Exploring the factors of persistence for African American senior nursing students

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EXPLORING THE FACTORS OF PERSISTENCE FOR AFRICAN AMERICAN SENIOR NURSING STUDENTS

By

Yolanda M. Nelson

A Dissertation

Submitted to the
Department of Educational Leadership
In partial fulfillment of the requirement
For the degree of
Doctor of Education
at
Rowan University
October 13, 2015

Dissertation Chair: Dr. JoAnn B. Manning
Dedication

I dedicate this dissertation to my family and friends who understood the importance of completing this degree, offered encouraging words, and inspired me. To my Aunt Bernadette “Aunt B” who passed away on December 11th, 2014, who believed in me when at times I did not believe in myself. She taught me to not only reach for the stars, but also reach for the moon. You were my earthly angel and now my heavenly angel. And to my God, my savior, who gave me the strength, perseverance, and endurance to complete this dissertation. With you I truly believe that all things are possible. Without you I am nothing.
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I would like to thank my editor, Kristin Atkinson for all of your hard work and efforts in assuring that my work represented a quality that was academic.

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Abstract

Yolanda M. Nelson
EXPLORING THE FACTORS OF PERSISTENCE FOR AFRICAN AMERICAN SENIOR NURSING STUDENTS
2015
Dr. JoAnn B. Manning
Doctor of Education

African American nursing students experience commonalities within their college experience. Often these students may be faced with challenges, barriers, and/or struggles that may place a hindrance on their success in meeting their educational goals. This qualitative study used a phenomenological approach to explore African American female nursing students perceptions of faculty-student relationships and its implications for persistence. Four African American female nursing students and two nursing faculty agreed to participate in this study. This research study offers an examination of past and present research regarding the history of African American nursing students, health disparity, social justice and diversity within the profession of nursing, and the strategies to promote persistence in regards to African American nursing students. The results suggest that role modeling, familial support, and the development of faculty-student relationships (interactions) play a pivotal role in the success of African American nursing students. Furthermore, implications for future research, policy, and practice are discussed that address recommendations to assist in retaining African American nursing students.
# Table of Contents

Abstract ................................................................................................................................. v  
List of Figures ......................................................................................................................... xii 
List of Tables ......................................................................................................................... xiii 

Chapter I: Introduction .......................................................................................................... 1  
  The Profession of Nursing ................................................................................................. 2  
    African American Students ............................................................................................. 3  
  Significance of Research ................................................................................................. 3  
    Faculty Involvement ....................................................................................................... 5  
    Persistence and Faculty-Student Interaction .................................................................. 5  
  Problem Statement ........................................................................................................... 6  
  Purpose Statement ............................................................................................................ 8  
  Definition of Terms .......................................................................................................... 9  
  Conceptual Framework ..................................................................................................... 9  
  Description of the Dissertation ......................................................................................... 11  

Chapter II: Literature Review ............................................................................................. 12  
  Health Disparity and Cultural Competency ..................................................................... 14  
  History ............................................................................................................................... 16  
    African American Nurses .............................................................................................. 16  
    African American Students’ Experiences ..................................................................... 18  
    African American Culture ............................................................................................. 19  
  Social Justice: Diversity Within the Profession of Nursing ........................................... 20  
  Barriers that Affect African American Nursing Students ................................................. 22
# Table of Contents (Continued)

Tinto’s Model of Student Retention ........................................................................................................................................... 27

Faculty-Student Relationships ...................................................................................................................................................... 28

The Role of Mentoring ................................................................................................................................................................. 31

The Role of Advising ...................................................................................................................................................................... 32

The Role of Role Modeling ............................................................................................................................................................. 33

Patricia Collins: Black Feminist Thought ...................................................................................................................................... 34

Higher Education and Leadership ...................................................................................................................................................... 36

Institutions Making a Difference ..................................................................................................................................................... 36

Summary .......................................................................................................................................................................................... 37

Chapter III: Methodology ................................................................................................................................................................. 38

Research ............................................................................................................................................................................................ 38

Purpose Statement .............................................................................................................................................................................. 39

Role of the Researcher: Assumptions ........................................................................................................................................... 40

Worldview ........................................................................................................................................................................................ 41

Research Design .................................................................................................................................................................................. 41

Phenomenological Approach .......................................................................................................................................................... 42

Setting ............................................................................................................................................................................................... 43

Sampling Strategies ............................................................................................................................................................................ 44

Purposeful Sampling .......................................................................................................................................................................... 45

Criterion Sampling ........................................................................................................................................................................... 45

Data Collection .................................................................................................................................................................................. 46

Observations ....................................................................................................................................................................................... 46
Table of Contents (Continued)

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interviews</td>
<td>47</td>
</tr>
<tr>
<td>Focus Group</td>
<td>49</td>
</tr>
<tr>
<td>Journaling</td>
<td>50</td>
</tr>
<tr>
<td>Data Analysis</td>
<td>51</td>
</tr>
<tr>
<td>Coding</td>
<td>52</td>
</tr>
<tr>
<td>Trustworthiness</td>
<td>53</td>
</tr>
<tr>
<td>Ethical Considerations</td>
<td>54</td>
</tr>
<tr>
<td>Limitations</td>
<td>55</td>
</tr>
<tr>
<td>Summary</td>
<td>56</td>
</tr>
<tr>
<td>Chapter IV: Findings</td>
<td>57</td>
</tr>
<tr>
<td>Background Information: Description of Participants</td>
<td>57</td>
</tr>
<tr>
<td>Participant A Profile</td>
<td>57</td>
</tr>
<tr>
<td>Participant B Profile</td>
<td>58</td>
</tr>
<tr>
<td>Participant C Profile</td>
<td>58</td>
</tr>
<tr>
<td>Participant D Profile</td>
<td>59</td>
</tr>
<tr>
<td>Findings</td>
<td>60</td>
</tr>
<tr>
<td>Minority Disadvantage</td>
<td>61</td>
</tr>
<tr>
<td>Need to Work Harder</td>
<td>62</td>
</tr>
<tr>
<td>Intimidating Environment</td>
<td>63</td>
</tr>
<tr>
<td>Few African Americans</td>
<td>64</td>
</tr>
<tr>
<td>Barriers/Obstacles/Challenges</td>
<td>65</td>
</tr>
<tr>
<td>Time Management</td>
<td>66</td>
</tr>
</tbody>
</table>
Table of Contents (Continued)

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of Preparedness</td>
<td>67</td>
</tr>
<tr>
<td>Financial</td>
<td>68</td>
</tr>
<tr>
<td>Cultural</td>
<td>69</td>
</tr>
<tr>
<td>Overcoming Obstacles</td>
<td>71</td>
</tr>
<tr>
<td>Determination: Mindset</td>
<td>72</td>
</tr>
<tr>
<td>Program Support</td>
<td>73</td>
</tr>
<tr>
<td>Achieving Personal Goals</td>
<td>74</td>
</tr>
<tr>
<td>Interpersonal Influences</td>
<td>75</td>
</tr>
<tr>
<td>Mixed Perceptions of Nursing Faculty Interactions</td>
<td>80</td>
</tr>
<tr>
<td>Positive and Negative Interactions</td>
<td>81</td>
</tr>
<tr>
<td>Recommendations for Improvement</td>
<td>86</td>
</tr>
<tr>
<td>Minority Professors</td>
<td>86</td>
</tr>
<tr>
<td>Diverse Family Environment</td>
<td>87</td>
</tr>
<tr>
<td>Summary of Themes</td>
<td>88</td>
</tr>
<tr>
<td>Theme 1: Minority Disadvantage</td>
<td>88</td>
</tr>
<tr>
<td>Theme 2: Barriers and Challenges</td>
<td>89</td>
</tr>
<tr>
<td>Theme 3: Personal Perseverance and Peer Encouragement</td>
<td>89</td>
</tr>
<tr>
<td>Theme 4: Achieving Goals</td>
<td>89</td>
</tr>
<tr>
<td>Theme 5: Interpersonal Influences</td>
<td>89</td>
</tr>
<tr>
<td>Theme 6: Mixed Perceptions of Existing Interactions</td>
<td>90</td>
</tr>
<tr>
<td>Theme 7: Recommendations for Improvement</td>
<td>90</td>
</tr>
<tr>
<td>Chapter V: Discussion, Implications, and Conclusions</td>
<td>91</td>
</tr>
</tbody>
</table>
Table of Contents (Continued)

Discussion of Findings........................................................................................................... 91

Personal Perseverance............................................................................................................ 93

Supportive Network ............................................................................................................... 93

Faculty-Student Interactions and Clinical Experiences ...................................................... 94

Mixed Feelings..................................................................................................................... 95

Caring Attitude.................................................................................................................... 96

Mentorship .......................................................................................................................... 97

Faculty-Student Relationship .............................................................................................. 98

Relationship to Literature ................................................................................................... 99

Conceptual Framework Implications .................................................................................. 100

Tinto’s Model of Student Retention .................................................................................... 100

Patricia Collins’s Black Feminist Thought ........................................................................ 102

Methodological Considerations ......................................................................................... 103

Limitations of Study ........................................................................................................... 104

Implications ......................................................................................................................... 104

Practice ............................................................................................................................... 104

Policy .................................................................................................................................. 106

Future Research .................................................................................................................. 107

Leadership ........................................................................................................................... 108

Conclusion ............................................................................................................................ 109

References ............................................................................................................................ 111
Table of Contents (Continued)

Appendix A: Formal Consent to Participate in an Investigative Study and to be Audio-Taped.................................................................................................................. 121

Appendix B: Interview Protocol................................................................................................. 123

Appendix C: Focus Group Protocol............................................................................................ 125

Appendix D: Demographic Participant Sheet.............................................................................. 126
## List of Figures

<table>
<thead>
<tr>
<th>Figures</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Figure 1. Conceptual Framework Map</td>
<td>10</td>
</tr>
<tr>
<td>Figure 2. Tinto’s Model of Student Retention</td>
<td>28</td>
</tr>
</tbody>
</table>
List of Tables

<table>
<thead>
<tr>
<th>Tables</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Table 1. Literature Review: Themes Identified</td>
<td>26</td>
</tr>
<tr>
<td>Table 2. Interview Protocol</td>
<td>49</td>
</tr>
<tr>
<td>Table 3. Focus Group Protocol</td>
<td>50</td>
</tr>
<tr>
<td>Table 4. Reasons for Choosing Nursing Major of Study</td>
<td>60</td>
</tr>
<tr>
<td>Table 5. Impact of Race and Gender on Student Nursing Experience</td>
<td>62</td>
</tr>
<tr>
<td>Table 6. Barriers, Obstacles, and Challenges Encountered</td>
<td>66</td>
</tr>
<tr>
<td>Table 7. Ways of Overcoming Obstacles and Challenges</td>
<td>72</td>
</tr>
<tr>
<td>Table 8. Definition of Persistence and Success</td>
<td>74</td>
</tr>
<tr>
<td>Table 9. Perceived Major Factors in Persistence</td>
<td>76</td>
</tr>
<tr>
<td>Table 10. Perceptions of Professor Interactions with Students</td>
<td>81</td>
</tr>
<tr>
<td>Table 11. Recommendations for Improvement in Nursing Education</td>
<td>86</td>
</tr>
</tbody>
</table>
Chapter I

Introduction

Higher education represents a doorway to economic empowerment for the thousands of students who enter the nation’s postsecondary institutions each year (Lee, 1999). According to research, only thirty four percent of African American students complete a four-year degree within nine years. According to Astin, Tsui & Avalos (1996), findings regarding degree completion among African American students are exceptionally troubling when you consider that their data include historically Black colleges and universities.

It is estimated that by 2020, nearly one-half of the population of the U.S. will consist of a blend of numerous ethnic groups (Wilson and McAllister, 2010). Expansion of diversity within the nursing student body and, thereby, in the nursing profession is acknowledged as a desirable goal that promises to benefit the practice and discipline of nursing as well as the patients, customers, and community that they serve (Bednarz, Schim, & Doorenbos, 2010).

Therefore, the challenge faced by nursing and health care providers is to prepare a workforce that mirrors the faces of a nation that seeks care. Researchers suggest in order to prepare future nurses to serve culturally diverse populations, students within the program should be exposed to peers from diverse backgrounds during their nursing education. Studies indicate that a diverse student body at schools of nursing lends itself to students sharing knowledge with one another and by growing in cultural competence together before they assume their professional responsibilities after graduation (Mingo, 2008).
The Profession of Nursing

As the traditional caretakers of their children, family, friends and communities, it was natural that nursing (caregiving) became a predominantly female field as society evolved (Weatherford, 2011). Nursing, may in fact be one of the oldest known professions. During the four decades between the Civil War and the beginning of the twentieth century, the image of nurses progressed from its position as an unworthy field (because the role was filled by women) to a respected profession (Weatherford, 2011). Nurses play an essential role in not only the physical and emotional care of patients, but also in the management of social issues, the prevention of diseases, and monitoring trends. Nursing continues to expand into a distinctly separate component of the health care team, providing care and service to those in need worldwide (n.d, 2014).

The U.S. has seen numerous health care disparities that occur along ethnic and racial lines as well as on socioeconomic levels (Gilchrist & Rector, 2007). Ethnically and racially diverse populations are more likely to seek care from health professionals with whom they can identify (Gilchrist et al, 2007). When diverse providers are available, patients are more likely to use health care services more appropriately and costs are better maintained as a result (Gilchrist et. al, 2007). As minorities begin to constitute a larger percentage of the total population, meeting the health care needs of this emerging majority will become increasingly important.

The changing demographics of the nation and its patient population have exposed the lack of diversification within the nursing profession (Gordon & Copes, 2010). Nursing leaders acknowledge a strong connection between a culturally diverse nursing workforce and the ability to provide quality, culturally competent patient care. Although
nursing has made great strides in recruiting and graduating nurses who reflect the patient population, more must be done before adequate representation becomes a reality (n.d., 2001). The National League for Nursing (NLN) addresses the lack of ethnic, gender, and generational diversity as a concern for not only the profession, but also for patients; the nursing workforce should be at least as diverse as the population it serves (Hutchinson, 2010).

**African American Students**

Before the emancipation and for many years to follow, Blacks, unlike Whites, were gradually and legislatively denied of and omitted from the basics of formal education (Melzer, 1984; Thomas, 1996). Several historical legislative and judicial landmarks, such as the 1944 GI Bill, the 1954 Brown decision, the 1960s Civil Rights Movement, the 1965 Higher Education Act, and the 1973 Adams decision, impacted African American Students’ access to higher education in predominantly White institutions (Simmons, 1994). Although African American nursing students have access to attend colleges and universities today, unfortunately, the number of African American students in entry level nursing programs who are dropping out of nursing school without obtaining their degrees is excessively high (Davis-Dick, 2008).

**Significance of Research**

With the enactment of the Affordable Care Act and as the amount of aging and diverse individuals in society rises, access to health care will extend, and the need for more competent and diverse nursing graduates will intensify (Harris, Rosenberg & O’Rourke, 2014). Low numbers of graduating nurses; high attrition rates, and the lack of minority nursing graduates are common concerns among many schools and departments
of nursing. Simultaneously, another shortage exists that is less likely to worsen over the next decade but is seldom discussed; the limited number of African American nurses (Holmes & Coleman, 2006). On average, attrition rates have been fifty percent for students enrolled in baccalaureate nursing programs and forty seven percent for students enrolled in associate degree nursing programs (Newton & Moore, 2009). For minority nursing students, these attrition rates can be even higher, ranging between fifteen to eighty-five percent.

Seago and Spetz (2005) studied nursing students enrolled in California community colleges and found that programs with higher percentages of Asian and African American students had higher attrition rates. Their findings demonstrated that learning resource centers had a positive effect on attrition in regards to minorities. High attrition rates are a concern for society as health care demands are expected to rise due to an increasingly aging and ethnically diverse population, and with the expansion of access to care (n.d., 2014). Student attrition presents numerous challenges for Directors and Deans of Nursing programs, students, and the nursing profession altogether. With high attrition rates and an unprecedented demand for professional nurses, the problem of student attrition should be addressed with a vigorous new commitment (Wells, 2003).

As the United States attempts to find resolutions to the current nursing shortage, one strategy addressing the developing crisis continues to surface: nursing schools must strengthen their endeavors to attract more minority students (n.d., 2001). Studies point to several reasons why minority group members do not pursue nursing including: role stereotypes, economic barriers, few mentors, lack of direction from early authority figures, misunderstandings about the practice of nursing, and increased opportunities in
other fields (n.d., 2001). A report by the Wisconsin Center for Nursing Diversity Taskforce (2013), points out that the barriers to achieving greater diversity within the profession of nursing education, and ultimately the profession itself, are clearly identified throughout various research studies. These studies uncovered barriers that exist within the breadth of financial aid, academic support, feelings of isolation by members of underrepresented populations, language, and the potential for racism and discrimination.

Martinez & Klopott (2003) proposes that further insight be taken into understanding the circumstances of minority-nursing students, and that overall, achieving diversity in nursing requires support in two critical areas: recruitment and retention.

**Faculty Involvement**

Museus and Ravello (2010) explored the role that academic advisors play in facilitating success among minority students at predominantly white institutions. Three themes surfaced from the findings that underscore the characteristics of academic advising contributing to minority students’ success: 1) Participants noted the importance of academic advisors who humanized the practice of academic advising. 2) They highlighted the impact of academic advisors who had adopted a multifaceted approach to advising, and lastly, 3) Interview participants accentuated the importance of proactive academic advisors.

**Persistence and Faculty-Student Interaction**

It is imperative that nurses from many cultural and ethnic groups care for multicultural patients. The availability of faculty for minority students and the provision of their feedback to the students are specifically recommended by Baker (2010). Thus it is vital that nursing programs admit and retain nursing students from various backgrounds.
In order to retain students and to assist with their success, faculty should consider the distinct needs that minority students may have. Yoder (2001) believes that it is critical to develop an educational model that meets the needs of and provides a climate in which all students have an equal opportunity to learn and persist.

