

Recruitment and Retention of Minority High School Students to Increase Diversity in the Nursing Profession



Denise Dawkins, DNP, RN, CNL, CHSE

KEYWORDS

- Prenursing students • Black • High school student • Diversity • Underserved
- Culturally competent

KEY POINTS

- Culturally competent health care for minority populations is critical to reducing disparities in health outcomes.
- Increasing diversity in the health workforce will improve the health of unrepresentative populations, as well as the nation.
- Recruitment of Black/African American high school students can create a pipeline of potential culturally competent nursing students.
- Underrepresented students benefit from both emotional and tangible support.
- Appropriate, sound, and successful recruitment strategies require assessment of, and implementing solutions to, challenges.

INTRODUCTION

Disparities in the quality of health care for the Black population have been apparent for many decades,^{1,2} evidenced by the high mortality and morbidity rates for the Black/African American community.³ Major health care organizations have recognized that a culturally diverse nursing workforce is essential to improve the health of this community.³⁻⁵ Recruitment of prenursing students from the Black population is vital to building a diversified workforce sensitive to the community's needs. In recent years, innovative projects have evolved to increase the nurse workforce's diversity by recruiting Black/African American students.⁶ This article will provide background, identify challenges, recommend solutions, and showcase successful programs.

The Valley Foundation School of Nursing, San Jose State University, One Washington Square, San Jose, CA 95112, USA

E-mail address: denisedawkins04@gmail.com

Nurs Clin N Am 56 (2021) 427–439

<https://doi.org/10.1016/j.cnur.2021.04.007>

[nursing.theclinics.com](https://www.nursing.theclinics.com)

0029-6465/21/© 2021 The Author. Published by Elsevier Inc. This is an open access article under the CC BY license (<http://creativecommons.org/licenses/by/4.0/>).

BACKGROUND

The Need for a Diverse Workforce to Address Disparities in Health Care

Health disparities in the Black community are reflected in high uninsured rates, high rates of chronic conditions, the highest mortality rate for all cancers combined compared with any other ethnic group, twice the infant death rate than the national average, and poor access to mental health care.⁶ One of the factors contributing to these disparities is the lack of culturally competent care, which can lead to unmet health needs and delays in receiving appropriate care.

Although population in the United States is becoming more diverse, this diversity is not reflected in health care or the nurse workforce. The consequences of limited ethnic diversity in the health workforce include increased risk of patient mistrust, segregation, and persistent racial discrimination for some minority groups, including Black/African Americans.^{1,7} Ensuring inclusion of Black/African American health care workers in organizations that provide health care in the underserved communities improves access to health care because minorities are often more comfortable with providers of similar racial backgrounds. Minority patients might seek health care sooner if the nurse providing the care were from the same ethnic background.⁵

There is a pressing need to increase the diversity of the nursing workforce as an integral component of efforts to reduce health care disparities due and improve culturally competent care.¹⁻⁶ The 2017 survey conducted by the National Council of the State Board of Nursing and the Forum of State Nursing Workforce Center documented the racial/ethnic backgrounds of the registered nurse (RN) population, which was composed of 80.8% white/Caucasian, 6.2% African American, 7.5% Asian, 5.3% Hispanic, 0.4% American Indian/Alaskan Native, 0.5 Native Hawaiian/Pacific Islander, 1.7% two or more races, and 2.9% other nurses.⁴ The Black/African American RN population is underrepresented compared with the general minority population of 13% in the United States.⁸ One solution to address health inequities would be to increase the number of minority RNs in the health workforce.³⁻⁶

An effective strategy to increase representation of Black/African nurses in the workforce would be to increase the enrollment of Black/African American high school students in nursing schools.⁶ According to National Center for Health Workforce,⁵ it is essential to recruit students who live in underserved areas. Active recruitment of underserved high school students can create interest in nursing as a career choice and foster a pipeline of nurses from different backgrounds to enhance the workforce for years to come.

