

Increasing Minority Representation in Nursing

A more diverse nursing faculty is crucial.

The underrepresentation of racial and ethnic minorities in the nursing workforce and in nursing education has proven difficult to remedy. Just over one-third of the U.S. population self-reported as being a minority in the 2010 census. But according to findings from the 2008 National Sample Survey of Registered Nurses, ethnic and racial minorities constituted just 16.8% of the nursing workforce. Although those of Asian background were slightly overrepresented, blacks, Latinos, and American Indians and Alaska natives were significantly underrepresented, making up more than 28% of the population but only a combined 9.3% of nurses.

In addition, according to the American Association of Colleges of Nursing, in 2010 fewer than 12% of full-time nursing faculty were minorities, and the National League for Nursing reported in 2007 that nursing “lags significantly behind the remainder of academia with respect to diversity.”

Increasing minority faculty representation is a crucial step in making nursing a more diverse profession. Faculty could serve as role models and strengthen their school’s ability to deliver culturally competent health care education. While a number of factors influence minority underrepresentation in nursing education, such as the fact that nursing faculty are often overworked and paid less than other faculty members, minority nurses often share among themselves their experiences with racism and bias in nursing education—experiences that may play a significant role in the continued shortage of minority nursing faculty.

Discrimination in America has been threaded overtly and covertly into the fabric of this country. As educators, we believe ourselves to have experienced acts of racism. For example, when one of us was passed over for a promotion by a supervisor who asserted that her personality was “too strong” for this supervisor to work closely with her, she concluded that, since her performance evaluations had been stellar and acknowledged her ability to both

lead and work well with others, the decision had been based on racial stereotypes rather than performance and merit. The U.S. Equal Employment Opportunity Commission states that employers cannot base “promotion decisions on stereotypes and assumptions about a person’s race.”

In addition, Vereen and Hill observed in 2008 that black faculty are more likely to encounter challenges and stressors that can include salary and promotion inequities as well as experiences of “token status,” isolation and marginality, implicit and explicit discrimination, having to always prove one’s merit and credibility, and encountering bias from predominantly white students. Despite these challenges, it’s crucial that minority nurses consider a career as faculty lest we continue to be underrepresented, with little voice for change.

Administrators should be cognizant of the challenges confronting minority faculty, allocate resources to enable them to join ethnic minority organizations that provide the emotional support needed to persevere, provide mentors to help guide them through the tenure process, review policies to ensure they don’t negatively affect minorities, enact a zero tolerance approach to discrimination, and assess the cultural climate of the institution in order to create an environment that embraces diversity. Criteria for promotion and tenure should be explicit, and faculty should determine whether they hold unconscious biases that stall efforts to create an environment that promotes diversity.

Nursing still lags behind many other professions in terms of diversity, but it is uniquely positioned to play a more dynamic role in a nation with steadily increasing racial and ethnic diversity. ▼



Kenya V. Beard

Kellie Volcy

We must enact a zero tolerance approach to discrimination.

Kenya V. Beard is an assistant professor and Macy Faculty Scholar at the Hunter-Bellevue School of Nursing in New York City. Kellie Volcy is a nursing instructor at the University of Medicine and Dentistry of New Jersey School of Nursing in Newark. Contact author: Kenya V. Beard, kbeard@hunter.cuny.edu. The authors have disclosed no potential conflicts of interest, financial or otherwise.