Student interactions with faculty are vital, especially in the freshman year (Lee, 1997). This interaction includes not only formal, structured experiences in academic settings (classrooms, labs, work groups), but also the informal contact with faculty outside of these settings (Lee, 1997). Pascarella and Terenzini (1991) reported that persistence was positively and noticeably related to the total amount of student-faculty non-classroom communication, and mainly to the frequency of which these interactions led to further discussion of intellectual matters. To achieve integration, several authors advocate for an institutional addition of dedication to building diversity within their mission statements, and then strategic planning for recruitment, education, promotion, and retention in partnership with members of underrepresented populations (Salisbury & Byrd, 2006).

**Problem Statement**

Regarding the issue of diversity within the nursing profession, statistics show that the RN population is currently comprised of approximately 83 percent White, 5.4 percent Black (or African American), 5.8 percent Asian, Native American, 3.6 percent Hispanic or Latino, 0.3 percent American Indian, and 1.7 percent categorize themselves as two or more races (n.d., 2014).

A concern exists for not only the lack of minority students that become nurses but also for the lack of minorities who go on to become faculty members. In a recent volume
of the National Education Association (NEA) Higher Education Advocate, data from the 2009 Higher Education Almanac revealed that minority faculty remains significantly underrepresented, having slipped further over the last year and well below parity for the larger population (Hutchinson, 2010). Increasing ethnic and racial diversity in the general population combined with inadequate minority representation in the nursing profession requires innovative strategies to recruit, retain, and graduate nurses from diverse racial populations (Sutherland, Hamilton, & Goodman, 2007). Research suggests that effective education, strengthening student advisement and retention strategies, may be the most powerful deterrents and preventive measures when responding to this nationwide deficiency.

Although the number of nontraditional students entering higher education programs is increasing, the percentage of those who persist to graduation is estimated to be lower than that for traditional students. To promote the retention of nursing students, faculty must provide the caring atmosphere of a mentoring relationship and offer direct assistance to enable student learning (Shelton, 2001). Research concludes that the existence of a positive, interactive, faculty-student relationship can generate retention in nursing students (Atack, Comacu, Kenney, LaBelle, & Mill, 2000).

Little research exists which examines the interaction between faculty and their African American nursing students. Combined with the current research and the lack of diversity within the profession of nursing, I believe that it is critical to unlock the mysteries as to why there is little representation of African American nurses within the profession of nursing.
Educators at all levels across the world believe that meaningful interactions between students and their teachers are necessary to both learning and personal development (Kuh & Hu, 2001). But the question comes to mind: Are we as educators truly providing meaningful interactions with our students in order to promote growth and success of students? Nursing literature is limited in its reporting of the African American nursing students’ perceptions of nursing programs and the factors that are viewed as supportive of or restrictive to academic success (Wisneski, 2005).

**Purpose Statement**

The purpose of this qualitative study is to explore the nature of the faculty-student relationship as well as the persistence of African American senior nursing students in the nursing program at an urban college. Using the lens of the Black Feminist Thought perspective in conjunction with Tinto’s theoretical model of student retention, the focus is to gain further insight into and to discover if a relationship exists between faculty involvement and the persistence of African American nursing students. Improved awareness regarding persistence will empower educators to direct future efforts toward interventions that effectively influence and facilitate successful program completion for minority nursing students (Loftin et. al, 2012). The following questions will guide this study:

1. What are the common factors that African American senior nursing students identify which contribute to their persistence?

2. What engagement strategies, if any, contributed to African American senior nursing students’ persistence?
(3) How do students perceive the role of faculty in engagement with African American nursing students?

(4) How can nursing faculty promote persistence of African American nursing students?

**Definition of Terms**

For the purpose of this study, the following terms will be defined:

African American: any individual from Black and African descent.

Faculty: refers to a nursing faculty within the department of nursing.

Nursing Students: represents senior African American students who are enrolled within the nursing program at the urban college.

Persistence: defined as the retention, success, and graduation rates of African American senior nursing students from the department of nursing.

Faculty-Student Relationship: refers to a professional yet meaningful relationship between faculty and students in the classroom, through their clinical work, and in other areas. It incorporates five major components that include, mentorship, advisement, role modeling, integration, and engagement.

**Conceptual Framework**

Conceptual frameworks are systems of concepts, assumptions, expectations, beliefs, and theories that supports and informs research (Miles & Huberman, 1994). A conceptual framework should act like a map that offers consistency to your inquiry. It explains key constructs and terms as well as, introduces and/or clarifies any theoretical models. A conceptual framework identifies the phenomena that I am proposing to analyze and grants the justification for studying them. I incorporate Tinto’s Model of
Student Retention and Patricia Collin’s Black Feminist Thought perspective to guide my study.

Tinto’s (1993) Model of Student Retention proposed that student persistence is related to the integration students attain within an institution. Integration is the incorporation of individuals into the community and the feeling experienced by individuals that fit into the community of which they are a part (Tinto, 1993). Tinto (1993) concludes that insufficient personal interaction within the institution or the existence of divergent abilities, goals, or values results in lack of integration. While Tinto discusses the importance of integration and how it relates to a student’s persistence, Patricia Collins discusses the importance of understanding African American women as unique individuals. Both theorists will be discussed in further detail in Chapter 2.

Figure 1. Conceptual Framework Map
Description of the Dissertation

After the introduction of Chapter One, a review of the conceptual framework that will help guide the study will be presented in Chapter Two. In addition, a relevant literature review will be provided in order to understand the context in which this research is based. Chapter Two also includes the gaps in previous studies and a description of the theories utilized in understanding this topic. Chapter Three provides an explanation of the methodology used for this study. Included are relevant research questions, the sampling methods used and the data collection technique.

Chapter Four will provide findings from the interviews, observations, and focus groups. This chapter will also discuss the qualitative study findings and the conclusions of the researcher. The research questions will assist in this process; and lastly Chapter Five will discuss the implications of the researcher’s findings. In addition, the researcher’s recommendations for future research, policy and practice will be provided.
Chapter II

Literature Review

The purpose of this study is to explore the nature of the faculty-student relationship and its role on the persistence of African American senior nursing students in the nursing program at an urban university located in New Jersey. My goals are to increase awareness of faculty-student relationships and to better define its role in order to create a change in the attrition rate of African American nursing students. In order to facilitate this process, I will define and review the concepts related to effective faculty-student relationships within the context of social justice.

Through my research, I found that various research studies have reported that a student’s ability to integrate academically and socially depends on their relationship with not only family but also with faculty and peers, and with their education level and their commitment to graduate. For the purpose of this study, I will first examine the relevance of diversity in the profession of nursing along with the issue of health disparity and cultural competency. Second, in order to better understand the role of the faculty-student relationship, I researched the history of African American nurses and will, therefore, examine reported occurrences of African American nursing students’ experiences in higher education within various schools of nursing.

My conclusions from this analysis support my position that thirdly, social justice plays a pivotal role in retaining African American nursing students. Fourth, I will discuss the barriers that African American nursing students may face that could perhaps deny success in their future careers. Fifth, I will discuss Tinto’s Model of Student Retention and its relationship to my study.
In my research, I focus on the elements of effective teaching strategies that are highly likely to increase diversity within the profession of nursing. In regards to effective teaching strategies, multiple research studies categorize nurse educators and their mentorship of their students as important. While there has been research performed on mentorship and advisement, I only identify a small number of research studies that incorporate the faculty-student relationship and its role on persistence. I will further define the components that comprise the faculty-student relationship.

Sixth, I analyze Patricia Collins’ Black Feminist Theory and integrate its role in understanding African American nursing students. Finally, in the seventh section, I review the role of leadership within higher education and the current strategies that have been implemented at institutions of higher education.

The seven topics listed below are reviewed and summarized:

1. Health Disparity and Cultural Competency
2. History of African American Nurses
3. Social Justice and Diversity within the Profession of Nursing
4. Barriers that Affect African American Nursing Students
5. Tinto’s Model of Student Retention
6. Patricia Collins’s Black Feminist Thought
7. Higher Education and Leadership

Multiple literature databases were searched to explore the concept of the faculty-student relationship and the persistence of African American nursing students. The Cumulative Index to Nursing and Allied Health (CINAHL), PubMed, and Education Resources Information Center (ERIC) databases were searched utilizing a variety of
terms including but not limited to: retention, persistence, attrition, African American, students, nursing students, faculty-student relationships, and interactions. Articles analyzed about teaching strategies, retention, African American students’ culture and history were published in the 80s, 90s, and early 2000s; they were found to contain valuable information and for this purpose, have been included for an in-depth understanding of the context.

**Health Disparity and Cultural Competency**

Nursing leaders recognize a correlation between a culturally diverse nursing workforce and the capability to provide quality, culturally competent patient care; studies show that similar factors lead to the attrition of minority students in nursing programs.

Instead of placing the focus on why minority students are unsuccessful in nursing programs, it is important to now place emphasis on how minority-nursing students (particularly African American students for the purpose of this study), can persist in the school of nursing in order to become successful nursing professionals.

Presently the attrition rate of African American students completing predominantly white nursing programs poses a concern and a challenge for the nursing profession inasmuch as the number of African American nurses continues to diminish as the minority population continues to escalate (n.d., 2008, Powell 1992; as cited in Coleman, 2008).

According to the U.S. Census Bureau, individuals from ethnic and racial minority groups accounted for roughly one third of the U.S. population in 2008 (n.d., 2014). With projections pointing to minority populations becoming the majority by 2043, professional
nurses must demonstrate sensitivity to and an understanding of a variety of cultures to not only provide high quality care but also enhance the integrity of the nursing profession.

Coffman, Rosenoff, and Grumbach (2001) examined the explanations for the lack of diversity in nursing; this quantitative study was composed of three components. The first component compared the racial and ethnic composition of the registered nurse (RN) workforce in California with the overall California population. The second component evaluated the highest educational level attained by California residents whose ages ranged from twenty-four to thirty-nine according to racial/ethnic groups. The final component examined the types of degrees attained by California college students during this time. The results of this study revealed that African Americans and Latinos were the least represented groups among RNs in California.

Doctor Madeline Leininger, founder of the field of transcultural nursing, states that providing competent (culturally specific) nursing care must be customized to fit the patient’s own cultural values, beliefs, traditions, practices, and lifestyles (Leininger, 2002; Leininger & McFarland, 2002, 2006). In Dynamics of Diversity by Marianne Jeffreys (2008), the author emphasizes the importance of creating a workplace that embraces diversity among healthcare professionals and which seeks to promote multicultural workplace harmony. According to a report prepared by the National Advisory Council on Nurse Education and Practice (2014), a culturally diverse nursing workforce is vital in meeting the health care needs of the nation’s population.

Despite the current numbers, minority nurses are both valuable contributors to the provision of health care services in this country as well as leaders in the development of models of care designed to address the unique needs of minority populations (n.d., 2014).
Retaining and graduating African American nursing students is a principal factor in increasing minority access to quality health care, because minorities frequently seek medical care with providers who are of the same race or ethnicity (Dapremont, 2011). Patients from medically underserved communities are in need of providers who are culturally similar and, therefore, culturally sensitive to their particular needs (Beacham et al., 2009). As important as it is to create a diverse workplace environment, it is equally important that institutions of higher education embrace diversity.

**History**

**African American Nurses**

There have been many African American nursing professionals in our history who have paved the way for African American nursing professionals today. In 1878 at the age of thirty-three years, Mary Eliza Mahoney, enrolled in a nursing program at New England Hospital for Women and Children.; within sixteen months, she was one of four African American females in a class of forty two to complete a rigorous nursing curriculum. Subsequently, Mary went on to a thirty-year career as a private duty nurse.

Mabel Keaton Staupers was also a pioneer in the profession of nursing; faced with racial discrimination upon graduating from Freedman’s Hospital in Washington, D.C., Staupers became a supporter of racial equality in the profession (Lomax, 2012). Serving as the executive secretary of the National Association of Graduate Colored Nurses (NAGCN) from 1934-1946, Staupers gained notoriety when she fought for the right of Black nurses to serve in the segregated American Army and Navy during World War II. She persisted to fight not only for quotas, but for full inclusion which was granted in 1945 (Lomax, 2012).
Beverly Malone, the first psychiatric nurse practitioner in Detroit, Michigan, served as the President of the American Nurses Association from 1996-2000, and worked for the Clinton Administration from 1999-2001, in the United States Department of Health and Human Services as the deputy assistant secretary for health (Mendez, 2006). Malone credits her success to the many influences during her career as a student and throughout her professional career as a nurse. Malone makes note that she has always had a commitment to leadership (Mendez, 2006).

Another African American nursing professional that made significant contributions to the profession of nursing was Estelle Massey Osbourne who was the first Black nurse in the United States to earn a master’s degree. In 1945, she became assistant professor at New York University, becoming the university’s first Black instructor (n.d., 2012). Some factors that contributed to the success of these African American female professionals include: support, determination, involvement, and positive role modeling.

In a qualitative study that I recently performed wherein I interviewed African American Nursing Professionals (leaders within a local hospital), the four participants involved were able to share their perceptions and life experiences. One of the findings gleaned from this particular study was that three out of the four participants noted the influence that their role models had on their journey and eventual success in the nursing profession. Participant A credited her mother as well as the nurses that she worked alongside with (as an aide) while attending college in influencing her learning and critical thinking skills. Likewise, my research revealed that a strong support system, role models, encouragement from family and self-determination all played a role in the success of the African American nursing professionals mentioned throughout this qualitative study.
Another finding from this study was that participants reported experiences of isolation due to the lack of diversity within their respective nursing program. Findings also revealed that there is work to be done to not only increase the percentage of African American nurses within the profession but to increase diversity within the entire health care profession.

**African American Students’ Experiences**

and white race relations have made significant gains in the last 100 plus years; additionally, there have been great strides in the educational experiences of Blacks in the United States over the last 50 years (Coleman, 2008). However, the response Americans have towards racial differences continues to negatively impact African American experiences in society and in places of higher education (Coleman, 2008). Research suggests that at traditionally White institutions, African American students experience lower levels of academic integration and express dissatisfaction with their universities (Nettles, Theony & Gosman, as cited in Simmons, 2010). These and other factors contribute to low academic achievement and frustration among African American students, which, in turn, negatively affects their persistence (Simmons, 2010).

Coleman (2008) interviewed African American Nursing students enrolled in a 2 year nursing program in hopes of discovering what African American nursing students had to say regarding their experiences in a predominantly White institution. Love (2010) also explored the phenomenon of socialization among African American nursing students in predominantly White universities. Love (2012) identified six themes: (1) student commitment to achievement, (2) encounters with discrimination, (3) the pressure to succeed, (4) isolation and sticking together, (5) fitting in and talking with Whites, and (6)
learning with new friends and old ones. Although some students were successful in adapting to the dominant cultural norms of the school, they also experienced problems in being true to their own identity. In a sense, this particular study relates to some of the themes that will be identified within this literature review.

**African American Culture**

African Americans comprise about twelve percent of Americans and until recent decades the vast majority of African Americans lived in the South (Hines & Boyd-Franklin, 1982). Between 1940 and 1970, over 1.5 million African Americans migrated to the North. Although all immigrant groups have experienced acculturation problems, many African Americans question whether the social, political, and economic hardships they encounter as a result of racial discrimination will ever render the American dream attainable for the larger group of African Americans in this country (Hines & Boyd-Franklin, 1982). Racism and oppression make it difficult at times for African Americans to enter and remain in the economic mainstream.

African American students on predominantly White university campuses are often victims of cultures- that of their own culture and the culture of the institution itself (as cited in Lee, 1997). Culture is not something that occurs at one specific point in time, but rather is something that evolves over a period of time and is shaped by an individual’s experiences. While African Americans have many points of similarity, there are also many points of differences within their culture (Lee, 1997). The complexities of “culture” form a foundation for understanding why institutions rarely address students’ individual culture as a background characteristic for program development. Though the cultural symbols for the current generation are different from those of past generations, the
process of racial identity development remains the same (Tatum, 2003).

Black students can comfortably practice their language in Black student unions and cultural centers and at college dining halls on predominantly White campuses all over the United States (Tatum, 2003). Tatum (2003) concludes that African American students require environments such as the Black student union because they are safe places of retreat where one can regroup while dealing with the daily stressors of campus life (p. 77).

**Social Justice: Diversity Within the Profession of Nursing**

With social justice as a foundation, there have been substantial efforts made across the United States in finding ways to expand diversity in a variety of health professional education programs. There has also been an endeavor made to increase the number of students from underrepresented and underserved communities accessible for service in the nation’s health care systems (n.d., 2004; Sullivan Commission, 2004). According to the Institute of Medicine (IOM), there is a newfound emphasis on increasing diversity in the workforce and in ensuring that nurses are able to provide culturally relevant care (n.d., 2011).

Diversity has a positive influence on the workplace, it increases competitiveness of corporations in the global market, and it advances education in the college classroom (n.d., 2014). Consistent with reports, there are currently over 2.9 million registered nurses in the United States, and of those 2.9 million, only 6% are of African American descent (n.d., 2014).

African Americans have the highest percentage of non-graduates among nursing students compared with other U.S. racial/ethnic groups (Dapremont, 2011). With
expanding immigration, increasing globalization, and minority population growth, there is a growing demand to enrich the diversity within the profession of nursing to better meet the needs of our changing society (Bednarz, Schim, & Doorenbos, 2010).

Researchers suggest that the effort to prepare future nurses to serve culturally diverse populations will be easier if students within the program(s) are exposed to peers from diverse backgrounds during their nursing education. Studies indicate that a diverse student body at schools of nursing lends itself to students sharing knowledge with one another and growing in cultural competency together before they assume their professional responsibilities after graduation (Mingo, 2008).

A study performed by The National Advisory Council on Nurse Education and Practice found that minority populations are poorly informed about careers in nursing and have inadequate guidance and insufficient pre-nursing academic preparation (Mingo, 2008). Research shows that the number of African American students in entry-level baccalaureate nursing programs who are dropping out of nursing school without obtaining their degrees is disproportionately high compared to their racially different counterparts (Davis-Dick, 2008).