Concurrent with recruitment efforts, strategies for retention are also critical. Retention is important because Black students are at a higher risk for attrition than white nursing students.⁹ Black/African American students are essential because they are more likely to stay and serve in the community after graduation.^{10,11} Recruitment and retention of this overlooked pool of potential nurses is important to continuing efforts to follow the Institute of Medicine recommendations to increase workforce diversity.³⁻⁶

Black/African American Nurses in the Workforce

Black/African American nurses in the workforce often understand the inequities that are faced by Black patients and communities.¹¹ Nurses from underserved communities live in the community spaces and understand the culture from the lens of the population, such as language, values, and shared belief systems. Black/African American nurses can draw from their own experiences and knowledge of the community and are often able to understand the concerns and cultural perspectives of the patient or family members. Black/African American communities are diverse; members may identify as Black, African American, Afro-Latinx, Afro-Brazilian, Afro-Indigenous,

Caribbean, and ethnically of African countries of origin, or otherwise identify with the global African diaspora. Black/African nurses come from these diverse backgrounds and are often about to bring understanding of the perspectives and experiences of the various groups. These nurses can help promote evidence-based care that ensures that these populations receive optimal, empathic, informative, and quality care, enhancing patient outcomes.^{5-7,11}

In addition to connecting with underserved patients, nurses from these communities can foster increased trust, challenge institutional biases, and implement strategies that could change health care institutional practice.^{12,13} The Black populace has trust issues with the medical community given historical experiences with health care services and health research, such as the Tuskegee syphilis study, men not treated for syphilis, undertreatment of pain, and misappropriation of Henrietta Lacks' cells for research without consent.¹⁴ A quality patient-provider relationship requires trust^{7,11} and a cultural connection that may help vulnerable patients feel more comfortable discussing their health concerns.

Barriers to Recruitment and Retention: Connections to Social Determinants of Health Model

The Social Determinants of Health model recognizes that the environmental conditions where people live affect the quality of life and health outcomes.^{2,5} Disparities in health are determined, in large part, by these conditions. One of the key domains of social determinants of health involves access to health care services, including consideration of social and cultural barriers to effective care.^{2,9,15} Although recruiting diverse health care providers is an important element of improving health care services, barriers to recruitment and retention must be overcome. Many of these barriers are linked to other domains of the social determinants of health model. Social and community contexts (such as discrimination), limited access to enrollment in higher education, and issues with economic stability (eg, poverty) are also key social determinants of health. These conditions, which negatively impact the health of marginalized communities, also create barriers to increasing the diversity in the RN workforce. Consequently, diversifying the nursing workforce requires addressing some of the elements of the Social Determinants of Health model.¹⁶

Financial instability

Students need income to meet the cost of living, and fees needed to attend high school or college program.⁹ High school students could be provided with transportation or resources to cover incidental costs to attend a recruitment program, such as transportation for field trips. Precollege and college selection activities have several incidental costs. Students need funding to cover the cost of applying to college, which includes college admission applications, precollege placement test, and travel cost to visit colleges. Once the student attends college there are tuition, housing, food, transportation, health insurance, incidental fees, and other personal fees.⁹

Education inequality, access, and bias

Black children are less likely to have equal access to quality education opportunities.¹⁷ Some Black children not only have limited access to quality education but also do not have the tools or encouragement to be competitive when applying to nursing school.¹⁷ Some of these children live in neighborhoods with poor-performing schools.^{17,18} In addition, Black high school students endure various forms of stereotypes, discrimination, and bias. Some students are exposed to messages that they are not smart enough; they are also less likely to be placed in gifted programs and more likely to be directed to vocational schools.^{18,19} Some are labeled as troublemakers and receive

unjust punishment.²⁰ Stereotyping, discrimination, and bias undermine adequate academic preparation for the rigor of nursing school that impacts recruitment of Black students. Students who lack the preparation for college-level courses may not have the grades to qualify for nursing school. For example, poor training in mathematics and science courses and lack of college-level reading, writing, and communication classes can impede access to nursing school.⁹ Black students may not be aware of the type and number of required courses in science, math, and English that they must complete at the high school level. In college, freshman and sophomore nursing students have the highest attrition rates due to failure in required science courses.⁹ The dropout rate is likely higher among students with inadequate preparation because of substandard education.

Community and social context: shortage of mentors/role models

Black/African American students are bombarded with images of sports figures, musical artist, and acting celebrities as role model representations of viable career options. These glamorous role models may make nursing look less appalling. The nursing profession is often misrepresented in the media with negative images, depicting nurses as uncaring, predominantly white women, or in a way that reinforces stereotypes of female subservience caregivers.^{21–23} Throughout history, nurses have been portrayed as white, an angel of mercy, a hero, sex object, shrew, unfeeling, harsh, and the doctor's handmaiden.²³ In addition, the stereotypical image of male nurses depicts "boy toy" gay or medical school dropouts.²⁴ Professional nurses need to counteract the poor or misleading images, especially of Black/African American nurses, to encourage recruitment of both males and female underrepresented students.

