lend support to these exemplary practices in the following ways:

1. Inform educators and high school and community college guidance counselors about the rewards of nursing careers.
2. Continue to improve articulation between different nursing degree programs.
3. Make financial aid accessible by addressing cultural barriers to access.
4. Provide greatly needed funding for community college nursing education.
5. Promote and provide strategic leadership in partnerships between public and private sectors.

By addressing barriers and learning from best practices, policymakers, educators and members of the health care industry can help increase participation of Latinos in the nursing workforce. In turn, this will foster the joint objectives of finding solutions to the nursing shortage and providing appropriate care to an increasingly culturally and linguistically diverse patient population.

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The Tomás Rivera Policy Institute (TRPI) advances informed policy on key issues affecting Latino communities through objective and timely research contributing to the betterment of the nation.