Figures indicate that there is an urgent need for a national initiative aimed at increasing not only short-term but also long-term recruitment and retention of this student population (Davis-Dick, 2008). Giddens (2008) points out that there are special programs that attempt to address diversity issues in nursing education, but these programs typically focus on minority students as though they are the problem. Perhaps it is time to reframe this issue by acknowledging some of the inadequacies within nursing education that may be contributing to minority student attrition rates.
Nursing education takes place in highly structured, competitive environments, which focus on conformity and hierarchy, and such environments are not often appealing to many minority students (Giddens, 2008). Moreover, these environments may cause those students with weaker academic skills to feel insecure, which can contribute to the experience of isolation; Hall (2004) reports that such environments can also lead to anxiety among students. Schoofs (2012) considers that if minority-nursing students continue to face high attrition rates in nursing programs, the goal of workforce diversity may not be achieved. Nursing faculty and staff play a pivotal role in helping society meet the goals of workforce diversity by facilitating minority nursing student retention and graduation in nursing schools.

Despite substantial evidence, which shows that a diverse nursing workforce is necessary, there continues to be slow growth in the number of ethnically diverse registered nurses (Wong, Seago, Keane, and Grumbach, 2008). While such programs are crucial to the success of minority students, they are often inadequately funded and occupy low campus priority (Education Commission of the States, 1987). It is evident that African Americans are not graduating from nursing programs in numbers comparable to the percentages of the general population (Mingo, 2008). Mingo (2008) concludes that strategies will have to be developed in order to recruit and retain more African American students into the profession of nursing at all levels.

**Barriers that Affect African American Nursing Students**

The importance of increasing diversity has been established; and the issues affecting the lack of diversity have been identified and reflected upon in various research articles. Many African American students experience a variety of personal,
environmental, and institutional barriers that result in their limited or no access to college and university education (Opp, 2001; Thomason & Thurber, 1999). A brief discussion is presented in the next paragraphs.

The American Association of Colleges of Nursing (2001) indicate that role stereotypes, economic barriers, decreased mentors, lack of direction from early authority figures, misunderstandings about the practice of nursing, and increased opportunities in other fields all play a role in the shortage of African American nurses. Tidwell and Berry (1997) found that the three key variables contributing to the probability of educational failure for minorities in higher education include academic, financial, and aspirational barriers.

Academic barriers refer to the educational preparation received during the school age years. Financial barriers refer to the types of financial support (or lack thereof) that a family is able to provide for their children. Regarding the existence of a body of knowledge regarding the financial barriers to retaining students, few institutions demonstrate the use of this knowledge in developing comprehensive retention programs specific to the needs of minority students (Campbell and Davis, 1993). Lastly, aspirational barriers refer to a student’s desire for success and accomplishment (Tidwell & Berry, 1997).

Loftin, Newman, Dumas, Gilden, and Bond (2012), identified the barriers that minority nursing students may perhaps face that could potentially prevent them from achieving success. Some of those barriers (as noted in the literature) can include lack of financial support, inadequate emotional and moral support, insufficient academic
advising, lack of program mentoring, lack of technical support, and little to no professional socialization.

A quantitative, descriptive pilot study was utilized to determine the barriers that Midwestern African American baccalaureate nurses face that would possibly affect their continuation into graduate programs in nursing. Although the sample size from this particular study was small, the findings provided imperative information, and several components were identified; amongst those found include: (1) support from family and faculty, (2) African American peers and role models, (3) mentorship, (4) the encouragement of faculty, and (5) having to work twice as hard to obtain his or her (BSN) degree (Mingo, 2008).

Amaro, Abriam-Yago, and Yoder (2006) completed a qualitative study that investigated ethnically diverse nursing students and their perceptions of educational barriers, and how they coped with those barriers. Their study, as with Loftin, Newman, Dumas, Gilden, and Bond’s (2012), identified contributing factors that influenced graduation from nursing programs, including: supportive faculty, individual motivation, peer support and belonging to an ethnic nursing association. The study found that the participants’ relationships with their families, peers, and instructors could have strong negative or strong positive effects in that the nature of these relationships will lead to the creation of barriers, or on the other hand, to positive support of ethnically diverse nursing students (Amaro, Abriam-Yago, and Yoder, 2006). Additionally, participants also reported that teachers had an even greater effect on their potential success than did their families.
In an article in Minority Nurse, Cucchiara (2012) makes note of the limited access to moral and emotional support, inadequate academic advising, low professional socialization, and insufficient mentoring for minority nursing students. As a result, minority nursing students often experience the encumbering emotions that are attributed to isolation and discrimination (Cucchiara, 2012).

Discrimination of a minority-nursing student is often felt in the classroom as well as in the clinical setting (Cucchiara, 2012). As a nursing student, I myself, had feelings of being singled out because of my culture and ethnicity.

It is clearly evident that the major barriers African American students faced in the studies mentioned included: lack of support from both family and faculty, inadequate academic advising, financial responsibilities, lack of campus support, and lack of professional relationships. Further studies are essential in order to develop strategies that could possibly increase the percentage of African American nursing students that persist to graduation from colleges and universities.

In general, all students face barriers during their enrollment in nursing programs and institutions of higher education (Coleman, 2008), however, research proves that there are some academic and social experiences distinctive to students of color, specifically African American students. African American nursing students experience the college environment of predominantly White institutions differently than do their White classmates (Coleman, 2008). Below is a summary (Table 1) of the themes that were identified throughout the literature review regarding barriers, or lack thereof, faced by African American student nurses.
Table 1

**Literature Review: Themes Identified**

<table>
<thead>
<tr>
<th>Authors</th>
<th>Theme</th>
<th>Definition</th>
<th>Inclusion/Exclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amaro, Abriam-Yago, and Yoder (2006)</td>
<td>Engagement</td>
<td>Activities that build upon the participant’s involvement and commitment.</td>
<td>Nursing professionals, community, department/personal</td>
</tr>
<tr>
<td>Tidwell and Berry (1997)</td>
<td>Self-Determination</td>
<td>An act, choice, or determination to succeed and choose one’s own fate.</td>
<td>Nursing professionals, community, department/personal</td>
</tr>
<tr>
<td>Cucchiara, (2012)</td>
<td>Discrimination</td>
<td>An act, to view a person based on his or her race and or a certain membership</td>
<td>Nursing professionals, students, family/University</td>
</tr>
<tr>
<td>Tatum (2003)</td>
<td>Isolation</td>
<td>Setting something apart, a state of separation.</td>
<td>Minority students</td>
</tr>
</tbody>
</table>
Tinto’s Model of Student Retention

Tinto is a pioneer in the examination of the rationales as to why such a high number of minorities to be unsuccessful in higher education. Tinto claims that student-faculty interaction increases one’s sense of belonging and determines whether a student will acclimate to their new environment, and that both are factors related to persistence and graduation. While college/university faculty members have no control over the abilities of their students, they can, however, control their interaction with their students (Tinto, 1993).

Cross (1998) states that, “students that have frequent contact with faculty members in and out of class during their college years are more satisfied with their educational experiences, are less likely to drop out, and perceive themselves to have learned more than students who have less faculty contact.” The most important elements instructors can employ in helping students succeed are to set high expectations for student success, provide sound academic and career advising, support and courage students, and promote their active involvement in learning (Saret, 2014).

The central idea of Tinto’s Model of Student Retention, is that “integration” is quite strongly predicted by the student’s degree of academic integration and social interaction, which in turn, determines whether a student persists or drops out of their respective program (1993). These elements evolve over time as integration and commitment interact, and with the dropout rate depending heavily upon student commitment at the time the decision is made (Draper, 2008). Academic integration may include grades, personal development, academic self-esteem, enjoyment of a particular subject, identification of academic norms and values, and/or the identification of the role
as a student. Social integration may include contact with peers, interactions with staff and faculty and the student’s overall thoughts about the university or college experience (Draper, 2008).

When considering Tinto’s Model in conjunction with the experiences of minority college students, some researchers may argue that Tinto’s theory misses the mark for this particular group. Tierney (2000) claims that Tinto’s framework is criticized not only for ignoring the history of ethnic oppression and discrimination in the United States, but also for being theoretically flawed (p. 80). For the purpose of this study, Tinto’s theory of college student retention will focus more on strategies and faculty-student relationships. Below is a model that illustrates Tinto’s Model of Retention/ Dropout of Higher Education students and its relevant components and/or factors that affect the retention rate of minority students in higher education.

![Figure 2. Tinto’s Model of Student Retention](image)

**Faculty-Student Relationships**

Although much has been written in the past regarding the recruitment and retention of minority students in higher education, initiatives have historically focused solely on recruitment efforts with very little emphasis on contributing to student success.
once they are accepted into a program (Childs, Jones, Nugent, and Cook, 2004). This may be a concern in regards to African American students because many African Americans are either first-generation college students or are the first in their household to complete a degree (Lee, 1997). Transitioning to college can be an awkward experience for minority students who may not be prepared to live away from home, and thus successfully adjust to the demands of public research (as cited in Lee, 1997).

Further research concludes that non-classroom interactions with faculty that combine the student’s classroom and non-classroom experiences are very important for retaining students. In fact, research demonstrates that student success is contingent upon interactions with faculty. A relationship between faculty and student that is devoid of the academic evaluation element provides the types of experiences whereby the student is better able to discuss a myriad of perceptions, feelings, and experiences (Schoofs, 2011).

African American students enter predominantly White public institutions possessing a strong heritage that has been evolving for centuries and that does not perfectly cohere with these environments; and, furthermore, some students are underprepared for college-level work (Lee, 1997). Fries-Britt and Turner (2002) reiterated the importance of faculty engagement with African American students in promoting persistence, high academic achievement, and success. They noted that educators must create institutional support systems, so that African American students may have the opportunity to develop the personal confidence that will “propel them toward academic pursuits” (p. 326).

This portion of the literature review examines both research on African American nursing students pursuing degrees in higher education as well as professional literature
that emphasizes the barriers faced by and the strategies used in the consideration of undergraduate African American nursing students from an Urban School of Nursing located in New Jersey.

For this particular study, the term faculty-student relationship refers to a professional yet meaningful relationship between faculty and students in the classroom, through their clinical work, and in other areas. Faculty-student relationships encompass the following: advising, mentoring, role modeling, engagement, and tutoring. Educators at all levels believe that periodic, worthwhile interactions between students and their teachers are significant to learning and personal development (Kuh and Hu, 2001).

Studies show that it is the combination of the frequency and the nature of student/faculty interactions that have the greatest impact, especially when interactions have an intellectual or substantial focus (Kuh and Hu, 2001). Baker (2010) believes that retention, as a function of faculty-student interaction, is the most compelling strategy addressed in the literature of Kuh and Hu.

Citing exit interviews from students, Shelton (2001), established that students viewed faculty influence as vital to their persistence in nursing programs. Jeffreys (2008) used a pretest/post-test survey questionnaire that revealed students’ perceptions of faculty advisement as greatly supportive. According to Gardner (2005), students are more willing to persist in nursing programs if they establish personal ties to faculty and peers.

Faculty behavior inside the classroom can create an environment that extends outside of the classroom while also helping students to develop personal ties (Gardner, 2005). Faculty engagement with African American students should be genuine, both in and out of the classroom. This practice facilitates student interaction with faculty,
increases faculty-student engagement, and decreases the anxiety levels often felt by students (Simmons, 2010).

**The Role of Mentoring**

Students of color entering four-year institutions often experience a sense of isolation within and alienation from the campus environment (Santos & Reigadas, 2002). Many universities are now sponsoring formalized mentoring relationships with the goal of improving educational and career opportunities for individuals who are less likely to have a formal mentor such as in the cases of women, ethnic minorities, and returning older students (Santos & Reigadas, 2002).

A cross-sectional study design was used to survey faculty in randomly sampled nursing programs in 16 southeastern states including the District of Columbia. The survey was offered online and the participants remained anonymous. A sample size of 200 faculty members was established to support for a medium size effect. To ensure that the respondents would have sufficient experience upon which to base their perceptions of the effectiveness of retention strategies, the nursing program administrator assisted in the process of selecting full-time faculty with at least five years experience (Baker, 2010).

A six-point Likert-style scale was used, possible scores ranged from 0-5 and descriptive statistics were used to analyze responses to the survey. Several strategies were rated as effective including: faculty availability, financial assistance, student nurse club, formal study groups, faculty/staff tutors for help with lab/clinical skills, special instruction in test-taking skills, timely feedback, clinical performance, and faculty/staff tutors for math skills and nursing theory. One of the strengths of the study included its unique focus on the viewpoints of nursing faculty regarding retention strategies, while on
the other hand, selection bias, wherein program administrators personally selected the participants, was identified as a weakness of the study.

Some colleges of nursing have developed a successful faculty mentor program to support at-risk students. Buchanan’s qualitative study, comprised of 10 African-American students, revealed that student responses to a taped face-to-face interview revealed the need for a mentoring program. The study affirmed that a warm and caring mentor who would encourage and motivate the students to succeed is imperative. The ongoing themes revealed student responses to the questionnaire were: the desire(s) for: a sense of belonging, inclusiveness, and identification with a mentor (Buchanan, 1999).

One of the chief criticisms of previous work in the area of mentoring in higher education has been a lack of clarity as to what mentoring is exactly. In line with Bwell’s (1989) definition of mentoring, I view mentoring as a process through which persons of higher status, special achievements and prestige go on to instruct, counsel, guide, and facilitate the intellectual and career development of program participants.

When mentoring is executed correctly, the experience tends to be a holistic one that touches the mind and the heart. At the core of mentoring is the interpersonal relationship between the mentor and the mentee (Davis-Dicks, 2008). Davis-Dick (2008) offers five recommendations for developing a strong and effective mentor-mentee relationship, which include: dedication, honesty and truth, mutual respect, a positive and caring attitude, and appreciation.

**The Role of Advising**

Academic advising is integral in student retention. Academic advisors and student services personnel who are committed to working with minority students and providing
them with strong support will increase the likelihood of student persistence (n.d.). Often, minority students are fearful of seeking out assistance and, therefore, faculty must be committed to following up with these students by monitoring their progress (n.d., 2014).

Childs et al (2004) believes that the next step in demonstrating commitment to retaining and graduating minority students is for the institution to facilitate the implementation of formal advisement for all students. Because of the rigidity of nursing curricula and by providing students with consistent advisement, issues can be addressed before they become a serious problem, for which the only solution is to withdraw from the program.

While existing literature provides evidence that advising can influence persistence and degree completion, research on how the nature of academic advising has been linked to persistence is lacking. It is also important to note that the lack of literature on the influence of the qualitative aspects of academic advising on students is problematic (Museus and Ravello, 2010). Museus and Ravello (2010) believe that merging a human element into advising by adopting a holistic approach to academic counseling can communicate that faculty are both interested and invested in the success of their racial and ethnic minority students; this, in turn, would equip faculty to better serve their undergraduate minority students.

**The Role of Role Modeling**

At San Jose State University School of Nursing in California, students reported feeling a level of comfort with mentors who could often relate personally to the student’s experiences, frustrations and challenges (Amaro et al., 2006). Amaro et al. (2006) believes that the opportunity to work closely with a nursing professional also gives the
students more exposure to successful role models, the realities of nursing practice(s), and the different career choices available to them. Because of their cultural background, many minority students may view authority figures, including faculty and nursing staff as busy individuals who do not have the time and/or patience to speak with students (Amaro et al, 2006). In these situations, role models can assist minority students who have significant problems in communicating effectively with faculty members, medical staff, and patients.

**Patricia Collins: Black Feminist Thought**

Patricia Collins is a Distinguished University Professor of Sociology at the University of Maryland, College Park. Collins' work primarily concerns issues involving feminism and gender within the African American community in order to empower African American women. Collins believed that black feminist thought works on behalf of Black women, but does so in conjunction with other similar social justice projects.

Being Black and female in the United States continues to disclose African-American women to specific experiences that differ from those of their racially different counterparts (p. 27). Patricia Collins (1990) believes that placing Black women’s experiences at the focus of examination offers fresh understandings on the main concepts, paradigms, and epistemologies of this worldview and on its feminist and Afrocentric analysis. Afrocentric feminist thought offers two significant influences toward furthering the knowledge, consciousness, and the politics of empowerment. First, Black female empowerment fosters a fundamental paradigm shift in how we think about Feminism. By embracing a paradigm of race, class, and gender as linking systems of oppression, Black feminist thought extracts the social relations of domination and resistance (Collins,
second, Black feminist thought tackles ever constant epistemological debates in feminist theory.

Black feminist thought distinguishes three levels as sites of domination and as potential sites of resistance. Fundamentally, each individual has a unique personal biography made up of concrete experiences, values, motivations, and emotions. No two individuals occupy the same social space, thus no two individuals have the same story. Human ties can be freeing and empowering (Collins, 1990), however, there are core themes and or issues that come from living as a Black woman such as “a Black woman’s collective standpoint does exist, one characterized by the tensions that accrue to different responses to common challenges” (p. 28).

The cultural context formed by those experiences and ideas that are shared with other members of a group or community, which gives meaning to individual biographies, establishes a second level at which domination is both felt and resisted. Each individual’s profile is rooted in several overlapping cultural backgrounds, which can include race, social class, age, gender, religion, and/or sexual orientation. The cultural component contributes to, among other things, the concepts used in thinking and acting, and group validation of an individual’s interpretation of those concepts. Domination is also experienced and resisted on the third level of social institutions controlled by the dominant group; schools, churches, media, and other formal organizations. It is Collins’ (1990) belief that these institutions expose individuals to the specialized thought representing the dominant group’s standpoints and interests. A focus of Collins’ Black Feminist Thought is to place African women’s experiences in the forefront while learning from Black women’s knowledge.
Higher Education and Leadership

As leaders, role models, educators, and administrators, it is our duty to create change within our institutions of higher learning for the betterment of our students. When attempting change, one has to consider the characteristics of a leader. According to Argyris and Schon (1974), Model II leaders are facilitators, collaborators, and are committed to inquiry (p. 91). Leaders in Model II employ coaching, democratic, and affiliative leadership styles; Model II actions are collaborative, participative, and supportive.