EVIDENCE-BASED SOLUTIONS

It is essential to use evidence-based solutions to reduce barriers and increase recruitment of prospective students from underserved Black communities. Recruitment initiatives should demonstrate sensitivity to diverse stakeholders, including students, families, educators, community organizations, and community leaders. Essential strategies should be inclusive, so students and the community feel respected and valued and trust the program's commitment to student success and community health.³ The strategies discussed in the following sections have identified some ways to overcome the challenges faced by underrepresented students.

Mentorship and Role Models Matters

Suitable mentors foster nurturing relationships and demonstrate positive characteristics that can reduce the negative impacts of stereotyping, discrimination, and bias.¹⁹ The mentors can enhance social interaction and decrease isolation. Research has shown that mentorship is fundamental because it empowers students, promotes engagement, and helps shape the student's trajectory toward nursing as a career.¹⁹ Mentors often foster an inclusive environment where students can feel supported, respected, and able to have their needs met. Creating a nurturing, safe place for students to overcome expectations of bias and create a sense of belonging can increase Black students' recruitment and retention in nursing.¹⁹

Black nurses have an important role as mentors and role models who impact others, promote change, and exhibit responsibility, accountability, honesty, and professional integrity for the student nurse population and minority community.^{6,9,10,14,19,25} As mentors, Black nurses can demonstrate cultural sensitivity, understand concepts of cultural diversity in health care, and bridge the connection for minority students into the nursing profession.^{9,19,26} Black nurse mentors can give students a sense of

belonging and often have first-hand experience of a Black student's challenges.^{9,19,26} As mentors, they can be effective recruiters and can provide one-one support not only to the student but also to the student's family.^{19,26} These nurses, who are working professionals, can provide students with the appropriate intellectual stimulation, challenge, and academic rigor to create meaningful learning opportunities.^{6,22,27}

Peer mentors are just as important as a professional mentor because students can identify with them and there are fewer power differences in their relationship as mentor and mentee.²⁷ Peer mentors, who may look like the student or come from the students' community, are often able to engage in respectful conversation, understand student concerns (eg, socioeconomic challenges or safety issues), and have the student feel valued as prenursing/nursing student. Peer mentors can help socialize the student to the prenursing environment so that students can be successful.^{10,26} Another advantage is that some mentors can double as role models.

Role Models

Role models are different from mentors because they serve as an example who can be emulated by students. Ideally, they should inspire students and demonstrate the ability to overcome obstacles; as such it may be helpful for mentors to resemble the student's physical attributes or share other characteristics so they can visually see themselves in the nursing role. This strategy can help the student relate, enhance student confidence and self-efficacy, and excite them about the possibilities.²⁸ Role models illustrate the process of personal and professional development because they exemplify commitment, good decision making, and how to overcome obstacles. Role models can motivate the student with their stories on how they make it in nursing and navigate through the challenges.^{27,28} Mentors are teachers, but accomplished role models can go beyond teaching by modeling skills and behaviors and presenting a positive image of nursing.^{28,29}

Good role models are a critical component of successful recruitment because students can see the possibilities of becoming a nurse. Black/African American nurses can empower the student by role modeling, setting standards, leading by example, and exhibiting a personal drive to succeed.²⁵⁻²⁹ Role models not only demonstrate personal and professional success but also can help counteract the poor or inconsistent images, especially for male nurses.^{28,29} For example, one study documented that male African American counselors view nurses as the lowest profession and 1 in 3 counselors admitted not knowing much about nursing.²⁷ An excellent example of a contemporary role model is Ernest Grant, PhD, RN, the 36th president of the American Nurses Association, the nation's largest nurses' organization, and an African American male. Dr Grant was the youngest of 7 to a single mother and started his nursing career as a licensed practical nurse.²⁹ Suitable role models and strategic partnerships can enhance a recruitment and retention program.