Leaders must possess strong skills in self-awareness, management and group awareness to effectively support minority students. Model II creates a trusting environment that is richer in authenticity, collaboration, and commitment (Argyris et. al., 1974, p. 91). When reflecting upon Argyris and Schon’s Model II leadership characteristics, one must also consider Fullan’s (2007) discussion on the importance of educational change. Fullan (2007) concludes that it is important to learn how to work with others, and when this is not achievable, then one person can poison the entire culture of an organization. Fullan (2007) also posits that there is no silver bullet to solving problems within the educational system, the new meaning of educational change must revolve around beliefs, values, knowledge, skills, and outcomes.

Institutions Making a Difference

Faculty-student relationships should be intended to be professional relationships wherein the exchange of ideas flows freely and openly, and, therefore, leads to a productive learning experience (Portland Community College, 2012). Valuable relationships help in facilitating a student’s success while it also increases the student’s
overall satisfaction with their college or university experience (Portland Community College, 2012).

Administrators at Frontier Nursing University noticed that minority-nursing students were more likely to drop out due to a variety of barriers including lack of family support (Cooper, 2011). Frontier Nursing University launched a program designed to help address this major issue. Built on more than a year of outreach and recruitment at minority-serving institutions, the federally funded Promoting Recruitment and Retention to Increase Diversity in Nursing Education (PRIDE) program at Frontier Nursing University has drawn 26 students who are training as either nurse practitioners or nurse midwives. Those students are receiving support to help them cope with family pressures and to feel less isolated socially and academically as students who are in nursing fields with few minorities (p. 1).

**Summary**

The increasing ethnic and racial diversity in the population of the United States combined with inadequate minority representation in the nursing profession, requires innovative strategies in order to recruit, retain, and graduate nurses from diverse racial populations (Sutherland, Hamilton, & Goodman, 2007). Attracting minorities into the nursing field is essential in maintaining the integrity of the nursing profession. Creating strategies that will increase retention and persistence of minorities within the profession of nursing can lead to reduced health disparities in underserved populations (Sutherland, et. al, 2007). Schools may lead the way in launching new and aggressive recruitment campaigns aimed at diversifying the nursing workforce (n.d., 2001).
Chapter III
Methodology

Numerous colleges, universities, and nursing organizations have recognized that there is a shortage of diversity within the nursing profession. While the United States struggles to find solutions to the current nursing shortage, one strategy utilized in addressing this crisis has been to strengthen efforts to attract more minority students (n.d., 2014). In 2010, The National League of Nursing (NLN) had already recognized advocating for workforce diversity, and the National Honor Society of Nursing drew attention to its significance in their Create the Future newsletter, stating "an increase of more than 20,000 minority nurses is required to boost their proportion of the nursing workforce by just 1% in 2020" (Hutchinson, 2010). Although student diversity amongst those entering higher education programs is increasing, the percentage of those who persist to graduation is estimated to be lower than that of traditional students (Shelton, 2001).

Prior to the methodology being discussed, it is important to explore possible assumptions and rationales for the study. An overview of the design, journaling, interviewing strategies, and the discussion about the importance of observations will also be examined. Access to participants, data collection methods, analysis, and validity are also reviewed.

Research

There have been several research studies on the retention and attrition rate of minority nursing students. Those studies predominantly focus on barriers like isolation, financial barriers, and etc. There are few studies that focus on the faculty-student
relationship and if this type of relationship can impact the persistence of African American students. Increased awareness regarding both the barriers and effective faculty-student relationships will enable nursing programs to direct future efforts toward interventions that can possibly impact and facilitate successful program completion for underrepresented minority nursing students (Loftin et al., 2012).

As discussed in the literature review, there exists a lack of diversity within the nursing profession. Perhaps the most compelling reason for increasing the numbers of minority nurses is the lack of equity in healthcare accessibility and quality for patients (Loftin et al., 2012). Efforts to increase diversity in nursing programs have resulted in increased admission of minority students, yet high admission rates have been a significant concern. The number of African American nurses in the United States is far less than the desired amount (Payton, Howe, Timmons & Richardson, 2013). Part of the problem is due to the attrition of this student population within the nursing education programs (Payton et al., 2013). Documentation regarding attrition rates at colleges and universities, estimates that between fifteen to eighty five percent of minority nursing students leave their programs (Loftin et al., 2012).

**Purpose Statement**

The purpose of this qualitative study was to explore the nature of the faculty-student relationship as well as the persistence of African American senior nursing students in the nursing program at an urban college. Variables that contributed to African American female senior nursing students’ success and whether or not a faculty-student relationship contributed to their success was the focus of this study. The following questions guided this study:
1. **RQ 1** What common factors do African American senior nursing students identify as contributing to their persistence?

2. **RQ 2** What engagement strategies, if any, contributed to African American senior nursing students’ persistence?

3. **RQ 3** How do students perceive the role of faculty in engagement with African American nursing students?

4. **RQ 4** How can nursing faculty promote persistence of African American nursing students?

**Role of the Researcher: Assumptions**

Creswell (2007) suggests that the researcher should first describe their particular experiences with the phenomenon under study in order to set aside their personal bias. (p.159). During my undergraduate college experience, I attended a Predominantly White Institution (PWI). Growing up in a community that was predominantly minority, this new environment was quite different for me. I felt isolated not only at the college but within the department of nursing itself. The program was considerably challenging, and I had to learn how to study, how to manage my time, and how to believe in myself. I found myself questioning whether I was good enough, smart enough, and capable of completing the nursing program. Some of my fellow African American classmates experienced those same feelings and later changed their majors.

One day in the middle of a clinical experience in the hospital a professor singled me out for my hard work and drive amid fellow classmates and all of our patients. After that day, I worked harder, arrived to clinical earlier, and conducted extra research to assure that I was prepared for all of my clinical experiences. The professor stated that she
loved my determination and my dedication to the school of nursing, and with this gesture of respect and encouragement, she would become my role model. While it took time to adjust, I was soon on the Dean’s list and became involved in the National Nursing Honor Society. I credit my success to friends, familial support and to that particular professor who showed faith in me as both a person and a student.

As a nursing professional, there are still times when I encounter African American nursing students, and I begin to think about my experiences as an undergraduate student. It is easy to recall those feelings when I experience isolation, when I doubted my intelligence and, at times, questioned my own abilities. These are the reasons why I believe it is my duty to separate my own feelings to truly solve the mystery of retention and persistence when relating to African American nursing students.

**Worldview**

A worldview is a basic set of beliefs that guide action. Creswell (2013) describes the advocacy/participatory worldview as having an agenda for reform that may change the lives of the participants, the institutions (being the university in which my participants will be attending), and the researcher’s life. This particular worldview also assumes that the inquiry will proceed collaboratively so as to not further disregard the participants as a result of the research (Creswell, 2013). Through this research, it is my desire to assist in creating a voice for change and reform within the profession of nursing when considering ways to increase diversity.

**Research Design**

Qualitative research is characterized by its intentions, which relate to understanding some aspect of social life, and its methods, which in general produce
words, rather than numbers, as data for analysis (Patton & Cochran, 2002). Qualitative methods generally aim to understand the experiences and attitudes of people and the community (Patton & Cochran, 2002). Qualitative researchers have a tendency to collect data in the field at the site where their participants experience the issue or problem under study (Creswell, 2007).

Stake (1978) believes that qualitative research reports are typically rich with detail and offer insights into the participants’ experiences of the world and may be epistemologically in harmony with the reader’s experiences and thus more meaningful (pg. 5). In order to acquire further insight, and additionally, to discover the role of the faculty-student relationship and how it may affect the persistence of African American nursing students, a qualitative research methodology was chosen to guide this study.

**Phenomenological Approach**

With each qualitative inquiry, a researcher may involve different types of questions and strategies, which may require various approaches to achieve a certain goal. Because there are many perspectives on one particular phenomenon, it is imperative then to utilize different strategies. Creswell (2007) concludes that there are common characteristics within all of the types of qualitative research, and that the different characteristics will receive different emphases depending on the qualitative project. The qualitative design that will be employed for this particular research study is phenomenological in nature. Phenomenological research allows the researcher to identify a shared experience between multiple individuals.

The qualitative research method was chosen also because it was discovered that the topic covered herein is an issue that needed to be explored further. It is important to
examine several individuals’ common and shared experiences of a phenomenon. It would be vital to consider these common experiences in order to develop practices and policies, or to develop a deeper understanding about the features of the phenomenon (Creswell, 2013). Creswell (2007) concludes that qualitative research is conducted when there is a need for a complex, detailed understanding of the issue (p.40).

Furthermore, qualitative research uses a naturalistic approach that strives to understand phenomena within the context of specific settings (Hoepfl, 1997). Detail can only be established by talking directly with people, by visiting their homes or places of work, and by allowing them to share the stories created by what we expect to find or what we have read about in the literature (Creswell, 2007).

A phenomenological approach seeks to describe the meaning attributed to several individuals regarding their lived experience(s) of a concept of phenomenon (Creswell, 2013). This particular approach attempts to understand people’s perspectives and understanding of a particular situation (Van Manen, 1990). Phenomenology is not only a description, but is also seen as an interpretive process in which the researcher interprets the meaning of the lived experiences of a study’s subjects (Creswell, 2007) Due to the fact that I would like to focus on the aspects which all participants have in common, a phenomenological approach was ideal for this particular study. That phenomenon has been interviewing African Americans in the school of nursing.

**Setting**

The setting of this qualitative research study took place at an urban university, located in New Jersey that ranks among the nation’s top five higher education institutions for its commitment to diversity (university’s website). This particular university is home
to the state’s largest, most comprehensive nursing education program in New Jersey. Due to the University’s commitment to diversity and global education, a core goal at this university is to prepare students to thrive in New Jersey and around the world. The setting was selected primarily for its dedication to diversity. *U.S. News & World Report* "Best Colleges" has named this institution as being the most diverse national university in the United States since 1997. Twenty four percent of full-time undergraduate students enrolled in the fall of 2011 were White, twenty three percent Asian, twenty three percent Latino, twenty percent African American, seven percent multiracial, multi-ethnic or unknown, and two percent foreign. More than one hundred nations are represented in the student body (n.d., 2014).

**Sampling and Strategies**

Often times data collection in phenomenological studies consists of in-depth interviews and multiple interviews with participants (Polkinghorne, 1989). The researcher conducted two classroom observations with two nursing faculty members and four interviews with African American senior nursing students who were at least eighteen years of age and enrolled full-time in the BSN program and a focus group discussion involving the student participants only. It was vital to capture experiences of senior African American nursing students because the students were successful within their entire college experience, which includes freshman, sophomore, junior year and are now about to complete their senior year and graduate. Students at this point have interacted with the majority of nursing faculty within the school of nursing at the university.

The data collection process took place over a one-month time span. In regards to sample appropriateness, Dukes (1984) recommends studying three to ten subjects as cited
in Creswell (2007). The phenomenological method in human science supports that one uses at least three participants in order to take note on how many times the phenomenon makes its presence in the description (Englander, 2012). Prior to conducting the interviews, a letter of inquiry was sent to the nursing faculty and the senior African American nursing students. Four African American female nursing students and two nursing faculty agreed to participate in this study. Please refer to Appendix D for Participant Demographics.

**Purposeful Sampling**

Qualitative inquiry is extensive with uncertainties (Patton, 2002). Patton (2002) offers that there are purposeful rather than methodological sampling strategies. The sampling strategies that were incorporated into this particular study include both purposeful and criterion sampling. Purposeful sampling is purposeful in nature due to the fact that there is a limited amount of African American nursing students at the University. Patton (2002) concludes that sample size depends on purpose, what you want to know, what is at stake, what will be useful, what will have credibility, and what can be done with the available time and resources (p. 244).

**Criterion Sampling**

Criterion sampling involves choosing cases that meet some predetermined criterion of importance (Patton, 2002). Criterion sampling can be valuable for recognizing and understanding cases that are information rich. Criterion sampling allowed me to select a specific site and participants that display certain characteristics essential to the phenomenon (Creswell, 2013; Patton, 1990).
Data Collection

The study consisted of three phases: Phase I of the research study incorporates observations of Bachelor’s nursing students and nursing faculty in order to document behaviors, Phase II contains interviews lasting approximately between thirty-five and fifty minutes to discover and learn about the lived experiences of African American senior nursing students, and Phase III consists of a focus group discussion and follow-up interviews with nursing students.

Observations

In regards to understanding the relationship between faculty and African American nursing students, I believe performing observations is a useful tool for generating an in-depth description of the faculty-student interactions. Observations provide researchers with ways in which to assess for nonverbal expressions of feeling, for determining who interacts with whom, for grasping how participants communicate with one another, and to check for how much time is spent on various activities (Schmuck, 1997).

The method of participant observation was utilized in the classroom and during the time of the group discussions. Participant observation allows researchers to examine the definitions of terms that participants use in interviews, and to observe events that informants may be unable or unwilling to share (Marshall & Rossman, 1985). Participant observation combines participation in the lives of the people being studied while maintaining a professional distance, which allows adequate observation and recording of the data (Fetterman, 1998).
Bernard (1998) suggests that participant observation must be learned in the field. However, he identifies several skills associated with participant observation which includes: learning the language, building explicit awareness, building memory, maintaining naivete, and building writing skills. Participant observation is characterized by many components including: possessing an open and nonjudgmental attitude regarding the study and its findings; exhibiting an interest in learning more about others; and the ability to be a careful observer and a good listener. (Dewalt & Dewalt, 1983).

Class observations took place over a two-week time span. Marshall and Rossman (1995) define observation as “the systematic description of events, behaviors, and artifacts in the social setting chosen for the study” (p. 79). To assure adequate observation, during the classroom observations, I sat in the back of the classroom away from the participants where I was unnoticeable. As the observer for this qualitative study, I assessed the overall interactions in regards to the African American students and how they interacted with their peers and faculty. These observations involved note taking to describe the activities, behaviors, environment and the interactions. I also observed the overall body language of the students and faculty and observed where each participant congregated.

**Interviews**

To prepare for Phase II of the study, when utilizing the phenomenological approach during the interviews, the central aim was to gain a deeper understanding of the nature or meaning of everyday experiences (Munhall, 2007). Seidman (2006) and Rubin and Rubin (2005) offer approaches to performing interviews for qualitative research. Seidman (2006) focuses on in-depth interviewing with specific attention on
understanding the lived experiences of other people and the meaning that they make of that experience (p. 9). To achieve this, Seidman (2006) utilizes a three-step interview approach, which focuses on the lived experiences of the interviewee, details of the phenomenon, and a time of reflection. Rubin and Rubin (2005) believe that an interview should combine the use of main questions, follow-up questions, and probes. Rubin and Rubin (2005) also make mention of specifics when considering interview questions, which include: depth and detail, vividness, nuance and richness.

Prior to the start of each interview, participants were emailed the interview questions and reminded that the interview session would be recorded and transcribed. Interviews were recorded and conducted via conference call individually and also in a focused group setting. Conference call interviews were conducted due to the busy schedules of the participants, and averaged about thirty five minutes in length. During both types of interviews, participants were encouraged to reflect upon their life experiences as college students. Refer to Appendix B for the Interview Protocol.

Interviews were structured and unstructured equally. Interviews were then listened to and transcribed. Transcription of the data included word-for-word quotations of the participant’s reactions as well as the interviewer’s accounts of the participant’s characteristics, enthusiasm, and overall mood during the interview. The transcription of the interviews was given to all of the participants. Table 2 illustrates the list of questions that were created for this study.
Table 2

*Interview Protocol*

<table>
<thead>
<tr>
<th>Interview Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. First can you tell me a little bit about your background? Where are you from?</td>
</tr>
<tr>
<td>2. How does race and gender impact your experience as a student nurse?</td>
</tr>
<tr>
<td>3. Why did you choose nursing as a major in college?</td>
</tr>
<tr>
<td>4. Describe any obstacles or challenges that you may have encountered in college.</td>
</tr>
<tr>
<td>5. How did you overcome the obstacles and or challenges?</td>
</tr>
<tr>
<td>6. What were some barriers that you may have encountered during your college enrollment a. Can you describe any strategies and or interventions that you utilized to overcome those barriers?</td>
</tr>
<tr>
<td>7. How do you define persistence/success?</td>
</tr>
<tr>
<td>8. What are the major factors that have caused you to persist throughout the nursing program?</td>
</tr>
<tr>
<td>9. How would you describe your interaction with your nursing Professors throughout your college experience?</td>
</tr>
<tr>
<td>10. List two recommendations you would make to enhance the school of nursing.</td>
</tr>
<tr>
<td>11. Is there anything more that you would like to add?</td>
</tr>
</tbody>
</table>

**Focus Group**

A focus group is a carefully planned discussion designed to obtain perceptions on a defined area of interest in a nonthreatening environment. The focus group discussion was used for generating information on collective views and for interpreting the meanings that lie behind those views. The rationale for implementing a focus group for this study is to clarify and extend data that was collected via other means and to also offer feedback to research participants (Gill, Stewart, Treasure & Chadwick, 2008).
The focus group was held on site at the university at the Ackerson Building Conference Room 1st floor. The focus group took place March 2015 and was held in the afternoon between students’ assigned classes. To assure that each student felt comfortable answering the questions and participating in the discussion, it was agreed that confidentiality would be maintained. As the facilitator, I provided the students with the focus group protocol. I took notes during this session, recorded the discussion, and transcribed the recordings. Table 3 outlines my focus group protocol.

Table 3

<table>
<thead>
<tr>
<th>Focus Group Protocol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus Discussion Questions</td>
</tr>
<tr>
<td>1. How does race and gender impact your experience as a nursing student?</td>
</tr>
<tr>
<td>2. As an African American senior nursing student, how would you describe your interactions amongst you and your Professors?</td>
</tr>
<tr>
<td>3. As an African American nursing student, how have you been able to persist or become successful?</td>
</tr>
</tbody>
</table>

**Journaling**

Janesick (1999) states that journal writing can be a valuable and effective qualitative technique for both the researcher and participants. Janesick (1999) concludes that journaling is a tool used to reopen the possibilities of learning and living. Journaling allowed me the opportunity to record findings that I noticed during the observation phase of my data collection as well as my thoughts and or concerns during the interview process. Osterman and Kottkamp (2004) concur, also noting the importance of reflective practice. Craig (2009) also discusses the benefits of journaling, which, he posits, can
offer a way to triangulate data.

During the entire process of this particular qualitative study, I maintained a research journal that includes my thoughts and perceptions as well as any comments pertaining to the reading and my role as the researcher. Journaling granted me the ability to self-reflect on my role as the sole researcher and to analyze what was working and what was ineffective during the interview process.

**Data Analysis**

Freeman (2011) asserted that understanding couldn’t be conceived as a fixing of meaning but how the meaning is constructed and transformed. In order to discover meanings in the data, one needs an attitude open enough to let unanticipated meanings emerge (Giorgi, 2011). Bracketing is a methodological device of phenomenological inquiry that requires putting aside one’s belief about the phenomenon under examination or what one already knows about the subject prior to and throughout the phenomenological investigation (Carpenter, 2007). After I was aware of my own feelings, thoughts, and perceptions, I was able to proceed to code, identify categories, recognize themes and finally create the final context. My own feelings, thoughts, and perceptions included isolation, lack of faculty support, and the feeling that I needed to prove my intelligence.

Saldana (2009) provides a few suggestions in developing a coding system that will assist in the organization of data. The suggestions include: coding and analyzing, laying out printed interview transcripts, referencing field notes, and preparing research materials in a double spaced format. Saldana (2009) also encourages pre-coding, preliminary jottings, maintaining a codebook and a copy of the research concern,
providing a theoretical framework, and continuous analysis of research questions. Seidman (2006) suggests that the researcher first make the data accessible by organizing that data (p. 112). Seidman (2006) also stresses the importance of tape-recording interviews, the transcription of those interviews, and the analysis of the text.

Coding

A qualitative analysis of the transcribed focus group and interview data was utilized to identify themes discovered among the statements given by participants. The statements made by the participants that were relevant to the subject under investigation were considered essential to the participants’ experience and perceptions (Moustakas, 1994). As an overview of how to analyze phenomenological research, incorporation of analysis described by Kleiman (2004) was utilized. Review of the interview transcript in its entirety was completed and then the interview transcript was read a second time prior to coding.

The classroom observations of both faculty members and the participants were pertinent in comparing the definitions of terms utilized during the interviews and focus group discussion. These common components were then used to create themes that represent the perceptions of the group as a whole (Moustakas, 1994). Word based techniques were proven to be an efficient way to search for themes (Ryan and Bernard, 1999). The components were grouped into thematic categories, which are represented with the frequency for which the response type was mentioned among the four interviews and also within the focus group discussion. In addition, textual, verbatim examples from the interview and focus group’s transcribed texts were included to highlight and clarify
key concepts. All relevant data were coded throughout the document, which allowed the categories to emerge freely from the interview and focus group discussion data.

The thematic categories were generated through the identification of similar types of responses. The final step involved a comprehensive review and interpretation of the data to provide the conclusions of the analysis. NVivo 10® qualitative analysis software was used in order to aid in the coding and the emergence of themes and patterns from the data by assisting in the classification, sorting and arranging of information, and tracking the frequency of occurrences across the interview and focus group data. Throughout the analysis, several overarching themes developed from the thematic categories and the constant comparing of elements and categories. These themes represent the perceptions of the groups as a whole and are therefore presented as the conclusions of the study.

Creswell (2007) recommends writing memos in the margins of field notes in order to explore a database, and this strategy was incorporated into the analysis (p. 150). Hsieh and Shannon (2005) also provide suggestions for data analysis. Conventional content analysis is the most suitable analysis approach for this particular qualitative research study. Hsieh and Shannon (2005) state that an advantage of the conventional approach is the ability to gain direct information from study participants without forcing preconceived categories.

**Trustworthiness**

Lather (1986) claims that there is no neutral research, meaning that there is always personal bias existent in all research. Lather argues that the best approach at present is to construct research designs that direct us toward becoming dynamically self-aware (p. 66). To guard against research biases that alter the logic of research, Lather
(1986) offers the following guidelines: triangulate data, construct validity, and face validity. Lincoln and Guba (as cited in Lather, 1986) recommend that qualitative researchers establish the trustworthiness of their findings by demonstrating that the data is credible, transferable, dependable, and confirmable.

Credibility examines whether the findings in the data make sense. The credibility was determined by triangulating the data sources from the observations, interviews, focus group, and research journal. This study ensured credibility of the research by asking the same research questions to different participants (Merriam, 1998).

Transferability will allow the research to be applied to other studies, groups or settings in the future. The findings from this study not only transfer to other studies within the profession of nursing but throughout academia at universities and colleges.

As stated by Lincoln & Guba (1985), a dependable study needs to be accurate and consistent. In order to maintain dependability, I stored the original data for the external reviewer.

Lastly, confirmability of a study exists when the data collected by the researcher can also be confirmed or replicated by others (Lincoln & Guba, 1985). For a study to be replicated by others, researchers must submit their findings for peer review. To assure confirmability, an external reviewer also examined the data and analysis.

**Ethical Considerations**

Data collection took place only after the University at which the study was conducted rendered Institutional Review Board (IRB) approval. A consent form was given to each participant prior to the classroom observations, face-to-face interviews, and group discussion. In order to protect the identity and confidentiality of each of my
participants a pseudonym was created to protect the participants’ real names. Please see Appendix A for Formal Consent.

All computer-based documents and files were stored in a password-encrypted folder on my personal computer. Findings were typed and saved on a USB port and kept in a secure locale. Once the data analysis was completed, findings were be reported and filed.

**Limitations**

Seidman (2006) states that taking oneself seriously enough as a researcher is the first step toward equity in the interviewing relationship (p. 43). One of the greatest matters of concern is the fact that I am a mentor for the Educational Opportunity Fund (EOF) wherein I tutor minority-nursing students, and as such, have developed relationships within the EOF Department. As a result, there may be some instances where faculty may not feel comfortable expressing their true feelings in regards to faculty-student relationships. In this study, some faculty voiced that they did not want to participate. Only two nursing faculty agreed to be a part of the study. Another notable limitation can be attributed to the fact that there are few female African American nursing students within the school of nursing.

In addition, to the limitations, being African American and attending a Predominantly White Institution while obtaining my undergraduate degree, I recognize that I may have my own biases. This is why it is imperative to utilize reflective practice and bracket my own feelings.
Summary

The purpose of this qualitative study is to explore the nature of the faculty-student relationship and to discover if it plays a role in the persistence of African American nursing students. By interviewing senior African American female nursing students, it is the researcher’s quest to reveal the answers that could possibly play a pivotal role in increasing diversity within the nursing profession. It is my hope that the African American nursing students that were interviewed for this study will actually reflect upon and become advocates for increasing diversity within the nursing profession. The next chapter will present a data analysis of the research study that was conducted at the university. Themes will be discussed that emerged from this particular study.
Chapter IV

Findings

The purpose of this qualitative study was to explore the nature of the faculty-student relationship as well as the persistence of African American senior nursing students in the nursing program at an urban college. Variables that impacted African American female senior nursing students’ to become successful and whether or not a faculty/student relationship contributed to their success was the focus of this study. Data collection took place Spring 2015.

The findings of the study are presented in this chapter. This chapter provides background information and a description of the participants. Results from the interviews, observations, and focus groups are presented. This chapter will also discuss the qualitative study findings and conclude with themes that were formed from the data analysis. The research questions will guide in this process.

Background Information: Description of Participants

The total sample of participants involved in the study was 6, which included 2 full-time nursing faculty members and 4 African American female senior nursing students. The two professors involved are full-time faculty and teach a variety of nursing courses. The sample of four interview participants represented a diverse group of African American nursing students. The following section is a brief profile of each African American student participant.

Participant A Profile

My mom moved to America when she was 18. She is from St. Vincent, it’s an island in the Caribbean. My Father, he is from down south. Umm, I grew up in Montclair, NJ,
which is about 10 minutes from the campus, and than I moved to Bloomfield when I was in the 7th grade and I have been living there ever since.

Participant B Profile

So a little bit about my background. I am from Newark, NJ. I grew up in a pretty urban area. I guess I have like every child’s childhood except I did not have a backyard I could go run around in. I had to run around in the front of my house. I have a younger brother and a younger sister and single mom.

Participant C Profile

When I first got into the program and began my first class, I was a little intimidated that the majority of my class was Asian and white and a few Spanish people and literally there was only 5-6 Black people and now there are only 5 Blacks (4 females and 1 male). Before it was 5-6 Black people. So it was a little, a new territory for me because I am coming from an inner city school, East Orange High School where there is 99% Black or African American. So it was a little bit intimidating as it automatically told me that I would have to work very hard because in my head or as society has been portraying, other cultures, Asian culture is very intelligent and clever. So I was very intimidated because they know English and I was very new here the language was still a barrier, so as an African American student nurse it was kind of intimidating and scary to start as a student nurse here at the University. With that said, I have to work twice as hard to put myself at the same level as the other students.
**Participant D Profile**

*I was born in the Dominican Republic. My father is Dominican and my mother is Black. So I was raised in the Dominican. Since I was five years old. I came to America when I was like five and a half. I stayed in New York for a while and eventually I moved around a lot, I was exposed to different backgrounds, different cultures and things like that. I moved around, I lived in Maryland and eventually I moved to Virginia with my mom and I ended up coming back to New York because of school.*

These participants identified themselves as being African American; two individuals originally from New Jersey, one originally from the Dominican Republic and one originally from Haiti. One participant was reportedly bilingual, another described having been exposed to many different cultures growing up, one was noted to have younger siblings and another described an urban upbringing. Evidencing the diversity of life experiences, when describing their parents, these participants included (a) one whose mother immigrated to America at age 18; (b) one whose mother was from the Caribbean; (c) one whose father was from the South; and (d) one whose mother was a single mom.

The participants were asked why they have chose nursing as a college major of study. Offering multiple responses, Table 1 illustrates their stated reasons for choosing nursing and the associated frequencies of these response types among the sample of four participants. The common responses among the sample highlight the influences of personal experience, the ability to be part of a hands-on profession the desire to form relationships with patients, and the financial gain as the primary reasons for entering the nursing profession.
Table 4

*Reasons for Choosing Nursing Major of Study*

<table>
<thead>
<tr>
<th>Response</th>
<th>Number participants to offer this response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenced by personal experience and/or nurses in family</td>
<td>3</td>
</tr>
<tr>
<td>Hands-on profession</td>
<td>2</td>
</tr>
<tr>
<td>Ability to form relationships with patients</td>
<td>2</td>
</tr>
<tr>
<td>Financial gain</td>
<td>2</td>
</tr>
<tr>
<td>Felt a need to fill gap in healthcare</td>
<td>1</td>
</tr>
<tr>
<td>Inability to pursue pharmaceuticals</td>
<td>1</td>
</tr>
<tr>
<td>Help of guidance counselor</td>
<td>1</td>
</tr>
<tr>
<td>Nurses in family</td>
<td>1</td>
</tr>
</tbody>
</table>

**Findings**

Through the process of the data analysis, common relevant occurrences (responses, statements, or expressed perceptions or thoughts) during the interview and focus group participants were coded, documented and noted for frequency determination. The occurrences were then categorized into related thematic categories. The thematic categories are presented individually and include (a) impact of race and gender-minority disadvantage, (b) perceived barriers and challenges, (c) overcoming obstacles and challenges, (d) sense of success in achieving goals, (e) factors affecting perseverance, (f) interactions with nursing faculty, and (g) recommendations for improvement. Detailed descriptions of each thematic category are provided through the use of textual data taken
directly from the interview and focus group transcripts and through the frequency of mention details to highlight commonality of responses among the participant group.

**Minority Disadvantage**

The first thematic category arose from grouping participant responses relating to the impact of race and gender on student nurses. Interview findings indicated key common responses that identified race as a disadvantage, which required the participating minority students to work harder than other students, to learn different backgrounds and languages, and to work within an intimidating environment with few African American peers. Furthermore, participants also reported no particular impact due to gender, but reported feeling out of place, experiencing language barriers and intelligence stereotypes due to minority status, and feeling strongly motivated due to succeed.

Table 2 provides the responses offered by interview participants with the related frequency of response among the four participants to demonstrate common responses. For example, the responses of feeling disadvantaged and therefore, needing to work harder than non-minority, peers were mentioned by all four participants, highlighting this responses as a theme.
Table 5

*Impact of Race and Gender on Student Nursing Experience*

<table>
<thead>
<tr>
<th>Response</th>
<th>Number participants to offer this response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disadvantage, needs to work harder than other students</td>
<td>4</td>
</tr>
<tr>
<td>Needing to learn different backgrounds and languages</td>
<td>2</td>
</tr>
<tr>
<td>Intimidating environment</td>
<td>2</td>
</tr>
<tr>
<td>Few African American students</td>
<td>2</td>
</tr>
<tr>
<td>Motivation to be better, strive for goals</td>
<td>1</td>
</tr>
<tr>
<td>No impact as a female</td>
<td>1</td>
</tr>
<tr>
<td>Intelligence stereotypes</td>
<td>1</td>
</tr>
<tr>
<td>Feeling out of place</td>
<td>2</td>
</tr>
<tr>
<td>Language barriers</td>
<td>1</td>
</tr>
</tbody>
</table>

**Need to Work Harder**

Within this first thematic category all four participants noted the disadvantage of being a minority and the resultant need to work harder than their peers. Similarly, Participant B noted the increased expectations placed on her and having to prove oneself as an African American.

*I feel like there is more expected of me, I have more to prove since I am an African American student. But the fact that I am a female, I feel as though that doesn’t play a part cause nursing is majority female anyway.* (Participant B)
In addition, Participant B also cited the need to learn about different backgrounds and languages, which can be a problem. Participant B stated, “With myself, I am faced with such a diverse population, means that I have to learn a lot of different backgrounds and languages, that’s kind of a problem at times.”

**Intimidating Environment**

Language differences could make the work intimidating for these participants and could be considered a barrier. Participant C explained the impact of language differences and the need to work harder than non minority peers:

_So I was very intimidated because they know English and I was very new here._

_The language was still a barrier, so as an African American or Haitian student nurse it was kind of intimidating and scary to start as a student nurse here at the University. With that said, I have to work twice as hard to put myself at the same level as the other students_ (Participant C).

Participant D explained how cultural differences could impact the nursing student’s comfort level and sometimes making them feel out of place:

_I feel different, right now I am at a clinical site, and I definitely see the culture of more of a Caucasian culture and also Philippine Culture. There are not many African American registered nurses out there. I don’t get to see a lot of African American nurses in the area. In my previous clinical rotation, I noticed that there were a lot of African American nurses represented at that hospital. I definitely think it plays a role in how I learn. It’s sort of uncomfortable at times when I am trying to learn from a nurse that may be Filipino and she is speaking to another nurse in their language and I do not understand. They are communicating_
information about the patient that I do not understand. Even in my clinical group, I am the only African American student, so definitely I feel out of place. I know that I am already different because of my background in general. But you know, being the only Black person there, I have to work a little harder. Because of my background, I feel as though I do not fit into one specific group. So I usually sit in the middle of class. Not in one specific group (African American or Hispanic) (Participant D).

Few African Americans

These interview findings were supported by the data obtained from the focus group, in which participants reported perceptions of (a) little to no impact of gender; (b) minority students having “more to prove;” (c) incidents of racism; (d) the inability to relate to white patients; (e) professors who are competent in dealing with diversity issues; and (f) comparative ease of urban environments due to representation.

As a woman, I don’t believe that it affects it much, it’s just this has been from the earlier decades a female dominant profession. And now we have the males coming in, I believe that they are the ones feeling umm have pressure because of their gender. As far as women, we feel comfortable in this field. Like I said before, when it comes to race and gender, that doesn’t really play that big of a part because nursing is majority like female and when it comes to race we still have more to prove since we are still a minority, everything like that. Even Asian America is taking over the minority population (Focus Group).

Another focus group participant described feeling the pressure to keep up:
When we go to clinical and we are paired with Caucasian nurses, and at times, they are not nice for lack of a better word. You may feel pressure if you are paired with a nurse and you are caring for a patient that is the same race as the nurse (Focus Group).

The ethnic and background of each individual plays a part:

Sometimes you feel like that she (your assigned nurse) doesn’t believe you know, you’re capable to know the background of the racial issues pertaining to your patient’s race because you are from a different background, different ethnic group (Participant B).

This was shared by another in the group and contributing to the sense of not fitting in, which also served as a barrier or challenge to participants (see following section on Barriers encountered):

I was just going to say that as with the area that we are in, my last clinical rotation was within the heart of the city. A lot of the nurses and faculty were of minority, so I felt like I fit in where I should be. I did not feel any discrimination. I guess it depends on the area that you live in. If there were a place where there wasn’t a lot of representation of minorities, it would be different (Participant C).

**Barriers/Obstacles/Challenges**

The second thematic category was formed through the categorization of responses related to the perceived barriers, obstacles, and or challenges encountered by the student participants. The participants offered a variety of responses, indicating multiple challenges and obstacles to their success. Two participants mentioned having difficulty with time management. Others noted being unprepared for the competitive academic
environment, not fitting in as a minority, lacking self-confidence, as well as experiencing language and financial barriers. Table 3 details the variety of response types among the group of four participants.