The Power of Partnerships

Collaboration with partners from a variety of community organization, academic institutions, and professional and social groups can strengthen the recruitment effort.^{26,30,31} Community organizations include the neighborhood school, community church, health care facilities, and higher education institutions. The neighborhood church is embedded in the community, well-positioned to improve the congregation's health,³² and may be committed to recruitment students into nursing. Academic institutions with nursing schools have nurse mentors and role models, peer mentors, and financial resources that may be leveraged for recruitment. Nursing social and professional organizations can supply mentors, role models, and financial resources.^{12,19,26,28} Health care facilities

can provide financial support and professional mentors/role models. Good collaborations can help reach more students in a recruitment and retention program.³¹

Relationships with organizations like Black sororities and fraternities are important for recruitment. These Black professional organizations were founded on Black college campus and have expanded to other higher colleges and universities. In addition to their commitment to the community, they support educational advancement and enhance social bonds of Black students. The membership includes health and allied professionals who are ideal role models and mentors.^{26,28} Another group to enlist in recruitment and retention of students is Black nurses' associations. Such organizations can provide mentors and role models, provide funding resources scholarships, demonstrate professional behavior, and provide a positive nursing image.^{2,3,26,28}

Nearby universities and colleges are essential to the recruitment and retention of Black students. Academic institutions have several resources; they have countless mentors and role models, some from the college's nursing department and other health care-related disciplines. Most academic schools have a community service or service learning requirement for graduation, and college students can make good peer mentors, role models, and emissaries who are culturally sensitive.^{22,27} Academic institutions can provide funding and funding collaborations, such as grants and scholarships. Students often need help with applying to college, as it may be difficult to understand the admission process and the postsecondary requirements.^{9,19} Other services colleges and universities provide are academic reinforcement; support programs, such as counseling services; tutorials programs, which can improve academic performance; and retention of Black students.^{19,25}

The first and most important partnership is with the students' parents or caregivers. Parents' permission is required for activities for high school students. Parents support the student at home regardless of whether the student is in high school or in college. Parents have the inside track to the student that can motivate and support the student.^{25,27} It may be helpful to offer a question-and-answer session so that parents can voice their concerns. The best evidence-based program will only be successful if the parent is on board.

Economic and Financial Resources

Financial resources are needed to build capacity, financial assistance for the students, infrastructures such as personal, data collection, marketing, and program evaluation.^{9,22,27,33} Successful recruitment and retention programs have sustainable financial support from multiple sources for multiple costs. The Robert Wood's Foundation, Occupational Safety and Health Administration, Nurse Workforce Development grants, and Bureau of Health Workforce are committed to improve health care. Effective programs tap into private foundations, professional organizations like nursing organizations/associations, education organizations, sororities and fraternities, community businesses, and colleges and universities for financial support. Some programs receive financial support from in-kind donations,³⁴ which will help with expenses like books, application fees, tuition, living expenses, and transportation.

Transportation is an important consideration for recruitment programs, and students need financial support for transportation.²⁵ Students have varying schedules and extracurricular activities and may require reliable transportation to attend meetings or field trips. Scheduling meetings during school time regularly could help attend and eliminate the need for transportation and encourage attendance.²⁵ When attending college, they need transportation to the college and clinical sites out of school. Maybe a bus transportation company would volunteer the use of their buses for field trips or offer bus passes.²⁵

Other financial support students need that could enhance student engagement and retention is funding for college.^{9,26,33} The cost of college should not stop a student from attending nursing school. There are financial aids and scholarships available, but sometimes it takes knowledge of where to look. Workshops should be set up for both students and parents to help identify potential sources of funding. Mentor, especially peer mentors, may have experience with funding issues. Students should learn about where to apply for financial aid and scholarships, as well as application deadlines.⁹ In addition to learning where and when to apply for funding, students need to learn how to write competitive applications, such as how to play up their strengths, write an outstanding essay, pay attention to details (formatting letters), and look for early options.⁹

Rethink College Admissions Criteria

Holistic admission should be considered to improve recruitment of Black nursing students. Holistic admission is an evidence-based collage admission process that determines the student's eligibility from a wide-ranging criterion.^{35,36} The evidence used for admission standard ascertains the students' transcripts, resume, grade point average, college entrance exams, essays, resume, letter of recommendation, and interviews. The admission reviewers are trained about implicit bias, use a descriptive rubric, and sometimes do a blind analysis of the student's records.^{35,36} A good example of holistic preadmittance process involves review of the subjective evidence, interviews, essays, or recommendations before the college entrance examination or grade point average. This procedure helps universities holistically, with minimal bias to access the applicant's academic readiness and potential for success in school.^{35,36} Some universities use a holistic admission process to use a more equitable process to select a diverse class of students with the background, qualities, and skills needed for success in nursing and support retention of Black students.^{35,36}