Table 6

*Barriers, Obstacles, and Challenges Encountered*

<table>
<thead>
<tr>
<th>Response</th>
<th>Number participants to offer this response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Difficulty with time management</td>
<td>2</td>
</tr>
<tr>
<td>Ill prepared for college and the need to catch up</td>
<td>1</td>
</tr>
<tr>
<td>Language barriers</td>
<td>1</td>
</tr>
<tr>
<td>Financial barriers</td>
<td>3</td>
</tr>
<tr>
<td>Not fitting in because of race</td>
<td>1</td>
</tr>
<tr>
<td>Competitive environment</td>
<td>1</td>
</tr>
<tr>
<td>Difficulty asking parents for help</td>
<td>1</td>
</tr>
<tr>
<td>Self confidence</td>
<td>1</td>
</tr>
<tr>
<td>None</td>
<td>1</td>
</tr>
</tbody>
</table>

**Time Management**

Two participants commonly noted difficulty with time management, struggling to balance involvement, academic achievement, and clubs and teams. Participant A provided a list of barriers and obstacles related to time management.
Time management was a huge factor for me. I have always been involved in things. In high school I was a cheerleader and “um” I played softball. So I was always used to time managing. But in college it’s a lot difficult when you have these 3-hour classes and midterms and all these exams. So I felt that I had to rise above that. I feel that I am successful I am still in all of my clubs, president of a couple of clubs. I felt that those were the major challenges that I had to go through which was time management and balance (Participant A).

Lack of Preparedness

Participants in this study also described being ill-prepared for college and this lack of appropriate academic preparation cost them in terms of their ability to learn, study, and absorb the information at hand. For example, Participant B explained:

They said it was geared towards preparing you for college but to me it really didn’t prepare me. So coming in and taking A & P 1 and English Composition courses and all of that, it was like really hard for me to learn how to study and just learn all this new information because I didn’t have Anatomy in my school and I had AP classes (English), I wasn’t doing too great until I picked up studying habits and got into the hang of things for college. So going to the high school that I went to did not prepare me for college at all (Participant B).

The university associated with the participants in this study was described by a major magazine as “the most diverse in the, United States”, yet despite this diversity, it was difficult to find a place to fit in. However participants did feel as though once you do find your friends and place in the environment, these relationships can keep you going.

For example, one participant described:
The university is one of the most diverse campuses but the various cultures hang out together. For examples, the Asians stick together, the Hispanics hang together. I have always had an issue of where do I fit in. But you know I have made friends, and those are the things that are going to keep me. I feel like you should have fun, have friends. I felt a little left out and also now being off campus (Participant D).

During the classroom observations, as the students were arriving to class, it was noted that each student sat with their classmates that represented their nationality. By the end of the class, Caucasian students were grouped together; Hispanic students sat together, Philippine students congregated together, and African American students were together.

**Financial**

Another barrier mentioned by participants in this study was financial. For example, Participant D stated,

> The financial aspect has always been the obstacle for me because if I have to support myself. It was one point, when I first started college, that I was working 3 jobs. My first semester of my sophomore year, they were giving me the tuition and everything. It was a point that I was possibly going to have to drop out and figure out how I was going to pay. I was going to email my counselor and tell them that I could not afford this and I got an email to meet him in the office. At the time it was over the summer, it was worked out with tuition, financial aid and so forth. Although my tuition was covered, I still have to work 2 jobs to cover my living expenses (Participant D).

This participant felt that the financial burden was a significant challenge to success.
A focused group participant described her current financial status and how it played a role in her success:

\[
\text{My mom is currently a nursing assistant at a nursing home, rehab center. So she makes 13.25/hour, so it has really been tough. When we first came into this country, me getting through college was really important. To get us through some hard times, I could start picking up something. That is why I qualify for certain funding. So number one is definitely thinking about the financial struggles, because we have to support ourselves (Focus Group).}
\]

**Cultural**

Another barrier to success was related to language and cultural differences, specifically language barriers. Participant C explained in detail how language barriers played a role in student achievement and self-confidence:

\[
\text{No other barriers except for the language and self-confidence. English is my third language. It has always been a barrier for me my whole life. And we were reading things, you know like research papers, things like that use a lot of big words, I want to say. And for me to read a chapter I have to go very slow to make sure I grasp everything that they are saying so and than I have to look up half of the words. I want to say that it wasn’t too much of a barrier but it was more of a learning curve but it did slow me down because I didn’t understand right away. I would have to read things a few times. Now I have the hang of it, I can do things, right with the other kids. But language has always been a barrier and to this day, I still do not like writing a paper. Come up with sentences that sound very educated from a college level (Participant C).}
\]
During the focused group discussion Participant B described her experience as being African American nursing student.

*You may feel pressure if you are paired with a nurse and you are caring for a patient that is the same race as the nurse. Sometimes you feel like that she doesn’t believe you know, you’re capable to know the background of the racial issues pertaining to your patient’s race because you are from a different background, different ethnic group (Focus Group).*

Yet another participant combined several aspects such as not asking for help, catching up academically, and the competitive environment. Participant B described several barriers in the response. One barrier was not being able to or not wanting to ask for assistance when needed. For example, this participant stated:

*Some barriers that I have been faced is like I don’t like asking my mom for much but when she can, she does it. But not all the time I want to ask her. Like I don’t like asking her for groceries and all of that.*

This same participant described the challenge of being behind academically and having to catch up in terms of coursework, knowledge, and skills, stating, “Just being behind in my education and having to catch back up.”

Lastly, Participant B also described the challenge of the competitive environment. This participant explained:

*Like I said, in clinical, I’m faced with nurses that eat their young, and don’t want to help me or hear me out. That is like a huge barrier. I remember being in a clinical rotation, I was faced with a situation, I kept reporting things on this patient that I had and I knew that something was wrong. The nurse didn’t listen to
me, and a few hours later the patient coded and died. And I felt like if she would have listened to me this could have been avoided or at least if she would have been aware of what was going on (Participant B).

**Overcoming Obstacles**

Interview participants were asked how they have overcome these obstacles. Participant responses formed the third thematic category of overcoming obstacles through personal perseverance and peer encouragement. Common key responses revealed themes of determination, peer encouragement, and reaching out for help (support from professors and family). Also noted were familial support, development of new study skills, receiving help from professor(s), prioritization skills, extensive reading, and listening to native speakers to develop language skills (see Table 4).
### Table 7

*Ways of Overcoming Obstacles and Challenges*

<table>
<thead>
<tr>
<th>Response</th>
<th>Number participants to offer this response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Determination: Mindset of finishing, making parents proud</td>
<td>3</td>
</tr>
<tr>
<td>Peer encouragement</td>
<td>2</td>
</tr>
<tr>
<td>Reaching out for help</td>
<td>2</td>
</tr>
<tr>
<td>Help from professor</td>
<td>1</td>
</tr>
<tr>
<td>Familial support</td>
<td>1</td>
</tr>
<tr>
<td>Prioritization</td>
<td>1</td>
</tr>
<tr>
<td>Developing new study skills</td>
<td>1</td>
</tr>
<tr>
<td>Reading extensively</td>
<td>1</td>
</tr>
<tr>
<td>Listening to native speakers</td>
<td>1</td>
</tr>
</tbody>
</table>

**Determination: Mindset**

To overcome the obstacles and challenges faced in the completion of the program, study participants commonly described being determined to succeed. Participant A exemplified this determination in the following response, as well as she exhibited a perceived need to prioritize:

> It was a mindset I had to put myself in. I had to prioritize. At the end of the day, I am paying for an education. I always had to put my best foot forward. Studying, I felt like I had to have that mindset. I’m going to make my mom proud, I’m going
to finish, that was always in the back of my head. That is what helped me to overcome any obstacles that I was facing (Participant A).

**Program Support**

Another participant described the need to seek out help when needed and how being able to ask for help, supports persistence. This included asking for academic assistance, support, and family financial assistance. For example:

*I would have to say that overcoming studying skills, and I had extra support classes, Educational Opportunity Fund (EOF) helped me like just learn the ways of studying and having that extra one-to-one helped me with things that I couldn’t, that I didn’t get in class. And just seeing my potential and having friends say that I can do it and also asking them for help. So that really helped me, since I am in a community with my EOF family helped me* (Participant B).

Similarly, Participant D cited seeking help from family and friends and the ability to overcome challenges when one is accomplishing something deemed valuable. For example, Participant D responded: “Like I said, family, friends and knowing that I am accomplishing something.”

Overcoming barriers and challenges specific to this population was supported by a determined mindset and through the use of prioritization. This was repeated in Participant A’s interview responses.

This determination serves to allow participants to reduce or eliminate these types of barriers.
Achieving Personal Goals

When asked to define success and persistence in terms of their perceptions of a personal sense of the terms, participants offered their perceptions, highlighting goal achievement and, thus, forming the fourth thematic category. Specifically, participants defined success primarily in terms of achieving their personal goals and the satisfaction associated with that achievement (3 of 4 interview participants), hence, revealing a theme in the data. In addition, other responses included expressing the uniqueness of the sense of success to the individual, as well as success in terms of reaching the highest point in what you are doing. Table 5 illustrates the variety of responses and the associated frequencies supporting the theme development.

Table 8

Definition of Persistence and Success

<table>
<thead>
<tr>
<th>Response</th>
<th>Number participants to offer this response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Achievement of personal goals and satisfaction with achieving goals</td>
<td>3</td>
</tr>
<tr>
<td>Unique to everyone</td>
<td>1</td>
</tr>
<tr>
<td>Reaching the highest point in what you are doing</td>
<td>1</td>
</tr>
</tbody>
</table>

The knowledge of persistence (success) was defined by the study interview participants in terms of the achievement of their personal goals, while overall, the knowledge of persistence denotes our personal satisfaction with achieving the goals we
set for ourselves. Participant D simply stated that success was defined by “having the goals and meeting those goals and everything that it took to get there (Participant D). In addition, the following participants similarly described their personal sense of success:

_I feel like success is what you achieve when you set out to do. Achieving a goal is what makes you successful. It’s not a formula. It’s unique to every individual._

_Being successful is: It’s achieving my goal of graduating with a certain GPA._

_Making friends, it’s making those connections (Participant A)._  

_Success for me is knowing that you are achieving your goal, whatever goal you set from the beginning. It is achieving it and being happy with yourself and your accomplishments and the way to it makes it a success. Sometimes when we reach our goals, we are not happy with it or we believe that it took us; it was too long to achieving it. So to reach your goal and actually being happy but the way you got there can take so much to get there with all the barriers and obstacles to me defines true success… you did something then you accomplished something_  

(Participant C).

**Interpersonal Influences**

The fifth thematic category generated from the response data included the major factors responsible for contributing to persistence. Key common responses included a variety of interpersonal influences and personal motivations, including parental influence, peer relationships, school counselors and advisors, and personal motivation to persist and succeed. Other individual participants cited the motivation of being a first generation graduate, gaining job experience, and having a passion for a chosen career. Table 6 provides the full variety of responses offered by participants.
Among the factors felt to support persistence, there were several common responses, indicating themes in the data. Parental influence was one factor that supported student persistence in the nursing program. Participant D stated, “I definitely think my family has a lot of do with my persistence.” Participant B added to parental / family influence by including other social influences and support systems, such as parents, grandparents, siblings, and significant others. Related to parental and family influences is the drive and pride gained by being a first generation graduate in the family. Participant B explained these factors;

My EOF family and others included my support system, like my mom, grandmom, boyfriend, brothers and sisters are my constant motivation. I will be a first generation grad and they always tell me that I am going to be a first generation
grad so I know that I have to do good and I have to finish this. And just like look at the greater picture at the end (Participant B).

Further, Participant A expanded on the influential social influences to include those outside the immediate family and friends to include counselors, classmates, peer relationships, and personal (or internal) drive/motivation. This participant stated:

*It would have to be my mom pushing me, my counselors, my classmates, EOF (which is a tight knit community), the college of nursing. Building relationships with your peers, makes you want to do better and succeed. It makes you want to graduate with your friends. I would say to join those clubs, get involved. Make those memories, and graduate. As far as doing well in exams and classes, it was my competitive edge to challenge myself. If I got one grade on an exam, I challenged myself to do better on the next* (Participant A).

Another similar example in which the participant cited advisors, personal drive, and peer relationships as major factors to persistence was gained from the interview with Participant C who described the importance of advisors and peers for guidance. This participant explained:

*Major factors are definitely the advisors in my EOF program. They really, really, really have been the most helpful for me. I say that because I am literally on my own. When I say on my own, not financially, but when it comes to school work, my mother barely speaks English, she cannot help me in that area, did not attend college and she cannot help me in that area. So I have to rely heavily on my peers and advisors to guide me and tell me which classes to take or how do I prepare, what do I do, how can I get to where I need to go and that is to get a job.*
So I rely heavily on these advisors, they are the ones that guide me. I listen to their advice. They gave me the recommendation to get a job to get your foot in the door. I listen to everything that they have to say (Participant C).

Personal motivation, as was mentioned within these quotes from the interviews, was a commonly described factor supporting persistence among this sample population. Participant D described, “I feel like it’s my passion. I want to talk to patients.”

In addition to the interview findings, the focus group results supported participant perceptions of ways of being persistent and successful, indicating similar results to the interview data and supporting the themes that developed. The focus group discussion highlighted familial support, internal motivation, peer support, counselors, the motivation to prove people wrong, and overcoming financial struggles. For example, during the focus group, one participant expressed the importance of internal motivation and familial support to persistence:

*I think that it was definitely my support from my mom. For me my main goal is to finish so that I can give back to her so that she isn’t struggling anymore. So that is my main goal. I like to challenge myself, so if I saw that this semester I didn’t do so well, next semester I will do twice as better, so that kind of internal motivation drives me to finish - My family and my determination to succeed.*

Another participant furthered this discussion indicating family and financial background as critical factors to persistence. This participant within the focus group discussion detailed:

*Definitely my family, with my financial background, it has always been me and my mom so supporting ourselves. My mom is currently a nursing assistant at a*
nursing home, rehab center. So she makes 13.25/hour, so it has really been tough.

When we first came into this country, me getting through college was really important. To get us through some hard times, I could start picking up something. That is why I qualify for certain funding. So number one is definitely thinking about the financial struggles, because we have to support ourselves.

The focus group data also indicated the personal drive to “prove others wrong” such as proving against stereotypes or discriminatory beliefs. One participant stated:

So, I wanted to break the cycle and show people that yes I came in this country at 13 with two words of English, but here I am making it, for my mom and also for the whole community so that they don’t...so that the outsiders don’t just perceive us as charity cases.

Another critical factor perceived by the focus group participants, to support persistence was the support gained from others, such as counselors, peers, etc. For example, one focus group participant noted,

I think that the overall support I have, it’s just not...- just from one person. It’s my counselors, friends, and boyfriend. Because I came in with a mindset like I can’t do it, they got this GPA, I came from Newark public school.. blah blah blah.. Then my counselors and friends said that I can do it, like you are here for a reason. And just seeing that I could do better, eventually their words became a reality, and I started to progress, further and further I began to do better. If I didn’t have that support, I doubt that I would be here right now.
Mixed Perceptions of Nursing Faculty Interactions

When the classroom observations occurred, the faculty members who facilitated the classes were visible, demonstrated eye contact, and utilized hand gestures throughout class discussion of material. It was noted that in Class #2, the faculty member maintained the students’ engagement by asking questions and the student groups facilitated and also asked questions pertaining to the reading and clinical experiences.

Specific interactions with nursing faculty participant responses vary between the participants. Participant discussions of interactions with faculty formed the sixth thematic category of data. Key common responses indicated experiences that were (a) generally and overall positive in nature, with personal relationships formed between faculty and students; (b) mixed, with some faculty being friendly and helpful and others cold; and (c) initially intimidating. Other participants added that the interactions were helpful, and that teachers were generally culturally competent; yet still others noted favoritism and discrimination and a lack of personal connection between faculty and students (see Table 7).
### Table 10

*Perceptions of Professor Interactions with Students*

<table>
<thead>
<tr>
<th>Response</th>
<th>Number participants to offer this response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall positive experience</td>
<td>2</td>
</tr>
<tr>
<td>Some friendly, some cold</td>
<td>2</td>
</tr>
<tr>
<td>Initially intimidating</td>
<td>2</td>
</tr>
<tr>
<td>Personal connections with students</td>
<td>1</td>
</tr>
<tr>
<td>Helpful</td>
<td>2</td>
</tr>
<tr>
<td>Good at dealing with different cultures</td>
<td>2</td>
</tr>
<tr>
<td>Favoritism or discrimination</td>
<td>1</td>
</tr>
<tr>
<td>Lack of personal connection to students</td>
<td>1</td>
</tr>
</tbody>
</table>

### Positive and Negative Interactions

Interview participants in this study described overall positive experiences with faculty that aided to foster student success. For example:

*It was a positive experience. My class is very small, I think like 26 people in my class. Some of the professors know you by name so you are able to build those relationships. I am giving my thesis right now and I am working with 3 professors in the college of nursing and so I would not have been able to do that if I did not have a positive relationship with them. I have developed a relationship in class* (Participant A).
Participant C similarly mentioned good interactions, but also noted feelings of intimidation, fear, anxiety, and the perceived benefits of such faculty. This participant state,

*I actually always have good interactions with my nursing professors. I was a little ..hh.. at first it was a little.. not intimidating but.. I’m not afraid to go up to them because sometimes I wouldn’t want to sound stupid when I ask questions so I would only read my book and research the answers on my own.. So before the beginning, I would never go to them because I wouldn’t understand what they were saying in class. So it would be good for me to interact with them and ask questions. So, it would be beneficial for me to speak with them but I didn’t. That was a problem on my part. When I would go to speak with them, it was always positive and they are always helpful. I believe that on our campus, we are the most diverse school in the nation. They are used to having a lot of culturally diverse classes. They know how to deal with various cultures and a few of them are from different backgrounds. So interactions with the nursing professors were always positive. They always tried to help and answer all of my questions. I regret not going to them sooner. I never really got a negative interaction or vibe from the professors (Participant C).*

In terms of interactions with faculty, some students described mixed interactions, where some were positive and others were not very positive. For example, Participant B stated,
There is some that I have actually tried to form relationships with like “Hey I’m” and make little jokes with them. And then there are others that I barely say much. I more so interact with students or the teachers that EOF provide (Participant B).

Similarly, Participant D also described mixed experiences of faculty interactions:

*Most of my interactions have been really good. I tend not to interact with professors not unless I really need something. I’ve had really good professors and then I have had really sucky professors.* When I started my junior year, it was really hard. In one of my classes, the class was really large, they didn’t know everybody, we are learning, but the professor didn’t know you by name. So if you had any questions, you had to go to them personally (Participant D).

Supporting the interview data analysis showing perceptions of positive interactions with faculty, focus group data highlighted faculty as perceived to be approachable and as nondiscriminatory. However, the focus group data lacked the more negative interactions that were also mentioned within the interviews. When focus group participants were asked if and how professor relationships play a role in success, the ensuing discussion and participant responses indicated that faculty relationships can (a) be very helpful to the students; (b) offer mentoring opportunities; (c) support students in dealing with discrimination; (d) be critical to providing representation; and (e) have an enormous impact on the students’ ability to succeed in class. In addition, focus group participants discussed that the faculty members could relate to the students’ obstacles.

For example, one participant in the focus group described the faculty “as approachable people who were able to demonstrate fair and equal (or at least not different) treatment,
I think all of our professors are approachable and they do not treat us any
different because we are African American. That doesn’t play a part in that at all.
So I feel as though everyone is treated the same.

This was echoed by a second focus group participant, who stated:

I don’t feel treated differently because of my race her at the university and I do
believe like I said before because this is the most diverse school in the nation, they
expect, to encounter a lot of different groups, different backgrounds, things like
that, so they are pretty good into treating everyone equally. That was a part of the
professors training, teaching.

One advantage of having positive relationships with faculty is the opportunities for
mentorship. One Participant described, “As far as nursing profession, it helps you a lot if
you have them like a personal or a strong relationship with a faculty member because
they could recommend you, advise you, mentor you.” Another participant described how
such mentor opportunities could serve to assist minorities specifically by providing
recommendations and training where discrimination may be evident. This participant
explained:

Unfortunately a lot of places, although this is against the law, as soon as your
name pops up on a resume and it looks foreign, even if the manager doesn’t
realize it, she or he’s you know is reading into the name could be bias or
discriminatory against the person already based on the name.. Like she’s African
or like my name is really awkward. So they already know that that person is not
Caucasian or things like that. So if you have a strong relationship with a faculty
member, that could really elevate you, help you out a lot with their
recommendations and their mentoring can help you out a lot (Participant A).

Because of discriminatory practices and other disadvantages faced by the African American participants in this study, another advantage to positive relationships with faculty is that these faculty members have oftentimes already gone through similar situations in their own careers and are able to offer advice and assistance. One participant stated:

I feel as though we need as much support as we can. As with certain faculty, they have been through this as well because they are nursing faculty. So their opinion really matters, because... and their support cause they can actually relate to what we are going through right now. We have support from our parents but they do not know exactly what we are going through. I am an EOF student so that means my parents did not finish college so they do not know the stresses that we are faced with. And just having that kind of relationship puts you at ease during the hard times.

Finally, another key element of building these relationships is in developing strong representation for minority students, specifically African American students, acknowledging the potential of this population as successful students and nurses in the field, as explained by one focus group participant:

I’m not saying that we represent the African American community but essentially we do and I feel that it’s important for us to have that. We are strong students and we are not just what statistics say. We are here in school, reaching out to our professors, we are doing everything that what we should be doing. I feel like it
just speaks volumes when you have those relationships with those professors, individuals, or professionals in the college. It’s like “hey we are here, we’re doing this”, we have these mentors. So we are students too, so yes it’s important.

**Recommendations for Improvement**

As a final thematic category, participants offered recommendations for improvement in nursing education. Key common recommendations included increased diversity, specifically to include more professors of color to provide for a different comfort level (see Table 8). Other uncommon responses included making nursing education more of a family environment, and increasing school communication with hospitals.

Table 11

*Recommendations for Improvement in Nursing Education*

<table>
<thead>
<tr>
<th>Response</th>
<th>Number participants to offer this response</th>
</tr>
</thead>
<tbody>
<tr>
<td>More minority professors to support a different comfort level</td>
<td>4</td>
</tr>
<tr>
<td>More diversity in general</td>
<td>3</td>
</tr>
<tr>
<td>More of a family environment</td>
<td>1</td>
</tr>
</tbody>
</table>

**Minority Professors**

All four interview/focus group participants recommended the need for increased diversity, specifically in the form of more minority professors. African American professors in nursing were notably missing, as discussed by Participant B, who stated,
“...,and maybe even have some African American professors in nursing. I don’t think I have ever had any African American professors within the department of Nursing.” This increased diversity was thought of as way to create a different sense of comfort level for the minority students. Participant A described,

I believe that they should make the pool more diverse. I think that comes with people applying. I think that there should be more a variety. We are the most diverse in the nation but why is there only 5 African American students in the class? - Maybe more professors that is of color too. I never had an African American Professor during my years…. that you can aspire to. Not that I do not feel that I can aspire to them but, you feel kind of a level of comfort with a person that is of your same race or ethnicity (Participant A).

Diverse Family Environment

Another recommendation was to create more of a family environment, in addition to supporting more African American students and teachers. Participant B explained:

Maybe make it more of a family environment. Because there are some people in my class that I am close with, but it is only because I am in clinical with, and then there is my EOF people that I am close with. Then there are some people who feel like they are too good to be your friend or something like that. So I don’t know.... And maybe we could have more African Americans in our school because there is a very few of them (Participant B).

Participant C agreed, describing two main recommendations of cultural diversity in terms of both culturally diverse teaching and the recruitment of more diverse students. One problem noted by this participant was the mal-alignment of the community demographics
and the nursing demographics, with communities being very diverse and the nursing school only demonstrating about 10% African American students. The response of this participant included the following text,

Two recommendations; we need more culturally diverse teaching because I think that this is a very big thing, and I have been encountering a lot of different cultures and we need more cultural interactions in class. I feel like the other instructors should touch on that as well so that we can be more aware. In our community health class now, we are really discussing cultural diversity. I feel like we should teach more, other cultures. At one of my clinical sites, the majority of the population is diverse. In regards to my school, only about ten percent of the students are African American. They need to admit more African American students. We should try to recruit more African Americans (Participant C).

Participant C, therefore, called for higher admittance rates of African American students specifically. She also requested that more information be put forth on financial aid and other opportunities to assist these students.

**Summary of Themes**

Overarching themes were developed from the thematic categories and detailed descriptions and experiences of the participants (both interview participants and focus group participants), with both generating a concept of the essence of the experiences for the group as a whole. The following themes represent the conclusions of the analysis.

**Theme 1: Minority Disadvantage**

Although gender was not felt to have an impact, likely due to the predominance of females in the nursing field, minority status, and in particular, African Americans, were
felt to have a significant disadvantage in nursing study and practice. The participants described needing to work harder than their non-minority peers, having to learn different languages and cultures, trying to work within an intimidating environment with few African American students while battling discriminatory stereotypes and feeling out of place.

**Theme 2: Barriers and Challenges**

Specifically mentioned barriers and challenges to success in the nursing field for these participants included lack of time management skills, poor preparation academically, language barriers, financial barriers, a sense of not fitting in, and the highly competitive environment.

**Theme 3: Personal Perseverance and Peer Encouragement**

Participants demonstrated personal determination that supported their ability to overcome the barriers and challenges to success in the nursing program. In addition, participants noted peer encouragement and support as well as the need to reach out for help from professors and family support.

**Theme 4: Achieving Goals**

The achievement of personal goals and the personal satisfaction gained through that achievement was felt to define one’s success. Participants also noted the unique and individual nature of success, as it is based on unique individual goal attainment.

**Theme 5: Interpersonal Influences**

Participants in this study commonly noted the importance of personal motivation and the interpersonal influences of family, classmates, counselors, and advisors in supporting individual perseverance.
Theme 6: Mixed Perceptions of Existing Interactions

Participants described both positive and negative experiences with nursing faculty ranging from the benefits of mentorship and the damage of discriminatory practices. Participants noted feelings of intimidation, but also described personal connections with faculty, which provided mentor relationships, and the benefits of a cultural competent faculty.

Theme 7: Recommendations for Improvement

Participants called for increased general diversity in the nursing program, the inclusion of more African American professors and greater recruitment of African American and other minority students. Secondarily, the participants felt a more family-like environment would benefit the nursing program and development of future nurses.
Chapter V

Discussion, Implications, and Conclusions

As identified within the literature review, the major concerns presented are not only the lack of diversity within the profession of nursing, but also the increased attrition rates of African American nursing students. The retention of students in nursing programs continues to be a major challenge for nurse educators and Deans of Nursing. Student attrition negatively influences the demand of registered nurses to fill staff positions, administrative roles, and teaching positions (Wells, 2003). Without further research and new strategies, nursing is likely to continue to be a poorly diversified profession compared to the population it represents (White & Fulton, 2015). Proactive identification of the at-risk student, utilizing both academic and psychosocial risk factors, has the potential to decrease attrition through the use of programming that supports the student. Early implementation of interventions is imperative to the success of students in order to allow for the sufficient integration of strategies (Harris, et. al, 2014).

Discussion of Findings

The purpose of this qualitative study is to explore the nature of the faculty-student relationship as well as the persistence of African American senior nursing students in the nursing program at an urban college. Four research questions guided this study in an attempt to explain the lived experiences of senior African American Nursing students and whether the impact of faculty-student relationships played a role in their success as a nursing student. The research questions included:

1. **RQ 1** What common factors do African American senior nursing students identify as contributing to their persistence?
2. **RQ 2** What engagement strategies, if any, contributed to African American senior nursing students’ persistence?

3. **RQ 3** How do students perceive the role of faculty in engagement with African American nursing students?

4. **RQ 4** How can nursing faculty promote persistence of African American nursing students?

Four African American nursing students and two Nursing Faculty were involved with this qualitative phenomenological study. Data was obtained via two classroom observations, interviews, and a focus group discussion. Both faculty and students were involved in Phase 1 (classroom observations) of the study, and only students were involved with Phase II (interviews) and Phase III (focus group discussion). Data was transcribed and analyzed for each of the phases. As a result of the analysis, seven themes were identified: (1) minority as a disadvantage, (2) barriers and challenges (such as time management, financial barriers, and being ill prepared academically), (3) overcoming obstacles through personal perseverance and peer encouragement, (4) sense of success gained through achieving goals, (5) interpersonal influences and personal motivation as critical factors affecting perseverance, (6) perceived benefits of interactions with nursing faculty, but mixed perceptions of existing interactions, and (7) recommendations for improvement.

This chapter presents a discussion of the findings related to each research question. There is also a discussion of the relationship to the conceptual framework utilized in this study along with the relationship to the latest research. The chapter concludes with a summary of findings and implications for practice, policy, and research.
Research Question #1: What common factors do African American senior nursing students identify as contributing to their persistence?

**Personal Perseverance**

Participants described interpersonal influences and personal motivation as critical factors affecting persistence. One participant voiced that a motivating factor was how her family always vocalized that she would be the first generation grad and she stated: “so I know that I have to do good and I have to finish this. And just look at the greater picture at the end.” Participants expressed their personal perseverance was born from an outlook wherein failure was not an option. Another participant stated that her family was dependent upon her graduating, obtaining her license, and getting a good job in order to help to support her mother.

Financial support can be looked upon as a barrier but also as a means of perseverance. The majority of the student participants had to work in order to assist with living expenses and educational needs. One student participant worked as a pharmacy technician and nursing assistant to support her college education while another participant worked two jobs to pay her college expenses. Once the participants graduated and became registered nurses, they knew that they could contribute more to their family.

**Supportive Network**

Additionally, a number of supportive services contributed to the participants’ persistence. Echoed throughout the interviews, was the involvement of role models, advisors, and counselors. One participant verbalized how she appreciated the help of her advisors in the EOF program. Participants valued the support from a diverse group of professionals. Through the interviews and focus group discussion it was identified that
the emotional support provided to these student participants played a pivotal role in building their confidence, self esteem, and inspired them to be the best that they could be. The research revealed confirms current literature which states that having a strong support system, role models, family support, and self-determination played a role in the success of the African American nursing students (Veal, Bull, & Miller, 2012).

Research Question #2: What engagement strategies, if any, contributed to African American senior nursing students’ persistence?

**Faculty Student Interactions and Clinical Experiences**

During both of the classroom observations, it was identified that the faculty members engaged the students, asked various questions, allowed the students to build upon their critical thinking skills, and students also presented and gave rationales to National Council Licensure Examination (NCLEX) style questions. Faculty demonstrated professionalism, good eye contact, and body language. It is important to note that in regards to faculty, interactions in the classroom and clinical were the only type of interactions that the participants identified. Participants stated that they did not attend professors’ office hours nor communicate with faculty other than within the classroom setting.

Besides the classroom engagement that was witnessed, students identified their clinical experiences with their peers, patients, and assigned clinical instructor as helpful engagement strategies that bolstered their learning and persistence. One student took it a step further and was able to obtain a healthcare job while in school to assist her with persisting through the nursing program. She stated,
During my sophomore year I got a job as a pharmacy technician, which helped me with medications. I got a job at the Rite Aid, I worked there 1 day a week because of the hours. Now I am very familiar with the drugs; I can educate patients, contact insurance companies. I probably do not need them as a nurse right now but I feel familiar with these things and I could use them to my advantage. This is how I was able to put myself out there and by mentioning to people and try to get my foot in the door and now during my junior year, I was qualified to become a nursing assistant (Participant C).

Research Question #3: How do students perceive the role of faculty in engagement with African American nursing students?

Mixed Feelings

Data analysis revealed common themes that were both positive and negative when relating to faculty role in engagement with African American senior nursing students. Some of the participants indicated that they felt that the role of the faculty was a valuable component for success in their nursing careers but regretted not seeking assistance sooner. One participant described her interactions with faculty as being helpful. She stated, “When I would go to speak with them, it was always positive and they are always helpful” (Participant C).

Participant D described her interactions with nursing faculty as both encouraging and at times a misapprehension;

Some professors do not understand that I have to work, I have responsibilities, and yes I may have to stay up late to get my work done. I may come into class tired but I am paying attention in class. I may come to class with my uniform on, I may have to
take an exam, that doesn’t mean I’m working, I may just have to go to work after the exam. In general I would say that my interactions are cordial. I say hi and bye. They may not know me by name (Participant D).

In describing their overall experiences with faculty, student participants used words such as: positive, cold, friendly, initially intimidating, helpful, and discriminatory. Some described having a personal connection with a professor while others noted that the professors lacked any personal connection with their students. Some participants also witnessed faculty favoritism towards certain students.

In order to unlock the mystery of increased attrition rates of African American nursing students, faculty must reflect on their current practices and interactions with students; it may even be helpful if they were to review the latest literature regarding strategies, challenges, and barriers. Findings from the current research study support a report from Fries-Britt and Turner (2002) who reiterated the importance of faculty engagement with African American students in promoting persistence. Faculty members should actively invite students into a faculty-student relationship; they should take opportunities to deliver positive feedback, and they should observe their own teaching practices for unconscious racial bias (White & Fulton, 2015).

**Research Question #4: How can nursing faculty promote persistence of African American nursing students?**

**Caring Attitude**

Because nursing is a caring profession, it is essential for nursing faculty to employ a caring attitude while meeting the needs of African American nursing students. During the focus group discussion, which allowed the participants to reflect upon their schooling,
participants were able to discuss the value of faculty and how it may affect persistence. One participant described support as an important factor that would promote persistence when she stated,

*I feel as though we need as much support as we can. As with certain faculty, they have been through this as well because they are nursing faculty. So their opinion really matters because and their support cause they can actually relate to what we are going through right now. We have support from our parents but they do not know exactly what we are going through. I am an EOF student so that means my parents did not finish college so they do not know the stresses that we are faced with. And just having that kind of relationship puts you at ease during the hard times* (Participant A).

**Mentorship**

Another factor that may contribute to the persistence of African American nursing students is mentorship. Buchanan (1999) suggests that the attrition rate for African American nursing students has increased and that the failure to retain African American students is linked to the lack of mentoring relationships with persons students can feel comfortable with and with whom they can relate to, learn from, and ultimately, emulate. Participants verbalized that they had developed professional relationships with some of the faculty. One participant stated, “*I think that it is important for the professor to find the balance between teaching the students and mentoring the students*” (Participant B).

Participants also discussed how faculty-student relationships impacted the success of African American nursing students. Participant D stated, “*With professors now, for*
instance my one particular professor, knows me by name, she is receptive... I think that teacher student interaction is very important” (Participant D).

During the focus group discussion, participants stressed the importance of developing a faculty-student relationship. Echoed throughout the interviews, participants verbalized that developing a faculty-student relationship would help them to feel less isolated or intimidated and would actually boost their self-confidence. This validates Fries-Britt & Turner’s (2002) notion that educators must create institutional support systems, so that African American students may have the opportunity to develop the personal confidence that will “propel them toward academic pursuits” (p. 326).

**Faculty-Student Relationship**

Students described having a faculty-student relationship as important in their academic journey. In regards to this component, throughout the interviews and focus group discussion, the following components were identified: getting support, receiving encouragement, mentorship, and role modeling.