Putting It All Together: Lessons Learned

Lessons learned from other programs offer valuable guidance for creating or refining recruitment initiatives. In addition to learning from successful programs, it can be just as important to learn from unsuccessful programs with good intentions that failed.³⁷ Some programs that address social issues fail due to ignorance and arrogance, thinking they know best for the community.³⁴ Robert Wood Johnson Foundation³⁷ documented a list of 3 primary reasons for failed social programs: flawed strategy and design, difficult environmental context, and faulty execution.³⁷ A good example was The Health Professional Partnership Initiative, a program to prepare minority college students for medical school by grooming underrepresented minority elementary and high school students to encourage health careers.³⁷ The program did not meet expectations and was unable to identify the outcomes of the students. Failure was due to unconnected interventions, lack of knowledge about the large public school system, inability to form effective collaborations, stereotyping/unconscious bias, and inadequate funding.³⁷ Black communities sometimes resent programmatic decision making and having others presume what they need.³⁷ The program creators did not understand the culture of community or school system; a mutually beneficial relationship will have openness and flexibility to fix problems that may arise. It can be valuable to review and visit successful programs to learn why they succeeded in order not to make the same mistakes.

Recruiting Black/African American high school students into nursing programs requires a multifaceted and systematic approach. Although there are a range of potential strategies, a successful program design depends on the community's needs and

Program	Key Elements	Key Outcomes
High School Mentoring Program	<p>A national program with a structured case-based curriculum that introduces undeserved high schools to health care careers³⁴</p> <p>Targets underserved students³⁴</p> <p>Partners and network with local health care/ academic facilities³⁴</p> <p>Uses stakeholders (volunteers) from the health care community to improve high school education and encourage students to think of college (health care occupations) as a viable option³⁴</p>	<p>Student alumni become role models for their community</p> <p>Students consider health care careers after exposure to these programs³⁴</p> <p>In the California Partnership Academies, graduation rates exceeded state-wide rates, and African American and Latinx seniors had the highest point increase³⁴</p>
Project BEST (Black Excellence in Scholarship and Teaching)	<p>Partnerships between the community, the area high schools, local university, business community, parents, and student³⁸</p> <p>Mentorship</p> <p>Focus on high school Black males</p> <p>Start freshman year</p> <p>Assist with college preparatory activities (college applications, SAT/ACT, and scholarships)³⁸</p>	<p>Award scholarships</p> <p>Provides mentors and role models</p> <p>Follow-up with students after college³⁸</p>
Summer internship programs	<p>Addressing the nursing shortage by recruiting potential minority nursing student to pursue a nursing career^{27,33}</p> <p>Classroom activities, field trips, hospital tours²⁷</p> <p>Structured activities, mathematics, reading, health and science, and social skills activities³³</p> <p>Occurs during off-school sessions</p>	<p>Students surveyed had a strong desire to become a registered nurse^{27,33}</p> <p>Broaden students' concept of what constitutes health care career, career attainable, and intrinsic rewarding³⁵</p>

(continued on next page)

Table 1 (continued)		
Program	Key Elements	Key Outcomes
Nurse/Medical Explorers Sponsored by Boy Scouts of America or hospitals	High schools are exposed to health care careers to encourage medical careers. Activities include regular meetings and activities with parent involvement ³⁹	Medical Explorer Post 4077, Texas University: established since 1991. Successful health care provider graduates return to mentors' new members ³⁹
Virtual ⁴⁰	Foster unrepresentative students interested in health care careers Focus on urban youth Hands-on experience and access to positive role models Use e-learning, pod cast, virtual webinars ⁴⁰	More students were able to attend due to the virtual platform, no interference with their schedule One program documented that 87% who apply to medical school were accepted. MCAT scores increased by 8–10 points ⁴⁰
Bureau of Health Workforce	Adopted the transformation from health disparities to health equity model ⁴ Incorporates concept of social determinants as a framework to facilitate nursing workforce ⁴ Implemented holistic admission ⁴ Used framework social determines as funding opportunities ⁴	More than 92 schools of nursing received awards that used the framework ⁴ 2014–2015: 4444 students trained from underserved minorities or disadvantaged background ⁴
Nursing school programs	A comprehensive year-round preentry baccalaureate preparation program, targeting high school students from disadvantaged backgrounds Multidiscipline team, RN, social worker, & case manager Structure math & science curriculum Summer activity: certified nursing aid training Seniors admitted to university ⁴¹	Graduation rate 85% First time NCLEX 100% 82% found employment after graduation Some continued their education ⁴¹

(continued on next page)

Program	Key Elements	Key Outcomes
Retention nursing programs	<p>Training program to support nursing students (2008–2015)¹²</p> <p>Underrepresented/underserved racial and ethnic groups¹²</p> <p>Students receive financial, academic, social/emotional/cultural, and leadership and professional support year round²⁸</p> <p>Funded by Robert Wood's Foundation and AACN's NCIN scholarship program with health career-oriented educational interventions. Grants went out to 130 schools⁴²</p>	<p>65% earn BSN</p> <p>GPA & NCLEX scores improved, 70% graduated¹²</p> <p>2706 individuals earned the BSN degree and 801 earned their master's</p> <p>Meeting nursing demand through diversity⁴²</p>

Abbreviations: AACN, American Association of College of Nursing; ACT, American College Test; BSN, Bachelor of Nursing; GPA, Grade point Average; MCAT, Medical College Admission Test; NCIN, New Careers in Nursing; NCLX, National Council Licensure Examination; RN, registered nurse; SAT, Scholastic Aptitude Test.

resources. For example, programs may have different methods and vary in length, partnerships, and services. **Table 1** summarizes the elements and the outcomes of several successful programs.

SUMMARY

Improving the diversity of the RN nursing workforce is important to advancing health equity. Recruitment initiatives can improve Black/African American students' awareness of and desire for nursing as a viable career choice. One way to recruit and retain these potential nurses is to understand the challenges these students face. Some significant challenges students face include bias, lack of mentioning and role models, and financial issues. Students like to belong and feel a part of a group, so emotional and social support should be a high priority. Good leadership and professional development necessitate support, nurturing, and role modeling/mentoring for the student. The student participant should be in a safe environment that promotes engagement and affirmation and recognizes their full potential to pursue nursing as a career. Solutions to overcome these challenges regarding recruiting and retaining diverse underserved students consist of evidence-based interventions. Successful programs prepare students for college and nursing as a career option after college.

CLINICS CARE POINTS

- Advocate for the need to diversify the nurse workforce
- Recognize the need to enhance the enrollment of Black/African American students in nursing school programs

- Understand what social determinants of health model can identify barriers for Black/African American students
 - Financial instability: Students need income to meet the cost of living and school expenses
 - Education inequality: Black children are less likely to have equal access to quality education
 - Black high school students endure various forms of stereotypes, discrimination, and bias
 - Community and social context: Shortage of mentors/role models
- Define goals to enhance enrollment of Black/African American students in nursing schools
- Create a plan using an evidence-based solution

CONFLICT OF INTEREST STATEMENT

The authors declare that the article was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