Two areas that were identified through participant recommendations were not only the lack of diversity within the profession of nursing but also the lack of African American nursing faculty. One student stated that she has never had an African American faculty member teach her during her four years as an undergraduate student. Race was indicated as a component, and all of the participants verbalized that having someone from their race teach them would increase their comfort level and that to see someone from a similar ethnic background would serve to motivate them towards academic success.
Relationship to Literature

The findings uncovered feelings of inaptitude, inadequacy, lack of self-confidence, isolation, and discrimination, all of which could be related to a student’s persistence. These findings support Santos & Reigadas (2002) who identified the phenomenon that students of color entering four-year institutions often experience a sense of isolation within and an alienation from the campus environment. Research findings support the literature related to the need to develop strategies that could possibly increase the percentage of African American nursing students that persist to graduation at colleges and universities (Lee, 1999; Fries-Britt et.al, 2002; Kuh et.al., 2001 and Baker, 2013).

Another component from this study that correlates with previous studies is that of financial support. Some of the participants were EOF participants that came from a low social economical background while another student was considered to be out of state. Participants reported that they had to overcome their lack of financial support by working 1-2 jobs to cover college and living expenses. Studies show that working long hours decreases the amount of time available to study (Loftin et al, 2012).

The findings of the importance of mentorship and advisement as a means of social and academic advancement confirms the work of Davis-Dick (2008) who offers five recommendations for developing a strong and effective mentor-mentee relationship, which include: dedication, honesty and trust, mutual respect, a positive and caring attitude, and appreciation.

Students were compassionate when discussing the Educational Opportunity Fund (EOF) and the support that they received from this department. This program’s mission is
providing support for educational initiatives, support services, and leadership development activities that assist students to improve their chances of success in specific major and career fields. One of the goals of EOF student participants is to have the students assume leadership roles in their communities and state (n.d., 2014). This particular program provides mentorship, advisement, tutoring, and role modeling, which is the same type of support that the students desired within the department of nursing.

Findings also revealed that there is work today within the profession of nursing to not only increase the percentage of African American nurses but to also define the role of a faculty-student relationship. Currently, while there are research studies that analyze the barriers and challenges that African American nursing students may face, there is little research on the actual role that faculty play on the success of those students.

**Conceptual Framework Implications**

This research was conducted utilizing the lens of Tinto’s theoretical model of student retention in conjunction with Patricia Collins’s Black Feminist Thought. Together these theories were examined to formulate a conceptual framework to explore this study. The two theories provided perspectives that were useful in the application of this study.

**Tinto’s Model of Student Retention**

Vincent Tinto’s theory of student retention described “integration” as being a strong predictor of determining whether a student persists or drops out of their respective program (1993). Tinto’s model of student retention highlighted that integrative experiences increase the possibility of persistence (success). He claims that whether a student persists or drops out is highly related to their degree of academic and social integration.
Tinto’s Model of Student Retention supports this particular research study that was performed on African American senior nursing students. Students included identification of not only self-determination but also reaching out for help, peer encouragement, the assistance of mentors and advisors, and developing new study skills as some of the influences that assisted them in their persistence. Each participant developed a sense that they had to work harder than anyone else in their class, which increased their determination to succeed.

During the interview process, Participant A described her passion for joining clubs and being a part of the academic community. This represented her form of integration. Although participants had both positive and negative interactions with their professors, participants relied on mentors, counselors, advisors, family, and classmates to assist in the process of integration into the academic community and also considered this an important factor in their success.

Participants described their overall interaction with their peers within their nursing school as relationships that resulted in friendships. Participants believed that having a strong relationship with nursing faculty could elevate the student through the faculty members ability to provide recommendations for future opportunities. Participants described their overall faculty interactions as good interactions, even if intimidating at times, and one participant reported having a sense of nervousness when consulting with faculty. Contrastly, Tinto suggests that students should disengage themselves from family and friends in order for students to persist but familial support and the desire to make one’s family proud played a strong role in participants who reached the point of persistence.
Patricia Collins’s Black Feminist Thought

When deciding upon incorporating Patricia Collins’s Black Feminist Thought, the discussion of African American women as unique individuals was most compelling. Black Feminist Thought describes the fundamentals of Black women’s oppression as: negative stereotypes applied to African-American women (Collins, 1990). The majority of the participants involved believed that they had to work harder because they were identified as African American. Participant B noted increased expectations and the necessity to prove herself when she stated, “I feel like there is more expected of me, I have more to prove since I am an African American student” (Participant B).

Although individual Black women may respond differently to situations, interactions, and educational opportunities and experiences, there are fundamental issues that all Black women can acknowledge and assimilate into their self-identity. Findings from this study correlate with the Black Feminist Thought perspective in that each participant described their nursing educational journey as unique in regards to being African American. Some described their experiences as having to face stereotypes, while others had difficulty fitting in as a minority and, therefore, lacking self-confidence.

The data resulted from the study is consistent with Patricia Collins’s Black Feminist Thought, in which each participant described their experiences as an African American nursing student as difficult at times, as not fitting in, or as having a lack of self-confidence. It is important to note that the participants overcame those feelings by way of their drive to succeed and interpersonal goals. Comments such as “I’m going to make my mom proud, I’m going to finish” suggests that participants were self-motivated to break through the challenges and graduate. Patricia Collins also embraces the notion that
Despite the common challenges confronting African American women as a group, individual Black women neither have identical experiences nor interpret experiences in a similar manner (Collins, 1990).

The existence of Black Feminist Thought suggests that there is always a choice, and power to act, no matter how hopeless the situation may appear to be. Patricia Collins (1990) believed that viewing the world as one in the making raises the issue of individual responsibility for bringing about change. It also shows that while individual empowerment is key, collective action can effectively generate a lasting transformation. Not only did the participants demonstrate the drive and determination to succeed for themselves and their family but also they wanted to create a change within the profession of nursing. Participants also believed that they could go on and become change agents within the school of nursing. Three of the four participants have already begun to mentor junior minority nursing students.

**Methodological Considerations**

In this study, the definition of “African American” is defined as any individual from Black and African descent. Although methodological procedures were discussed in Chapter three, it is imperative to discuss some of the challenges that were faced during the entire research process. Initially, it was the researcher’s desire to collect data during the 2014 Fall Semester, but due to the IRB process, and assuring that questions were adequate, the research process began in the 2015 Spring Semester. Despite careful planning, the sample size of participants was small. There were a few faculty members that declined participation in this particular study. The entire female African American senior nursing students agreed to participate in the study despite their busy schedules,
which included working, projects, assignments, and presentations. Because of the busy
schedules and the distance, interviews took place via conference call. The final focus
group discussion was conducted in person with participants occupying a conference room
space that provided a comfortable environment where participants could relax and be
themselves.

Limitations of Study

This study endeavored to understand African American senior nursing students’
lived experiences regarding their perceptions of their nursing education. The study
methodology incorporated a phenomenological approach to describe the meaning of
several individuals’ lived experiences of a concept or phenomenon (Creswell, 2013). The
sample size may constitute a limitation of the study because of the lack of female African
American senior nursing students that were currently enrolled and persisting in the
program.

Implications

Practice

According to the American Nursing Association, nursing is defined by the
protection, promotion, optimization of health and abilities, prevention of illness and
injury, alleviation of suffering through the diagnosis and treatment of human response,
and advocacy in the care of individuals, families, communities, and populations (ANA,
2004, p. 4). As educators, we have the ability to change lives, enhance critical thinking
skills, build students’ confidence levels, advocate for nursing students, provide a caring
environment, and play a pivotal role in increasing diversity within the profession of
nursing. Unfortunately, nursing has been unsuccessful in increasing the retention and
persistence of African American nursing students. The implications for nursing education, further research, and policy will now be addressed.

In order to eliminate health disparities and meet the demands of a diverse population, efforts to teach, train, and support a diverse group of nursing faculty should be intensified. As evidenced by previous research stated, it has been shown that patients receive a better quality of care from those who are culturally and linguistically connected to them (Henry, 2003).

Hiring African American faculty and staff provides support services that target African American students. Implementing cultural and social services and devising comprehensive retention plans can help to facilitate African American student achievement (Karpinski, 1996; Arminio et al, 2000). Each participant repeatedly mentioned the importance of hiring a diverse group of faculty during the focus group discussion and individual interviews. Research suggests that faculty who shared the same racial membership, culture, and experiences with African American students were better able to connect to those students' experiences (Fleming, 1984). Administrators also must seek funding for financial aid for graduate education; specifically targeted scholarships may assist in attracting additional diverse students (Veal, Bull, & Miller, 2012).

According to the literature review found in chapter two, a faculty-student relationship is comprised of the following components: integration, role modeling, engagement, mentorship, and advisement. Students admire, value, and look up to their professors. However, in this study some verbalized that they felt a level of intimidation when meeting with their professors at first, as well as having a sense inadequacy for membership in the program.
Faculty-student relationships should be defined within each institution of higher learning, and the building of that relationship should begin when the student first begins taking classes within their major. Having this type of professional relationship could possibly enhance the confidence level of African American nursing students and give them hope that they can be successful. Research indicates that faculty interaction was more influential for African American student success than for other races and ethnicities (Kezar & Maxey, 2014).

Developing effective faculty-student relationships could assist in removing some of the barriers and challenges of isolation, inadequacy, absence of time management skills, not fitting in because of race, and lack of self-confidence. It can also benefit nursing faculty to develop a better understanding of the roles and responsibilities that African American nursing students may face as compared to non-African American nursing students. The participants in this study felt that having more African American nursing professors would increase the comfort level and confidence of African American nursing students within the program.

Policy

In regards to policy implications, the following recommendations are essential for consideration: (a) the incorporation of mandatory training with nursing faculty to incorporate and define a faculty-student relationship; (b) the inclusion of mentoring workshops for faculty that will assist faculty in their becoming mentors to various ethnic backgrounds; (c) annual evaluations of faculty regarding their professional relationships with students; (d) forming a yearly “get to know” workshop for students and faculty; (e) mandating that students have a weekly 1:1 meeting with their assigned nursing faculty
member; and lastly, (f) providing workshops to African American nursing students that would feature African American leaders as guest speakers who can offer insight into leadership, advancement, and keys to success.

New and innovative policies are necessary for increasing the retention rates of African American female nursing students. Administration should actively recruit faculty who mirror the ethnic backgrounds of diverse students (Gardner, 2005).

**Future Research**

This research sought out to determine if a correlation existed between faculty-student relationships and the persistence of African American nursing students. The results identified that students relied heavily upon their family, friends, advisors, counselors and their EOF family for support, encouragement, advisement, mentorship, and motivation.

This study hoped to understand the rationale for the high attrition rates and to create change. Further studies need to be completed to discover strategies designed to increase diversity within the profession of nursing. Little research has been done to examine the relationship that faculty plays on African American nursing students’ persistence within nursing programs. Qualitative and quantitative studies should be implemented to students that were unsuccessful within the nursing program. Exit interviews should also be offered to those students to identify the key factors that contributed to the increased attrition rates.

A qualitative study with unsuccessful African American freshman and sophomore nursing students would render beneficial to discover what can be done, changed, and or implemented to increase retention in this area.
Leadership

Within the literature review, we learned of various leaders within the profession of nursing such as Beverly Malone and Estelle Massey Osborne. These women were noted as prominent leaders who made a difference within the profession of nursing. In order to understand how one may be an effective leader, one has to discover their leadership style and what is most effective for his or her organization.

As a transformational leader, Burns (1978) discusses that transformational leaders and followers may start out as a transactional mindset but later a relationship is developed that is of mutual stimulation. A transformational leader shapes, alters, and elevates the motives, values, and goals of followers and encourages them to transcend their own interests for those of the groups (Burns, 1978). As a nursing leader, I plan to become more involved in conferences and workshops to increase awareness of the lack of diversity within the profession of nursing. I also plan to submit my abstract to research conferences and submit portions of my dissertation to various scholarly journals, which include American Journal of Nursing, Journal of Nursing Education, Nurse Researcher, and other scholarly journals.

Through this research, I believe that this has created further discussion and an awareness of the lack of diversity within the profession of nursing. The African American female senior nursing students benefited significantly from this research study. One participant voiced that this was the first time, while as an undergraduate, that she was given the opportunity to discuss how it felt to be African American and the challenges that she may face. I believe that the voices found through this research will be able to empower, mentor, and promote positive interactions of faculty and students.
Conclusion

While shortages have occurred in health care throughout history, and especially since World War II, experts are discovering that the rising nursing shortage is uniquely serious (nd., 2011). Not only is there a shortage, but there is a major concern with the lack of diversity within the profession of nursing. Moreover, this research can assist the nursing profession as well as higher education institutions in the development of faculty-student relationships to empower the succession of African American nursing students. Additionally, this research can allow institutions to reflect, make needed changes regarding faculty-student interactions, and assist in promoting and retaining African American nursing students.

Unquestionably, the literature mentioned in this study reinforces the benefits of an effective faculty-student relationship and other strategies that promote retention. Students mentioned faculty’s role and their esteem for faculty. Although the reactions regarding current faculty-student relationships were mixed at the university where the participants attended. It was noted that during the course of the interviews and focus group discussion how imperative it was to have a support team that included advisors, mentors, and role models.

Nursing faculty can be positive influences on students who seem to be discouraged or overwhelmed. Faculty can shape new, positive mental models by illustrating a welcoming approach towards students (Bull, Fitzgerald, & Veal, 2012). It is essential to create a safe learning environment in which students communicate in ways that respect diverse views and are appreciative of students as individuals (Bull,
Fitzgerald, & Veal, 2012). Interactions between faculty and students have enduring effects on learning as well as professional development.
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Appendix A

Formal Consent to Participate in an Investigative Study and to be Audio-Taped

EXPLORING THE FACTORS OF PERSISTENCE FOR AFRICAN AMERICAN SENIOR NURSING STUDENTS

A Qualitative Study

Principal Investigator: Yolanda Nelson MSNed, RN-BC

Why is this study being done?

You are being asked to volunteer to take part in a study at Rutgers University, Newark Campus.

The purpose of this research study is to identify student perceptions of faculty and whether or not they may play a role in the persistence of African American nursing students.

You are being asked to take part in the research study because as an African American nursing student you play a pivotal role in assisting to unlock the key to why African American nursing students may not persist and also being a change agent to increase diversity.

Who may take part in this study?

Participation in this study is limited to African American full time senior nursing students.

How long will the study take and how many subjects will participate?

A total of 5-10 participants will take part in this study, which will include interviews and a focus group discussion.

Are there any benefits for you if you choose to take part in this research study?

Although there are no direct benefits that you may gain from taking part in this study, the information generated from your participation may have positive implications for African American nursing students.

Will you be paid to take part in this study?

You will be awarded a non monetary incentive upon completion of the study.

Right to withdraw from the study:
The participant may withdraw from the study at any time without consequences.

**Agreement:**

I have read the procedure described above. I voluntarily agree to participate in the procedure and **I have received a copy of this description.** IF RECORDING IS USED AND REQUIRED FOR PARTICIPATION: I understand that this (interview/focus group) will be (audio-/video-) recorded.

Name (Printed) __________________________________________

Signature: _____________________________________________

Date: ________________

Principal Investigator: ________________________________ Date: ________________

IF RECORDING IS USED BUT IS OPTIONAL, ADD: I agree to allow this interview to be (audio-/video-) recorded. I understand that I can request that the recording be stopped at any time.
Appendix B

Interview Protocol

EXPLORING THE FACTORS OF PERSISTENCE FOR AFRICAN AMERICAN SENIOR NURSING STUDENTS

A Qualitative Study

Thank you for agreeing to take time out of your busy schedule to being a part of this project. In order to assure that I do not miss any information, would it be okay to tape record this interview? I want to remind you that your participation is voluntary and you are free to withdraw from this study at any time. Information provided during this interview is will be helpful in possible future research studies and for the betterment of institutions of higher education. (Interview questions will be asked aloud, audiotaped, and interviewer will take additional notes).

**INTERVIEW QUESTIONS**

1. First can you tell me a little bit about your background? Where are you from?

2. Why did you choose nursing as a major in college?

3. Describe any obstacles or challenges that you may have encountered in college.

4. How did you overcome the obstacles and or challenges?

5. What were some barriers that you may have encountered during your college enrollment
   a. Can you describe any strategies and or interventions that you utilized to overcome those barriers?

6. How do you define persistence?

7. What is the major factor that has caused you to persist throughout the nursing program?

8. How would you describe your interaction with your Professors throughout your college experience?

9. List two recommendations you would make to enhance the school of nursing.

10. Is there anything more that you would like to add?

Thank you for talking with me today. I will be analyzing the information that you gave. I will have key points available from the interview within three weeks. You are free to
request a copy to review at any time. And remember, you are always free to contact me if there are any areas upon which would like to give more detail.
Appendix C

Focus Group Protocol

Thank you for agreeing to participate in my research and this group interview. As indicated in the consent form that you have previously signed, a part of the study will be audiotaped. I want to remind you that your participation is voluntary and you are free to withdraw from this study at any time. Information provided during this focus group will be used for data analysis by the research study team. The recording(s) will be stored in a locked file cabinet with no link to subjects’ identity; in a locked file cabinet and linked with a code to subjects’ identity. The discussions that will occur during this focus group will not affect your professional or academic career.

Do you have any questions regarding the Focus Group process?

1. How does race and gender impact your experience as a nursing student?

2. As an African American senior nursing student, how would you describe your interactions amongst you and your Professors?

3. As an African American nursing student, how have you been able to persist or become successful?

Thank you again for your participation. Your responses provided valuable information. I will provide you with an overview of our interview once this session has been transcribed. Please review this, just in case I have misrepresented your responses unintentionally in anyway.

Signature: ________________________________
# Appendix D

**Demographic Participant Sheet**

<table>
<thead>
<tr>
<th>Participant</th>
<th>Age</th>
<th>G.P.A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant A</td>
<td>22 y.o.</td>
<td>3.6</td>
</tr>
<tr>
<td>Participant B</td>
<td>21 y. o.</td>
<td>3.488</td>
</tr>
<tr>
<td>Participant C</td>
<td>21 y.o.</td>
<td>3.3</td>
</tr>
<tr>
<td>Participant D</td>
<td>22 y. o.</td>
<td>3.3</td>
</tr>
<tr>
<td>Faculty A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Faculty B</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>