REFERENCES

1. Baldwin DM. Disparities in health and health care: focusing efforts to eliminate unequal burdens. *Online J Issues Nurs* 2003;8(1):2. Accessed December 2, 2020.
2. Sondik EJ, Huang DT, Klein RJ, et al. Progress toward the healthy people 2010 goals and objectives. *Annu Rev Public Health* 2010;31:271–81. <https://doi.org/10.1146/annurev.publhealth.012809.103613>, 4 p following 281. Accessed December 1, 2020.
3. American Association of Colleges of Nursing. Enhancing diversity in the workforce. American association of colleges of nursing Web site 2015. Available at: <http://www.aacn.nche.edu/media-relations/fact-sheets/enhancing-diversity>. Accessed December 1, 2020.
4. Spencer TD. Improving diversity of the nursing workforce through evidence-based strategies. *J Nurs Educ* 2020;59(7):363–4.
5. Office of Disease and Health Promotion. Health people 2020: social determinants of health. 2020. Available at: <https://www.healthypeople.gov/2020/topics-objectives/topic/Access-to-Health-Services>. Accessed December 1, 2020.
6. Sullivan LW. Missing persons: minorities in the health professions, A report of the Sullivan commission on diversity in the healthcare workforce. 2004. Available at: <https://search.datacite.org/works/10.13016/cwjj-acxl>. Accessed December 1, 2020.
7. Schantz S, Charron SA, Folden SL. Health seeking behaviors of Haitian families for their school aged children. *J Cult Divers* 2003;10(2):62–8. Available at: <https://www.ncbi.nlm.nih.gov/pubmed/14508927>. Accessed December 1, 2020.
8. Black population: 2010. 2010 census brief: Census briefs;2011 ASI 2326-17.201; census C2010BR-06 2011. Accessed December 1, 2020.
9. Nnedu CC. Recruiting and retaining minorities in nursing education. *ABNF J* 2009;20(4):93–6. Available at: <https://www.ncbi.nlm.nih.gov/pubmed/19927893>. Accessed December 12, 2020.
10. Elfman L. Meeting Nursing Demand Through Diversity. *Diverse issues in higher education* February 25, 201. December 2020. Available at: <https://diverseeducation.com/article/110965/>. Accessed December 1, 2020.
11. Sullivan LS. Trust, risk, and race in american medicine. *Hastings Cent Rep* 2020; 50(1):18–26. Available at: <https://onlinelibrary.wiley.com/doi/abs/10.1002/hast.1080>.

12. Nursing workforce projections by ethnicity and race, 2014-2030: National center for health workforce analysis reports;2018 ASI 4116-11.50.2018. December 2020. Available at: <https://statistical.proquest.com/statisticalinsight/result/pqpresultpage.previewtitle?docType=PQSI&titleUri=/content/2018/4116-11.50.xml>. Accessed December 1, 2020.
13. Wenfield Adia. The disproportionate impact of covid-19 on Black health care workers in the U.S. Harvard Business Review Home. 2020. 2020. Available at: <https://hbr.org/2020/05/the-disproportionate-impact-of-covid-19-on-Black-health-care-workers-in-the-u-s>.
14. Washington HA. Medical apartheid the dark history of medical experimentation on Black Americans from colonial times to the present. New York: Random House Inc; 2006.
15. Office of disease and health promotion. Health people social determinants of health. U.S. Department of health and human services Web site. 2020. Available at: <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>. Accessed December 12, 2020.
16. Solar O, Irwin A. A conceptual framework for action on the social determinants of health (paper 2)2007. Available at: <http://health-equity.pitt.edu/757>. Accessed December 12, 2020.
17. Office of Disease and Health Promotion. Healthy people 2030; education access and quality. U.S. Department of Health and Human Services. Available at: <https://health.gov/healthypeople/objectives-and-data/browse-objectives/education-access-and-quality>. Accessed December 14, 2020.
18. Walker EN. Why Aren't more minorities taking advanced Math? Education Leadership. November 2 65 (3) Making Math Count Pages 48-53. Available at: <http://www.ascd.org/publications/educational-leadership/nov07/vol65/num03/Why-Aren%2527t-More-Minorities-Taking-Advanced-Math%25C2%25A2.aspx>. Accessed November 20, 2020.
19. Holden L, Rumala B, Carson P, et al. Promoting careers in health care for urban youth: What students, parents and educators. Can Teach Us 2014;34(3-4): 355-66. Accessed November 20, 2020.
20. American Psychological Association. Inequality at school What's behind the racial disparity in our education system?. Available at: <https://www.apa.org/monitor/2016/11/cover-inequality-school> 2020. Accessed November 20, 2020.
21. Whelan J. Does American nursing have A diversity problem? 2015University of Pennsylvania School of Nursing. Available at: https://historian.nursing.upenn.edu/2015/02/26/diversity_nursing/. Accessed November 20, 2020.
22. Godsey JA, Houghton DM, Hayes T. Registered nurse perceptions of factors contributing to the inconsistent brand image of the nursing profession. Nurs Outlook 2020;68(6):808-21.
23. Anthony M, Turner JA, Novell M. (May 31, 2019) "Fiction Versus Reality: Nursing Image as Portrayed by Nursing Career Novels" OJIN: The Online 24, (2), Manuscript 4. Available at: <https://ojin.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Vol-24-2019/No2-May-2019/Fiction-vs-Reality-Nursing-Image.html>. Accessed November 20, 2020.
24. Patino Erica. Lights, Camera, Accuracy: Nurses in the Media. *Minority Nurse*. Available at: <https://minoritynurse.com/lights-camera-accuracy-nurses-in-the-media/>. Accessed November 20, 2020.
25. Woods-Giscombe CL, Rowsey PJ, Kneipp S, et al. Student perspective on recruiting underrepresented ethnic minority students to nursing: Enhancing

- outreach, engaging family, and correcting misconceptions. *J Prof Nurs* 2020; 36(Issue 2):43–9.
26. Phillip JM, Malone B. Increasing racial/ethnic diversity in nursing to reduce health disparities and achieve health equity. *Public Health Rep* 2014;(supp):40–50. <https://doi.org/10.1177/00333549141291S209>.
 27. Matutina RE. Recruiting Middle School Students into Nursing. *J Sch Nurs* 2008; 24:11–115.
 28. Diefenbeck CA, Klemm PR. Outcomes of a workforce diversity retention program for underrepresented minority and disadvantaged students in a baccalaureate nursing program. *J Prof Nurs* 2020. <https://doi.org/10.1016/j.profnurs.2020.06.001>.
 29. Nelson R. Ernest Grant Breaks Barriers. *Am J Nurs* 2019;119(1):65–6. Available at: <http://ovidsp.ovid.com/ovidweb.cgi?T=JS&NEWS=n&CSC=Y&PAGE=fulltext&D=ovft&AN=00000446-201901000-00035>. Accessed November 20, 2020.
 30. Bianco M, Leech N, Mitchell k. Pathways to teaching African American male teens explore teaching as a career. *J Negro Educ* 2011;80(3):368. Available at: <http://search.proquest.com.libaccess.sjlibrary.org/docview/9033033247accountid=10361>. Accessed December 1, 2020.
 31. Robert Wood Johnson Foundation. Mentoring to build a culture of health. August 15, 2014. Available at: https://www.rwjf.org/en/blog/2014/08/mentoring_to_builda.html. Accessed December 1, 2020.
 32. Giger JN, Appel SJ, Davidhizar R, et al. Church and spirituality in the lives of the African American community. *J Transcult Nurs* 2008;19(4):375–83.
 33. Condon VM, Morgan CJ, Miller EW, et al. A program to enhance recruitment and retention of disadvantaged and ethnically diverse baccalaureate nursing students. *J Transcultural Nurs* 2013;24(4):397–407. Available at: <https://journals.sagepub.com/doi/full/10.1177/1043659613493437>.
 34. Dayton C, Hamilton C, Stern H. Profile of the California partnership academies. California Department of Education, with support from the Department and the James Irvine; 2011. Available at: <https://www.cde.ca.gov/ci/gs/hs/cpareport09.asp>.
 35. Grijalva C. Holistic Admissions Recruiting and Admitting Diverse Students. Sacramento, California, December 08, 2020. Webinar.
 36. Glazer G, Clark A, Bankston K, et al. Holistic Admissions in Nursing: We Can Do This. *J Prof Nurs* 2016;32(4):306–13.
 37. Isaacs S, Colby D. Good Ideas at the time: Learning from programs that did not work out as expected, Robert Wood Johnson Foundation To improve Health Care, XIII.
 38. Project BEST Black Excellence in Scholarship and Teaching. Available at: <https://www.kernhigh.org/apps/pages/project-best>. Accessed December 1, 2020.
 39. Texas State University. Medical explorer post 4077. 2020. Available at: <https://www.bio.txstate.edu/medicalexplorers/>. Accessed December 1, 2020.
 40. Fernandez-Repollet E, Locatis C, De Jesus-Monge WE, et al. Effects of summer internship and follow-up distance mentoring programs on middle and high school student perceptions and interest in health careers. *BMC Med Educ* 2018;18(1):84. Available at: <https://search.datacite.org/works/10.1186/s12909-018-1205-3>.
 41. Colville J, Cottom S, Robinette T, et al. A community college model to support nursing workforce diversity. *J Nurs Educ* 2015;54(2):65–71.
 42. Robert Wood Johnson Foundation. New Careers in Nursing 2008-2015. December 2020. Available at: <http://www.newcareersinnursing.org/>. Accessed December 1, 2020.